



Promoting Readiness of Minors in Supplemental Security Income (PROMISE): The Role of PROMISE in the Landscape of Federal Programs Targeting Youth with Disabilities

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The opinions and conclusions expressed in this report are solely those of the authors and do not represent the opinions or policy of any state or federal government agency.



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ACRONYMS AND ABBREVIATIONS

ABLE Achieving a Better Life Experience

ASPIRE Achieving Success by Promoting Readiness for Education and Employment

CIL Center for Independent Living

DB101 Disability Benefits 101

DOL U.S. Department of Labor

DI Social Security Disability Insurance

ED U.S. Department of Education

HHS U.S. Department of Health and Human Services

IDEA Individuals with Disabilities Education Act

IEP Individualized education program

LEA Local education agency

OASDI Old-Age, Survivors, and Disability Insurance

PABSS Protection and Advocacy for Beneficiaries of Social Security

PROMISE Promoting Readiness of Minors in SSI

SSA Social Security Administration

SSI Supplemental Security Income

VR Vocational rehabilitation

WIOA Workforce Innovation and Opportunity Act

WIPA Work Incentives Planning and Assistance



EXECUTIVE SUMMARY

Improving the educational and employment outcomes of youth with disabilities—and reducing their dependence on Supplemental Security Income (SSI)—are high priorities for federal policymakers. To address these issues, the U.S. Department of Education, the Social Security Administration, the U.S. Department of Health and Human Services, and the U.S. Department of Labor launched a joint initiative known as Promoting Readiness of Minors in SSI (PROMISE). The PROMISE initiative funds and evaluates model demonstration projects that promote positive changes for SSI youth, starting at ages 14 through 16, and their families.

In this report, we use information collected as part of the national evaluation of PROMISE to assess the role of PROMISE in the landscape of federal programs targeting youth with disabilities. First, we present the landscape of federal programs for youth with disabilities and explore how the PROMISE projects interact with federal programs. Second, we describe the challenges that youth and families face in accessing and using those programs and the ways that the PROMISE projects attempt to address them. Finally, we document the important changes to the federal service environment prompted by the Workforce Innovation and Opportunity Act (WIOA) and the lessons from PROMISE that can inform WIOA implementation.

The experiences of the PROMISE projects in delivering services to SSI youth and their families can guide federal, state, and local programs in their delivery of transition services and responses to WIOA. Each PROMISE project works within state and local transition environments to affect systems change efforts, facilitate a wide range of services to a population facing numerous challenges in transition, and focus on postsecondary employment and education outcomes at a relatively early age for youth. Policymakers can draw on these experiences to help make decisions about serving transition-age youth with disabilities.



I. INTRODUCTION

Numerous federal programs offer income, health, educational, employment, and other types of supports for transition-age youth with disabilities, and some have changed substantially in recent years. The assistance they offer includes work supports and programs sponsored by the Social Security Administration (SSA) to facilitate the employment of participants in the Supplemental Security Income (SSI) and Social Security Disability Insurance (DI) programs, employment supports through state vocational rehabilitation (VR) agencies and state workforce development (workforce) agencies, and education and training offered by local education agencies and postsecondary educational institutions. These investments are intended to help youth with disabilities become more successful in the labor market as adults and avoid long-term reliance on public income support and a lifetime of poverty. Despite this assistance, the educational and employment achievements of youth with disabilities continue to lag behind their peers. For example, within eight years of leaving high school, youth who received special secondary education services were less likely to enroll in or complete postsecondary education, less likely to live independently, and (among those employed) earned lower hourly wages than their working peers without disabilities (Newman et al. 2011). One reason for these achievement differences might be challenges that youth and families face in accessing and using the supports offered by federal programs.

SSI is an income-support program for children and adults with severe mental and physical health impairments and limited means. The eligibility rules differ for children (those under age 18) and adults. For children, the impairment must affect their functioning; for adults, the impairment must affect their capacity to work (Hemmeter and Gilby 2009). Those who receive SSI as children face a redetermination of their SSI eligibility at age 18 to assess whether they qualify under the adult criteria. In December 2016, 1.2 million children (346,000 of whom were ages 14 to 17) and an additional 662,000 youth ages 18 to 25 received SSI (SSA 2017a). The number of transition-age youth (ages 16 to 24) receiving SSI represents approximately 1 to 2 percent of the general transition-age population; among special education students ages 15 to 18, 21 percent receive SSI (Honeycutt et al. 2014; Liu et al. 2018).

Youth receiving SSI face many barriers to making educational progress and gaining early work experiences that promote a successful, longer-term transition to employment. The severity of their health conditions, family poverty, and confusion about work-related SSI rules create challenges that can limit the opportunities of these youth when transitioning from school to adulthood (Wittenburg and Loprest 2007).

The U.S. Department of Education (ED), in partnership with SSA and the U.S. Departments of Labor (DOL) and Health and Human Services (HHS), is testing an intervention to address the needs of SSI youth and help them overcome transition challenges. The Promoting Readiness of Minors in SSI (PROMISE) model demonstration projects (hereafter referred to as the PROMISE programs) are designed to promote positive changes in the lives of SSI youth, starting at ages 14 through 16, along with their families. Under cooperative agreements with ED, six entities across 11 states implemented PROMISE programs intended to (1) provide innovative educational,

¹ SSI also provides income support to adults age 65 and older without disabilities.

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vocational, and other services to youth and their families; and (2) make better use of existing resources by improving service coordination among multiple state and local agencies.² These goals reflected ED's understanding of two important transition service gaps for youth SSI recipients (ED 2013). By providing services to families as well as youth, the programs could improve families' expectations and advocacy for their youth, thereby promoting the latter's long-term outcomes. By improving partnerships among agencies at the federal, state, and local levels, the programs could improve service coordination, combine resources, and deliver better services to youth and their families. Under contract to SSA, Mathematica Policy Research is conducting the national evaluation of PROMISE; the information in this report comes from its efforts to monitor the implementation of the six programs.

An important factor affecting the current transition environment is the Workforce Innovation and Opportunity Act of 2014 (WIOA). WIOA replaced or amended provisions of the Workforce Investment Act of 1998 (which supported state workforce agency activities and programs, such as employment training and counseling; educational supports; and job search and placement assistance for adults, displaced workers, and youth) and the Rehabilitation Act of 1973 (which guided the activities of state VR and related programs). WIOA was passed in 2014, with most elements implemented beginning in 2015. At the federal level, it includes requirements intended to promote greater interagency collaboration among ED, DOL, and other agencies involved in overseeing services for youth with disabilities. At the state and local levels, it affects the practices of VR and workforce agencies, with additional implications for community rehabilitation providers and local education agencies (LEAs).

The purpose of this report is threefold. First, we present the landscape of federal programs for youth with disabilities and explore how the PROMISE programs interact with federal programs. Second, we describe the challenges that youth and families face in accessing and using those programs, and ways the PROMISE programs attempt to address them. Finally, we document the important changes to the federal service environment prompted by WIOA and lessons from PROMISE that can inform WIOA implementation.

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² Under the cooperative agreements with ED, the six PROMISE programs are being implemented in (1) Arkansas, (2) California, (3) Maryland, (4) New York State, (5) Wisconsin, and (6) a consortium of six western states known collectively as Achieving Success by Promoting Readiness for Education and Employment (ASPIRE). The six western states that make up ASPIRE are (1) Arizona, (2) Colorado, (3) Montana, (4) North Dakota, (5) South Dakota, and (6) Utah.

II. FEDERAL PROGRAMS THAT SUPPORT YOUTH WITH DISABILITIES

PROMISE programs sought to leverage the supports offered through federal programs. In this chapter, we describe the major federal programs available for youth with disabilities and document how PROMISE programs intend to use them in their work with youth and their families.

