

Integrated Employment Opportunities for Individuals with Disabilities in Nevada: An Assessment