A. Description of the major federal programs

Federal programs providing support to and promoting the independence of transition-age youth with disabilities have evolved considerably over the past few decades. These programs have been driven by significant and, at times, far-reaching authorizing legislation. For example, the Social Security Amendments of 1972 standardized state programs that had provided cash and other assistance to those with disabilities into a single federal program—SSI—with clear eligibility rules and income amounts, whereas the Rehabilitation Act of 1973 guided federal-state VR services for students and youth with disabilities. This legislation has resulted in a range of public programs that provide income, health care, education, rehabilitation, and employment supports to youth with disabilities. Table II.1 describes the major programs under the purview of SSA, ED, DOL, and HHS that support these youth.

SSA provides income support through DI and SSI to individuals who meet disability and other eligibility requirements. The DI and SSI programs include provisions for work supports intended to encourage employment by allowing participants to keep more of their cash payments and retain eligibility for Medicare or Medicaid as they attempt to work and increase earnings (SSA 2018). One work support particularly applicable to transition-age SSI recipients is the student earned income exclusion, which in 2018 excludes up to \$7,350 in earnings per year from the calculation of SSI payments for students under age 22, resulting in higher SSI payments than would have occurred if that income were considered in the calculation. Another important SSA work support is the continued payment under individualized education programs (IEPs), VR, or similar programs via a waiver (referred to as a Section 301 waiver) that allows SSI and DI participants to continue receiving payments after they become medically ineligible as long as they are participating in an approved program that provides VR, employment, or other support services. SSA also sponsors the Ticket to Work, Work Incentives Planning and Assistance (WIPA), and Protection and Advocacy for Beneficiaries of Social Security (PABSS) programs, which provide various kinds of assistance to those who want to work.

ED administers several transition-specific programs. It develops and enforces regulations related to secondary and postsecondary education of students with disabilities through the Individuals with Disabilities Education Act of 1990 (IDEA).³ It also provides funding for special education services in primary and secondary schools, and administers the federal-state VR program. State VR agencies coordinate with secondary and postsecondary schools to deliver transition-specific services and provide various supports (including postsecondary training and supported employment) related to achieving individuals' vocational goals. ED provides funding

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³ IDEA legislation requires free access to preschool, primary, and secondary education, and specifies that education services must be individualized to a student's needs.

for parent information centers, which educate parents of students with disabilities about disability rights, education issues, and advocacy.

DOL funds an array of employment and training programs implemented by state workforce agencies (DOL 2016, 2018b). Examples include YouthBuild (a program for low-income transition-age youth to learn skills in the construction trade) and Job Corps (a residential training and skill-building program for transition-age youth), as well as services targeted to at-risk youth, such as tutoring, paid and unpaid work experiences, occupational training, and postsecondary education. The programs focus on two types of eligible youth: (1) those who are out of school and ages 16 to 24; and (2) those who are in school, have low income, and are ages 14 to 21. Individuals with disabilities are one of the at-risk groups targeted by these programs.

HHS sponsors three programs for which many youth and young adults with disabilities are eligible. It provides health care supports through the Medicaid and Medicare programs. It also allows for Medicaid waiver programs, some of which provide enhanced employment and independent living services to individuals with significant disabilities. Under some circumstances, individuals receiving SSI and DI who lose their cash payments because of earnings are eligible to continue their Medicaid and Medicare coverage under certain SSA work incentives provisions (such as continuation of Medicare coverage for 93 months after a DI beneficiary completes a trial work period and continuation of Medicaid for certain SSI recipients who work [Section 1619 (a) and (b)]). In addition, HHS oversees Centers for Independent Living (CILs), which are authorized under WIOA to provide independent living skills and other programs for individuals with disabilities.

A variety of other programs supplement these major federal services and supports. For example, Achieving a Better Life Experience (ABLE) accounts represent a relatively new opportunity for individuals with significant disabilities to save money without losing eligibility for program participation, including SSI. People whose conditions began before age 26 are eligible and can use their savings for disability-related expenses, such as housing, employment, personal supports, and assistive technology. Additional programs target specific populations (such as Native Americans, persons with blindness, individuals with developmental disabilities, and youth in the juvenile justice or corrections system) or offer specific types of services (such as assistive technology or supports for postsecondary education).

Table II.1. Major federal programs supporting transition-age youth with disabilities

| Federal agency/program | Description | Target population | Federal authorizing legislation |
|---|---|--|---|
| SSA | | | |
| SSI | Means-tested income support program; includes provisions to help support employment, such as the continued SSI payment under an IEP, VR, or a similar program after medical cessation (Section 301) and the student earned income exclusion | Youth with health impairments that limit functioning at school or work and whose households have limited income and resources; payments are means tested; different disability definitions for children and adults | Title XVI of the Social Security Act |
| DI | Income support program; includes provisions to help support employment, such as the continued payment under an IEP, VR, or a similar program (Section 301) | Adults with work- preventing disabilities who are insured under the OASDI program (with eligibility and benefits related to worker contributions); children with disabilities whose parents receive OASDI benefits might also be eligible for benefits | Title II of the Social Security Act |
| Ticket to Work and Self- Sufficiency Program | Access to employment services through VR agencies and SSA-affiliated providers (employment networks) | Adults receiving SSI or DI | Ticket to Work and Work Incentives Improvement Act of 1999 (Ticket Act) |
| PABSS | Advocacy and legal assistance, as well as advice about employment supports and SSA work incentives | Individuals receiving DI or SSI | Ticket Act |
| WIPA | Benefits counseling and information about the use of work incentives and how earnings affect benefits | DI and SSI participants over age 14 | Ticket Act |
| ED | | | |
| Special education | Free education for children with disabilities; IEPs guide services and supports for secondary school success and transition | Children in primary or secondary school who have disabilities requiring special education services | Education for All Handicapped Children Act of 1975; IDEA |
| State VR programs | A federal-state program intended to help people with physical and mental impairments work by providing services, including medical and therapeutic services, counseling, education, training, and job placement assistance | Individuals with health conditions that limit employment who can benefit from receiving VR services and require VR services to obtain employment | Rehabilitation Act of 1973; WIOA |
| Parent Training and Information Centers | Information centers for parents to provide training and technical assistance on rights, education, and transition issues; every state has at least one center | Parents of students with disabilities | IDEA |

Table II.1. (continued)

| Federal agency/program | Description | Target population | Federal authorizing legislation |
|--|--|---|---|
| DOL | · | | - J |
| State workforce development agencies | Programs integrate job training, adult education and literacy, and VR programs into a one-stop delivery system; examples of youth programs include Job Corps, Pre-Apprenticeship, and YouthBuild. Out of the total, 75 percent of funding is allocated to out-of-school youth. Program elements include tutoring, alternative secondary school services, paid and unpaid work experiences, occupational skill training, education offered concurrently with workforce preparation and training, leadership development opportunities, supportive services, adult mentoring, follow-up services, comprehensive guidance and counseling, financial literacy education, entrepreneurial skills training, services that provide labor market and employment information, and postsecondary education and training preparation activities | Out-of-school youth (youth ages 16 to 24 not in school who meet one of the at-risk definitions, such as school dropout, having a disability, or homelessness) and inschool youth (youth ages 14 to 21; attending school; with low income; and meeting one of the at-risk categories, such as having a disability) | Workforce Investment Act of 1998; WIOA |
| HHS | | | |
| Medicare | Federal health insurance program | DI beneficiaries (after a two-year waiting period for coverage) | Title XVIII of the Social Security Act |
| Medicaid/Children's Health Insurance Program | Federal- and state-funded health care coverage administered by states | Low-income families who meet state's eligibility requirements; SSI youth in most states are eligible for Medicaid, depending on eligibility requirements that vary by state | Title XIX of the Social Security Act |
| Medicaid home- and community-based services waivers | States can provide employment and other services in a noninstitutional setting | Varied target groups; can include youth and young adults with specific conditions (such as intellectual and developmental disabilities) | Section 1915(c) of the Social Security Act |
| Centers for Independent Living Note: This table include | Community-based programs to promote independent living through skills training, peer counseling, community outreach, advocacy, employment, and other services | People with disabilities | Rehabilitation Act of 1973; WIOA |

Note: This table includes only programs that target transition-age youth with disabilities; it does not include other programs that may be available to these youth, such as housing and food assistance. For programs described in the table that serve youth and adults, the table focuses on the program aspects that support

youth.

DOL = U.S. Department of Labor; ED = U.S. Department of Education; HHS = U.S. Department of Health and Human Services; IDEA = Individuals with Disabilities Education Act; IEP = individualized education program; OASDI = Old-Age, Survivors, and Disability Insurance; PABSS = Protection and Advocacy for Beneficiaries of Social Security; SSA = Social Security Administration; DI = Social Security Disability Insurance; SSI = Supplemental Security Income; VR = vocational rehabilitation; WIPA = Work Incentives Planning and Assistance; WIOA = Workforce Innovation and Opportunity Act.

B. PROMISE program interactions with federal programs

PROMISE programs are designed to improve connections among federal programs at the state and local levels to assist youth and families with accessing resources. The programs do so in three ways: (1) through collaborations involving major programs serving youth in transition; (2) by training staff, youth, and families about resources and program rules; and (3) by referring youth and families to programs. Appendix Table A.1 provides a brief description of the key features of the six PROMISE programs. Below we describe some of the specific ways that PROMISE programs interact with major federal programs.

SSA. PROMISE programs work directly with SSA in two ways: (1) to identify youth and families to participate in the demonstration, and (2) to access benefits counseling services (such as those offered by the WIPA programs). As a starting point for their work, PROMISE programs received lists from SSA (with names, addresses, and phone numbers) of youth receiving SSI meeting the age requirements; the programs contacted these youth by mail, phone, and in person to invite them to participate in the demonstration. Though programs might have recruited youth through other means (such as at transition fairs or through referrals from schools and service agencies), the SSA lists were the primary method of recruiting youth and families into the demonstration. SSA updated these lists periodically throughout the recruitment period. In addition, the service models of some programs involve connecting youth and families to their local WIPAs for benefits counseling, whereas others rely on other benefits counseling resources in their communities or have trained their own staff to act as work incentives counselors. Using benefits counseling to improve youth's and families' knowledge of the effects of earnings on benefits and available SSA work supports is an important feature of PROMISE.

PROMISE programs supplement their connections with SSA by training staff, youth, and families to have a basic level of knowledge about SSI rules and how earnings affect SSI payments. PROMISE program administrators believe it is critical for staff to understand the value of existing SSA work supports, such as the student earned income exclusion and continued payments under Section 301, so staff can relay that information to the youth and families on their caseloads. Some programs also conduct trainings for groups of youth about these supports and how to use them, particularly as youth begin their work experiences.

ED. PROMISE programs attempt to connect youth and their families to four types of programs funded by ED: (1) special education services provided by LEAs, (2) state VR agencies, (3) parent training and information centers, and (4) CILs.

- 1. The activities of the programs' staff include connecting with special education staff at LEAs to assist youth with school-based services, advocate for youth and families at IEP meetings, and help youth and families navigate school issues (such as truancy). The PROMISE programs in New York State and California employ LEA staff as their primary case management staff.
- 2. All PROMISE programs are either led by state VR agencies or involve these agencies as part of their state-level collaboratives. All of them also seek to leverage existing VR agency services in some fashion to facilitate employment services and experiences for their youth. For some programs, such as Wisconsin PROMISE, VR services are an integral feature of the service model, and all youth receive such services. For other programs, VR services are part

- of the existing service environment and so may be used to support youth's vocational goals. Still others, such as Arkansas PROMISE, contract directly with the state VR agency to provide program-specific services to youth.
- 3. Almost all PROMISE programs collaborate with the parent training and information centers located in their states to educate parents and family members about their youth's disability, education needs, and transition processes. New York State PROMISE, for example, relies on its parent information centers for targeted individual and group training to parents and guardians on transition and advocacy issues; the program employs staff at the centers for case management and other services targeted to parents and guardians.
- 4. Most PROMISE programs use their local CILs for the supports they offer individuals and families, such as independent living skills and self-determination training. The programs either leverage these services as part of their usual service environment or contract directly with the centers to ensure that youth and families receive specific services as part of PROMISE.

DOL. As with VR services, PROMISE programs attempt to connect youth to existing employment and training programs offered by state and local workforce agencies. Arkansas PROMISE contracts with 10 local agencies across the state to offer each youth two 200-hour summer work experiences, along with 10 hours of pre-employment training. These experiences run parallel to the workforce agencies' existing summer employment programs. Other programs, such as Achieving Success by Promoting Readiness for Education and Employment (ASPIRE) and those in California and Maryland, work to connect youth directly to American Job Centers (formerly referred to as One-Stop Centers) and existing workforce programs. The rationale for this approach is that the PROMISE programs do not want to replicate what already exists regarding employment experiences, though some programs may pay directly for such experiences for those youth who cannot obtain needed services in the community.

HHS. As part of their state-level collaboratives, all PROMISE programs involve the state-level departments that manage Medicaid programs. However, none directly addresses service or access issues related to Medicaid (which most PROMISE-enrolled youth receive).

III. CHALLENGES IN YOUTH'S ACCESS TO AND USE OF FEDERAL PROGRAMS

Despite the number and variety of federal programs available, youth with disabilities face many challenges in accessing and using them (Fraker et al. 2014; U.S. Government Accountability Office 2012, 2016). Specifically, families often report encountering difficulties in understanding and navigating multiple service systems and programs (Carter et al. 2012; Francis et al. 2014). Failure to overcome these challenges can limit the success of youth as they become young adults.

The PROMISE programs' services are intended to address many of these challenges in fundamental ways. This chapter describes six potential challenges that families face in accessing and using services for transition-age youth with disabilities. For each, we describe some of the ways that the PROMISE programs have attempted to address the challenge.

A. Different federal program eligibility rules and incentives

Challenge. Federal programs differ in their rules for eligibility, resulting in varying youth access to services and potentially conflicting incentives for participation. For example, a youth with a significant health condition that interferes with education might receive special education services, yet not qualify for income supports through SSI because the family's income and assets are too high. Ineligibility for SSI could affect eligibility for Medicaid (depending on state Medicaid eligibility requirements) and VR services (because SSI recipients are presumed eligible for VR services). In part, the differences in program eligibility criteria stem from differences in how disability is defined by the various programs. For example, the criteria used by the federalstate VR programs (having a physical or mental impairment that interferes with work and requires VR services to obtain employment) are less restrictive than those used by SSA for adults in the DI and SSI programs (having a physical or mental condition that prevents work at a substantial gainful level and has lasted or is expected to last for at least 12 months or result in death) (ED 2017; SSA 2017a). Programs might also have different rules for children than for adults. The SSI medical eligibility criteria differ by age, so youth who meet the criteria as children (under age 18) might not be eligible as adults (age 18 and over). A similar issue exists for education because youth receiving secondary education supports encounter different processes and responsibilities as they move into postsecondary education. Further, program goals or incentives can complicate youth's involvement with other programs. For example, youth who access labor and VR services and subsequently improve their employment and earnings might encounter difficulties in understanding SSA rules, reporting requirements, and work supports. This lack of understanding could result in unanticipated SSA underpayments or overpayments because of earnings.

PROMISE programs' response to the challenge. The PROMISE programs attempt to address the challenges youth and families face in understanding different federal program eligibility rules and incentives in two ways: (1) providing information and (2) offering consistent access to PROMISE services regardless of changes in eligibility for other programs. Through case management and other avenues, PROMISE program staff offer information about federal programs (such as what they offer and the eligibility criteria) and referrals to services. Referral to or the direct provision of benefits counseling services can help youth and families understand how earnings can affect their SSI payments and eligibility, as well as eligibility for other

programs. The PROMISE program service models include consistent support throughout program operations, regardless of changes in a youth's age, school, disability, SSI eligibility, or employment or family financial status (all of which can affect eligibility for federal programs). Consistent access to PROMISE program services, regardless of the stage of the youth's transition process or characteristics, can benefit both youth and families by providing a single, unchanging point of contact to assist those families with a wide range of transition issues.

B. Fragmented, uncoordinated transition system

Challenge. The array of programs and services available to help youth and families with the transition to adulthood may seem daunting to some families. They must be able to identify, understand, and navigate such programs to use them effectively. The fact that the programs operate relatively independently from one another makes it even more difficult for families to use services effectively because those services may not be well coordinated. For example, to obtain necessary supports, parents might need to visit several different local, state, and federal agencies, each of which has its own applications and administrative oversight (Osgood et al. 2010). Further, staff of the various programs might not be aware of other programs for which a youth or family might be eligible. If staff from the various programs do not communicate with each other about the youth and families they serve in common, they might not be fully aware of the youth's needs and other services the family receives. The onus of understanding and coordinating services across providers falls primarily on the youth and family.

PROMISE programs' response to the challenge. PROMISE programs attempt to actively coordinate services for youth and families in two ways: (1) interagency collaboration at the state and local levels, and (2) case management services provided to youth and families. Thus, the programs aim to address coordination both at a systems and an individual level. At the systems level, each program involves staff from education, labor, VR, and other state stakeholders in state-level collaboratives (such as advisory committees), which provide program staff with information about existing services, an avenue for troubleshooting issues, and a forum for finding ways to minimize barriers to access for program participants. At the individual level, a common feature of all PROMISE programs is that youth are assigned to a case manager. The case manager role is to develop an understanding of the family's needs, be familiar with the state and local transition service landscapes, connect youth and families to needed services, and help families navigate any service-related challenges that arise.

C. Limited or delayed access to transition services

Challenge. Youth's access to federal programs might be limited or delayed if program resources are limited or certain services simply do not exist in the area where a youth resides. Even if youth are eligible for services, some programs might have wait lists. State VR agencies, for example, might operate under an order of selection and so limit the number of individuals served only to those with the most significant disabilities (Silverstein 2010). Before WIOA implementation, state VR agencies varied widely with respect to when they began working with youth, with some agencies starting when youth were sophomores in high school and others waiting until high school graduation (Honeycutt et al. 2015). Medicaid waivers are another example of services that often have wait lists (Kaiser Family Foundation 2018). Delayed access may result in youth not receiving services when needed.

Furthermore, access to services might be limited by geography within a state if they vary because of local administration or availability. For example, youth in rural areas might not have ready access to labor programs or services offered by community rehabilitation providers, and they might encounter transportation barriers in reaching services, schools, and employers. Levels of interagency collaboration can also vary across localities. Community-related differences in services, coupled with socioeconomic conditions, may affect the employment outcomes of youth (Butterworth et al. 2012; Honeycutt et al. 2015).

PROMISE programs' response to the challenge. PROMISE programs have developed processes to facilitate timely access to transition services. They seek to mitigate the potential challenge of limited or delayed access to services by assessing the needs of youth and families frequently and ensuring a connection to service programs. Such connections can occur either through direct service provision from the program, via contracts or referrals to existing service providers, and with solutions to address transportation needs. Although the PROMISE programs cannot affect delays caused by agency waitlists (nearly all programs operated in states where the VR agency was under an order of selection during at least part of the PROMISE implementation period), they can directly provide or connect youth to other services that complement or substitute for the limited or delayed access to services. The programs vary in the mechanisms they use to help ensure access to other program services. The PROMISE programs in Arkansas and Wisconsin primarily deliver services directly or through contracts with local providers. Alternatively, ASPIRE and California PROMISE largely rely on referrals to existing service providers, thereby capitalizing on the natural service environment. Programs sometimes use direct services to supplement referrals to existing program providers when those referrals do not result in youth receiving needed services. For example, Maryland PROMISE relies on existing school, workforce, and VR program services to provide work-based learning experiences for youth. When the youth cannot access those existing services—either because of a lack of availability or a poor fit between the youth and the service—Maryland PROMISE provides these experiences directly, thus ensuring that all participants have the work experiences dictated by the program's logic model. In addition, all programs view lack of transportation as a potential barrier to service access. In response, programs offer transportation supports, such as public transit vouchers or tokens, gas gift cards, and mileage reimbursement.

No matter what mechanisms PROMISE programs employ, they are intended to be applied consistently to youth and families regardless of their geographic location. ASPIRE faces unique challenges in this area. Not only must it ensure consistent service provision for each of the six participating states, it also must provide services for youth and families who reside in the frontier locations of each state's vast rural sections, and address the unique needs of Native American youth. ASPIRE attempts to address these challenges through promoting interstate staff training and collaboration, establishing consistent service standards across states, expecting case management staff to travel to meet with youth and families, and allocating resources to accommodate travel for staff and for youth and families.

D. Lack of information and awareness

Challenge. Youth and families might not be aware of available services from federal programs or where to go for them. For example, they might be unaware of or confused about the supports that SSA offers to promote employment, where to go for employment services, or

available options for health insurance coverage. This lack of knowledge might occur despite federal programs' efforts to educate youth and families. Some examples of these efforts include the following:

- In 2016, SSA began mailing a brochure to SSI recipients ages 14 to 17 that provides information about the age-18 redetermination process, SSA work supports, and federal and other programs that might be relevant to youth with disabilities (SSA 2018).
- The Office of Special Education and Rehabilitative Services disseminates a guide to help youth and families navigate the postsecondary transition process (ED 2017).
- American Job Centers provide a local, centralized source of information for employment, training, and VR services.
- Other efforts to inform youth and families include school IEP transition meetings, the EDfunded parent training and information centers, and the SSA-funded WIPA and PABSS programs.

Despite these efforts to provide information about available services and supports, the large array of services and multiple points of access can generate confusion among families. Staff at secondary schools are responsible for transition planning as long as youth are enrolled in school; they can connect students to school and community resources. However, once youth leave secondary schools, there are many potential sources of information, but no centralized resource that encompasses the wide range of services that might benefit youth with disabilities and their families. There is some evidence that service receipt is lower among youth SSI recipients out of high school than among their peers still enrolled (Honeycutt and Wittenburg 2016). Further, by federal law, there is no formal or systematic process to link or refer SSI youth to other programs (for example, referring them directly to VR agencies) (U.S. Government Accountability Office 2017). In addition, the differences in program eligibility criteria (described in Section III.A) mean that youth and families might not know about the programs for which they are eligible, the circumstances under which that eligibility might start or end, and when participation in one program might affect eligibility for another (U.S. Government Accountability Office 2012).

PROMISE programs' response to the challenge. PROMISE programs strive to provide consistent and timely information to youth and families through multiple means. Encouraging regular contact with a case manager can help ensure that youth and families receive needed information to address transition goals and needs. All of the programs set expectations in this regard. For example, Maryland PROMISE intended for case managers to have small caseloads to allow them time to work with youth and families, and meet the established goal of 8 to 10 contact attempts with families per week. Additionally, some programs developed mechanisms for educating youth and families about resources, issues, and opportunities (as did Arkansas PROMISE through monthly trainings and group meetings), along with referrals to parent training and information centers to improve parent and guardian knowledge about transition issues (as with ASPIRE and California PROMISE). Finally, as services come to an end, some programs are instructing staff to refer youth and families to existing services, such as VR and state workforce programs, and plan to provide families with resource lists so they know where to turn after the program ends.

E. Inadequate preparation for postsecondary education and employment

Challenge. Large numbers of youth with disabilities are not accessing career development learning and experiential activities despite their potential availability through federal programs (Carter et al. 2010a, 2010b). Limited access might be due in part to unavailability of these services or a lack of consistency in the delivery of these services across schools and communities. Most special education students with severe disabilities do not engage in paid work experiences while in high school, though there is consistent evidence of the service being positively correlated with working after high school (Carter et al. 2012). For example, despite a majority of special education students receiving support services at school, only 13 percent engaged in school-sponsored work activities in 2012, and the proportion with paid work experiences outside of school declined from 27 percent in 2003 to 19 percent in 2012 (Liu et al. 2018). The employment rate of youth with disabilities ages 16 to 19 was substantially below that of their peers without disabilities over the 2011–2014 period; in August 2014, the latest month for which data were available, the employment rate for youth ages 16 to 19 with disabilities was 17 percent, compared with 30 percent among their peers without disabilities (DOL 2018a). In addition, there is evidence that special education students enroll in postsecondary education programs after high school at lower rates than their peers without disabilities (Newman et al. 2011).

PROMISE programs' response to the challenge. PROMISE programs aim to provide early preparation for postsecondary education and employment. Each program helps youth set vocational and educational goals directly after program enrollment, and each works with youth and families to develop plans to help youth achieve their goals. Program staff connect youth to or directly provide a range of services, including work-based learning experiences and secondary and postsecondary supports, before youth leave secondary school to maximize their potential for postsecondary success. For example, New York State PROMISE's services include the development of intervention plans for youth intended to outline the types of services to which staff will refer youth. Wisconsin PROMISE staff work to connect youth to PROMISE-specific and usual VR services that are specified in plans developed as part of the youth's participation in the program.

F. Limited use of evidence-based practices

Despite an increasing body of evidence on what leads to better transition outcomes, use of evidence-based practices by the staff at federally funded programs is inconsistent. Two relevant sources of evidence-based transition practices are the *Guideposts for Success* (the National Alliance for Secondary Education and Transition [2005] and the National Collaborative on Workforce and Disability for Youth [2009]) and the effective practices and predictors matrix maintained by the National Technical Assistance Center on Transition (2017). However, not all LEAs and VR agencies may offer staff training about evidence-based practices, and staff vary in their reports of using such practices despite being aware of them (Luecking et al. 2017; Mazzotti and Plotner 2016; Plotner et al. 2014). For VR counselors, practices might differ between those whose caseloads do and do not focus on transition-age youth (for example, providing a different emphasis on career planning and career expectation experiences) (Luecking et al. 2017).

PROMISE programs' response to the challenge. As documented in Honeycutt et al. (2018b), the PROMISE programs have incorporated many evidence-based practices in their work with youth and families, as identified in either the *Guideposts for Success* or National Technical Assistance Center on Transition. Examples include interagency collaboration, connections to local programs and service providers through case management, benefits counseling, financial education, career awareness services, paid work experiences, and parent training and information, though each program applies these practices based on its own service model and transition environment. They also adhere to other effective practices, though these vary across programs.

IV. WIOA AND IMPLEMENTATION LESSONS FROM PROMISE

The implementation of WIOA introduced changes to the landscape of federally funded supports for youth with disabilities. Though the PROMISE programs began operations before WIOA took effect, they have features similar to those required by programs subject to WIOA, so their experiences can inform WIOA implementation. In this chapter, we first describe the major WIOA policies affecting federally funded transition supports for youth with disabilities and then consider lessons from the PROMISE programs relevant to those programs implementing transition services under the purview of WIOA.

A. WIOA changes related to transition-age youth with disabilities

WIOA presents an array of changes to the operations of federally sponsored programs; we identify the most substantial WIOA changes for youth with disabilities in Table IV.1. Broadly, the WIOA provisions seek to improve the coordination of and referrals among the various programs; reduce the overlap in service provision; encourage certain occupational pathways; and shift the emphasis of services from sheltered employment to competitive, integrated employment for people with disabilities. Though many WIOA provisions affect all federal programs, others are directed specifically to state VR and workforce programs. The major WIOA provisions affecting services to transition-age youth include the following:

- For the six federal-state programs addressed by the legislation (Title I adult, Title I dislocated worker, Title I youth, Wagner-Peyser employment services, adult education, and state VR agencies), WIOA requires increased interagency collaboration and integrated service delivery through development of a combined state plan every four years, thus potentially helping to coordinate services. Previously, programs developed interagency agreements with other programs and participated in centrally located service centers (American Job Centers) so that individuals could better access services; however, each developed their plans independent of each other. Programs must also identify individuals concurrently served by other programs and report on a set of common performance accountability measures to track employment, earnings, and skills gain after program completion.
- For DOL-funded programs, WIOA shifts funding to out-of-school youth and away from inschool youth (which reversed the programs' previous emphasis), and increases the types of services available (with additions such as financial education and occupation-specific education and training).
- For VR agencies, WIOA requires two major changes. First, agencies must provide preemployment transition services for high school and postsecondary education students with disabilities, and use 15 percent of their federal funding on these services. Second, it allows agencies to work with students who are potentially eligible for services. These changes represent substantial shifts from how VR provided services before WIOA. Previously, agencies could have provided services similar to pre-employment transition services but had no federal requirements specifying the level of such provision; also, agencies could not serve students before they applied and were found eligible for services.

Table IV.1. Key WIOA provisions affecting services to transition-age youth with disabilities

| with disabilities | |
|---|--|
| Area/WIOA policy | Description |
| Multiagency policies | |
| Competitive, integrated employment for people with disabilities | Requires employment to meet the following conditions: wages are customary for what an employer pays to employees without disabilities and at or above federal and state minimums; employment is at a location within the community where the individual can interact with other employees to a similar extent as an individual without disabilities |
| Improved interagency collaboration | Requires modification of current interagency agreements to incorporate WIOA provisions; promotes integrated and coordinated service delivery across partner programs (workforce agencies, VR, LEAs) through combined state plans that include all WIOA programs |
| Performance accountability measures | Identifies six common performance measures that apply to all WIOA programs: (1) unsubsidized employment during the second quarter after program exit; (2) unsubsidized employment during the fourth quarter after program exit; (3) median earnings during the second quarter after program exit; (4) credential attainment for individuals in postsecondary training or education; (5) measurable skills gain; and (6) effectiveness in serving employers |
| Section 511 regulations | Limits wages below the federal minimum wage unless specific provisions are met by the program or employer; applies to VR agencies, workforce agencies, LEAs, providers, and employers; individuals paid at subminimum wages must meet certain service requirements |
| DOL | |
| Dedicated funding for out-of-school youth | Requires at least 75 percent of local youth funding be spent on out-of-school youth (up from 30 percent); expands definition of out-of-school youth (defined as youth ages 16 to 24 instead of 16 to 21) |
| Dedicated work experience funding | Requires at least 20 percent of local youth funding be spent on paid and unpaid work experiences that include academic and occupational learning |
| Enhancements to Job Corps program | Mandates reporting on common performance measures and establishing community networks with employers and other organizations |
| Enhancements to YouthBuild program | Expands training to growing employment fields (such as green energy); expands definition of eligible youth; requires partnerships with American Job Centers |
| Expands service activities | Expands the number of youth program elements to 14 from 10 (additional services include integrated education and training for a specific occupation or cluster, financial literacy education, entrepreneurial skills training, services that provide labor market information about in-demand industry sectors and occupations, and postsecondary education and transition services); increases emphasis on work experiences |
| VR | |
| Dedicated supported employment funding | Requires spending half of federally supported employment funding to serve youth (and 10 percent on youth with the most significant disabilities), along with a nonfederal match of 10 percent; extends the maximum length of supported employment services from 18 to 24 months, establishes a 2.5 percent cap on the portion of supported employment funds used for administrative costs; requires competitive, integrated employment (or that the individual is working toward competitive, integrated employment) |
| Pre-employment transition services | Mandates spending at least 15 percent of federal funding on pre-employment transition services for students with disabilities who are eligible or potentially eligible for VR (pre-employment transition services include job exploration counseling, work-based learning experiences, postsecondary counseling opportunities, workplace readiness training, and instruction in self-advocacy); requires coordination activities with workforce agencies and LEAs, secondary school transition meeting attendance, and planning meetings; allows for group transition service provision and service provision to students without a VR eligibility determination |

Sources: DOL 2018c; Workforce Innovation Technical Center 2018a, 2018b, 2018c.

DOL = U.S. Department of Labor; LEA = local education agency; SSA = Social Security Administration; WIOA = Workforce Innovation and Opportunity Act; VR = vocational rehabilitation.

Federal programs face potential challenges at the federal, state, and local levels in implementing the changes required by WIOA. First, staff at state VR agencies may have limited knowledge of youth issues and connections with schools they can use to serve students with disabilities, particularly those who have not yet applied for VR services. Second, the shift toward in-school youth for VR agencies and out-of-school youth for workforce agencies fundamentally affects how each agency works with transition-age youth. By extension, these changes also affect how secondary schools provide or connect students to employment-related services. Third, the emphases on skills gain and competitive, integrated employment, coupled with a change in the federal programs' reporting of performance accountability measures, might lead some programs to either not consider serving students with more significant disabilities or refer them to other programs in an effort to improve their performance measures.

B. Lessons from PROMISE relevant to WIOA implementation

The experiences of the PROMISE programs in serving transition-age youth with disabilities can help inform the WIOA implementation choices of federally funded programs. PROMISE programs are not directly affected by WIOA because, as model demonstration projects funded through cooperative agreements, they are not subject to WIOA provisions. However, the programs have many features relevant to federally funded programs, and their stakeholders are subject to WIOA provisions. In many of the states where PROMISE operates, WIOA program officials and policymakers have consulted with PROMISE staff for input on WIOA implementation. Below, we present lessons from the PROMISE programs' experiences relevant to WIOA provisions concerning (1) interagency collaboration and local partnerships; (2) targeting youth eligible for services; (3) pre-employment transition services; (4) additional supports needed by youth SSI recipients; and (5) competitive, integrated employment.

Federal and state-level partnerships are not sufficient for developing local partnerships. PROMISE has involved collaborations at the federal level (ED, SSA, HHS, and DOL) and required various state agencies to participate at the program level. All or almost all PROMISE programs include representatives from education, labor, VR, health, human or social services, and developmental disability agencies, as well as the local nonprofit service providers on their state-level advisory committees. Moreover, staff from developmental disability, education, labor, and VR programs are more frequently involved in these collaborations than staff from other programs, suggesting that other collaboratives might consider developing and leveraging their relationships with these entities—in particular, to promote youth transitions. The federal and state collaborations have potentially benefited the programs (such as through better staff access to information). Nonetheless, these collaborations have not necessarily increased collaboration at the local level. Despite state education department involvement, program staff involvement with individual LEAs, for example, can be challenging. Maryland PROMISE staff spent substantial time negotiating collaborative processes with each separate LEA. Arkansas PROMISE hired a staff person as a liaison with the state department of education and LEAs; nonetheless, Arkansas PROMISE direct service staff reported some connections with individual LEAs as challenging. The PROMISE experience suggests that state-level collaborations may not be sufficient to help connect local programs and providers. State policymakers could consider ways to better involve and connect staff from local service providers and programs to promote youth transition as part of their WIOA collaborations, and might look to the PROMISE programs to identify potential paths for doing so.

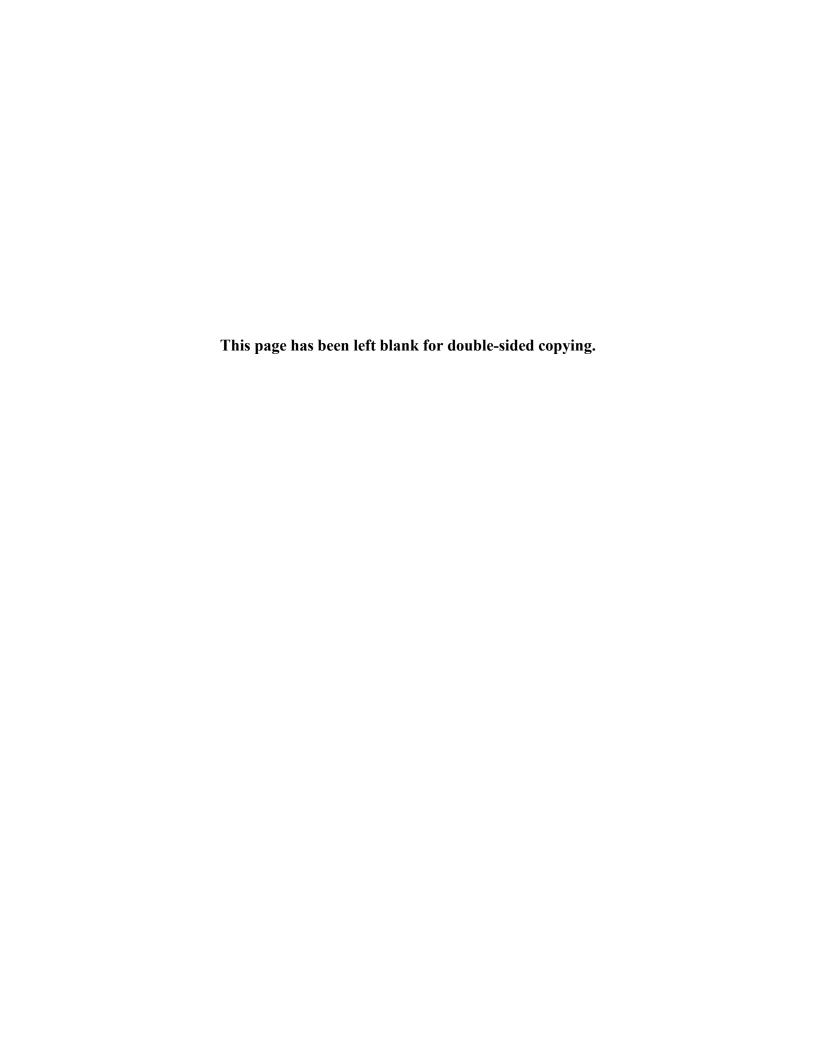
The demand for transition services by SSI youth and families suggests that state and local programs could reach more SSI youth if they could identify them. The PROMISE programs enrolled 16 to 43 percent of the families with SSI youth that they contacted (Anderson et al. 2018; Honeycutt et al. 2018a; Kauff et al. 2018; Matulewicz et al. 2018; McCutcheon et al. 2018; Selekman et al. 2018). These sizeable enrollment rates suggest that SSI youth and families have an interest in and demand for transition services. To achieve these rates, the programs expended considerable effort on outreach attempts and benefitted from the SSI family contact lists provided by SSA under its demonstration authority. Having specific demonstration recruitment targets also facilitated the programs' achievement of high enrollment rates. The laws governing how SSA may share information about its program participants would need to be changed if a similar strategy were to be used more broadly to help schools, state VR agencies, and workforce programs target SSI youth and their families for services.

In the absence of such a change in law, other methods for targeting SSI youth for transition services might be considered. For example, SSA and special education programs might develop a process for seeking written permission from families participating in their programs to share their contact information with relevant service providers by offering them an opt-in or opt-out of such outreach opportunities at strategic points during the transition process (for example, when youth turn age 14). DOL, ED, and SSA could also develop additional informational materials for use at the state and community levels to educate youth and families about local transition service options. This information could be designed to complement the Office of Special Education and Rehabilitative Services transition guide and the brochure SSA already distributes to child SSI recipients. Another option might be to develop and provide training for special education teachers and VR counselors designed to increase their awareness of nonschool resources available to youth with disabilities in their communities and improve their ability to identify students for whom those services might be relevant. State agencies involved with education, Medicaid, and VR could develop interagency agreements that would allow the sharing of Medicaid data to identify SSI youth for outreach and service delivery. Finally, programs that want to find SSI youth and families could identify ZIP codes with the highest concentrations of SSI youth and conduct outreach to schools and neighborhoods in those ZIP codes. None of these suggestions is costless; all would require resources to implement, and the potential gains of such efforts would need to be weighed against their costs. Small pilot tests of the effectiveness of different strategies might inform such a calculation.

Programs can provide younger students with pre-employment transition services. All PROMISE programs have implemented some aspects of pre-employment transition services—particularly work-based learning experiences—to youth before they are of an age to be legally employed. The programs strive to provide youth with opportunities to participate in work-related experiences while still enrolled in high school. Because they serve youth as young as age 14, the programs begin connecting youth to these opportunities at that point (not just when they are in their final year of high school). PROMISE programs also frequently provide services similar to other pre-employment transition services, such as postsecondary counseling and work preparation. Understanding the programs' efforts to deliver these services, along with how they addressed challenges they encountered during implementation, could be useful for VR agencies and schools in offering pre-employment transition services to youth with a wide range of disabilities.

Students receiving SSI might need additional services to supplement pre-employment transition services. Though PROMISE programs deliver services similar to pre-employment transition services as defined by WIOA, youth receive other services, such as benefits counseling, financial education, parent education, and self-determination training, in tandem with those services directly tied to employment. Some of these additional services might promote youth engagement with the program. VR agencies, schools, and other community providers delivering pre-employment transition services might find that students receiving SSI—likely a substantial proportion of students served—could benefit from those supplemental services to support their involvement and attain expected outcomes. If so, these providers or agencies might face the question of how to pay for or connect them to such services—particularly students who have not yet been assessed as eligible to receive VR services. VR agencies are already encountering similar questions regarding such services as transportation for those receiving pre-employment transition services (Miller et al. 2017).

Competitive, integrated employment can be a realistic vocational goal for many students with disabilities. The PROMISE programs emphasize competitive, integrated employment; none connects youth to sheltered employment opportunities or encourages subminimum wage employment. Early findings from PROMISE implementation suggest that the programs have provided competitive, work-based learning experiences to a large share of participants with a variety of disability types and severities. For example, 48 percent of Maryland PROMISE participants had paid work experiences during the first three years of program implementation (Kauff et al. 2018). We expect the shares of youth having paid work experiences to increase as the programs continue to provide services, highlighting the potential for VR agencies, schools, and workforce agencies to do the same. Despite this provision being an explicit goal, some PROMISE programs encountered challenges with their partners in connecting some youth participants to competitive, integrated employment experiences. Arkansas PROMISE staff terminated relationships with workforce agencies whose staff did not offer work experiences that reflected youth's needs in integrated environments. Though California PROMISE relied on local connections with LEAs, VR and workforce agencies, and other providers for services, local staff in some areas reported not referring many youth to workforce programs because of concerns that staff from those programs did not effectively serve youth with disabilities. WIOA's emphasis on competitive, integrated employment might require additional education and training for program administrators and line staff who might not believe that many individuals with significant disabilities can be successful in competitive, integrated employment settings.



V. CONCLUSION

The experiences of PROMISE programs in delivering services to SSI youth and their families can guide federal, state, and local programs in their delivery of transition services and responses to WIOA. Each PROMISE program works within state and local transition environments to affect systems change efforts, facilitate a wide range of services to a population facing numerous challenges in transition, and focus on postsecondary employment and education outcomes at a relatively early age for youth. Policymakers can draw on these experiences to help make decisions about serving transition-age youth with disabilities.

Of the six challenges we described regarding access to and use of services by youth with disabilities, WIOA has positioned federal programs to address one of them—inadequate preparation for postsecondary education and employment—in a substantial way. Increased collaboration under WIOA might also address the challenges of an uncoordinated system, limited access to services, and lack of information, though these challenges might require additional policy interventions to achieve a large impact on the transition experiences of youth. As federal and state policymakers consider ways to address these transition challenges, they might look to the PROMISE program model. Although the programs rely on various services provided through existing federal programs, all offer a core support not available in other federally funded programs—broad-based, family-centered case management. Each program developed a centralized source of personalized case management services—outside of any single program—to help SSI youth and families navigate the transition environment. If findings from the national evaluation suggest that the PROMISE service model is effective, policymakers and transition service providers might consider ways that some of its aspects could be adopted more broadly. The PROMISE programs vary in how they leverage existing federal services, such as benefits counseling and employment services; patterns in the programs' use of those services and the subsequent outcomes of youth and families could provide additional insights about other services that might be needed to fill gaps in the federal landscape of transition supports.

This report is part of the national evaluation of PROMISE. SSA funds the national evaluation to document the implementation, impacts, and costs of the six PROMISE programs. This report, along with a companion report on how PROMISE programs incorporate effective transition practices into their service models (Honeycutt et al. 2018b), offers an overview of the programs' services and how they are designed to address gaps in the existing transition service system. Upcoming evaluation reports will document more completely (1) the services that each youth and family received, and lessons learned regarding enrollment, service delivery, and program implementation; and (2) the impacts of PROMISE on service receipt, employment, education, and other outcomes 18 months after youth enrolled. The PROMISE evaluation will continue to track youth and families for five years after their enrollment in the study to document the programs' long-term impacts on key outcomes. The information the evaluation collects will eventually provide insights as to the effectiveness of the PROMISE programs, successes and challenges in delivering specific services, characteristics of youth served and of youth with better outcomes, and other questions of interest to federal, state, and local policymakers.



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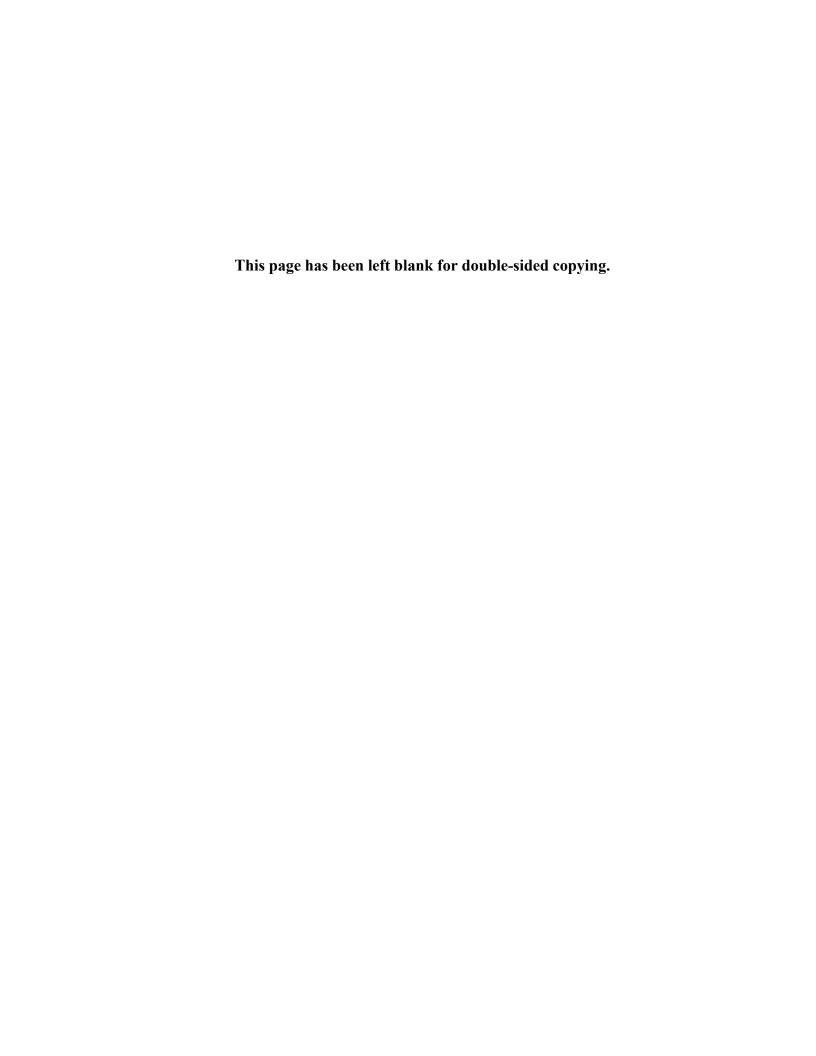
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APPENDIX PROMISE PROGRAM FEATURES



APPENDIX MATHEMATICA POLICY RESEARCH

Table A.1. PROMISE program features

| PROMISE program | Lead agency | Partners delivering PROMISE-specific services | Case management | Benefits counseling and financial literacy training | Career and work-based learning experiences | Parent training and information | Education | Other services |
|-----------------|--|--|---|--|--|---|--|---|
| Arkansas | Arkansas Department of Education | VR, workforce investment boards, CIL, postsecondary education, and University of Arkansas College of Education and Health Professions | Program staff provide case management services to participants and families; local monthly group training sessions for participants and families; participants develop plans for employment and education | Benefits counseling offered through CIL; financial training offered by program staff | Program staff provide employment supports and referrals to VR; participants receive two summer work experiences of 200 hours each with job coaching services (as needed) | Program staff offer case management, training, and other services, including referrals to parents; parents develop plans for employment and education | Program staff provide school supports, including attendance at IEP meetings and visits to postsecondary institutions | Self-determination and self-advocacy training offered by program staff through monthly group trainings; summer camp at college campus |
| ASPIRE | Utah State Office of Rehabilitation | Arizona: Governor's Office of Youth, Faith, and Families; education; and program service providers Colorado: VR and program service providers Montana: Division of Disability Employment and Transitions, education, and program service providers North Dakota: Minot State University and program service providers South Dakota: VR, Black Hills Special Services Cooperative, and program service providers Utah: VR and program service providers | Program staff, typically employed by the lead agency in each state, provide case management to participants and families, help participants set goals, and connect families to resources and employment opportunities | Benefits counseling offered mainly through WIPA programs; financial literacy training offered by program service providers | Program staff help participants access work experiences through existing resources, typically VR or school-based programs, assist with job applications, and arrange volunteer opportunities | Parent Training and Information Centers deliver parent training; program staff offer case management and linkages to resources to assist with parent education and employment goals | Program staff provide school supports, including attendance at IEP meetings, and assistance with postsecondary education exploration and support | Program staff or program service providers offer self-determination training to participants; program staff support other activities to build youth self-determination, leadership, and social skills |

APPENDIX MATHEMATICA POLICY RESEARCH

Table A.1. (continued)

| PROMISE program | Lead agency | Partners delivering PROMISE-specific services | Case management | Benefits counseling and financial literacy training | Career and work-based learning experiences | Parent training and information | Education | Other services |
|--------------------|---|---|--|--|--|---|--|--|
| California | California Department of Rehabilitation | San Diego State University Interwork Institute, LEAs, state universities, family resource centers, and CILs | Program staff provide case management to participants and families; participants create a persondriven plan for services and an individual career action plan | Program staff hired by LEAs and trained as certified work incentives counselors provide benefits counseling and financial literacy training; use of DB 101 online tool | Employment services, including paid and unpaid work experiences and targeted training activities, provided by program staff directly as well as by VR counselors dedicated to PROMISE; additional supports provided through specialized program staff (such as job developers and job coaches) | Program staff provide support to parents, including resources and referrals to VR and other programs; CILs and family resource centers offer training and referrals | Program staff make referrals or provide school supports, including attendance at IEP meetings, advocacy for participants' needs, and drop-out prevention; postsecondary education linkages | Program staff make referrals for or provide (1) youth development and leadership training, including self-advocacy skills; (2) health behavior management and wellness services; (3) access to assistive technology assessments and devices; (4) training in independent living skills |
| Maryland | Maryland Department of Disabilities | Program service providers | Program staff and family employment specialists hired by a program service provider deliver case management services for participants and family members, develop plans describing participants and family members' goals, and outline the steps to achieve them | Benefits and financial counseling and education offered by program service providers | Program staff hired by program service provider deliver employer outreach and job seeker services and arrange paid and unpaid work experiences | Program staff deliver case management and employment services to parents | Program staff provide secondary school supports, including attendance at IEP meetings, and postsecondary education linkages | None |

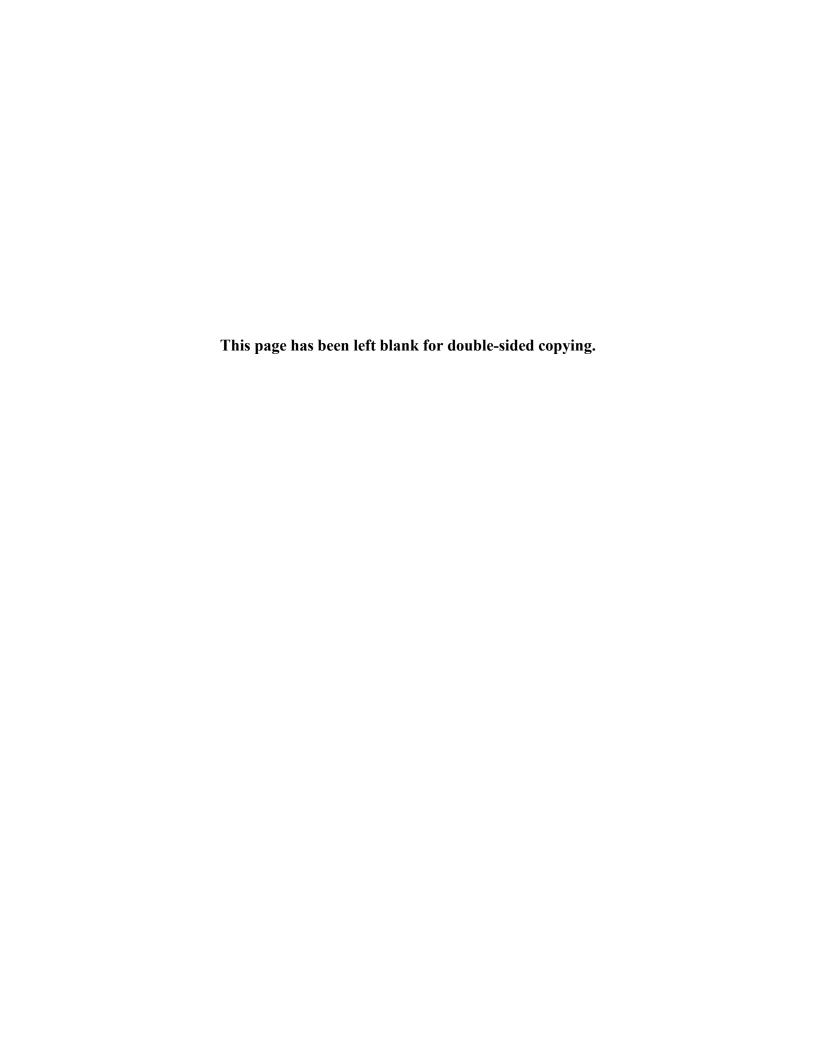
APPENDIX MATHEMATICA POLICY RESEARCH

Table A.1. (continued)

| PROMISE program | Lead agency | Partners delivering PROMISE-specific services | Case management | Benefits counseling and financial literacy training | Career and work-based learning experiences | Parent training and information | Education | Other services |
|--------------------|--|---|---|--|---|--|--|--|
| New York State | New York State Office of Mental Health and Research Foundation for Mental Hygiene | LEAs, parent centers, program service providers, and Cornell University K. Lisa Yang and Hock E. Tan Institute on Employment and Disability | Program staff, typically employed by LEAs, provide case management to youth, develop intervention plans, and make referrals for services | Benefits counseling and financial literacy training offered by program service providers | Community-based workplace assessments, career planning and preparation, and unpaid and paid work experiences and employment supports delivered by program service providers and employment specialists employed by the Research Foundation for Mental Hygiene | Parent centers provide case management to parents, develop intervention plans, make referrals, and deliver parent training | Program staff offer secondary school supports, including attendance at IEP meetings, and postsecondary school supports | Program maintains a website with resources related to self- determination and self-advocacy, and offers day habilitation specialist services to address the independent living skills of youth with more severe disabilities |
| Wisconsin | Wisconsin Department of Workforce Development, Division of Vocational Rehabilitation | Program service providers | VR counselors develop individualized plans for employment for youth, refer participants and parents to program services, and help participants develop resource teams | Work incentives counselors through multiple program service providers deliver benefits counseling; program service provider delivers financial literacy training and opens matched individual development accounts | Work experiences and employment supports offered through VR | Program service provider delivers parent training and refers parents to community resources | VR counselors provide school supports, including attendance at IEP meetings | VR counselors help participants complete health promotion and literacy training; program service providers deliver social skills training |

Source: Honeycutt et al. 2018b.

ASPIRE = Achieving Success by Promoting Readiness for Education and Employment; CIL = Center for Independent Living; DB101 = Disability Benefits 101; IEP = individualized education program; LEA = local education agency; VR = vocational rehabilitation; WIPA= Work Incentives Planning and Assistance.



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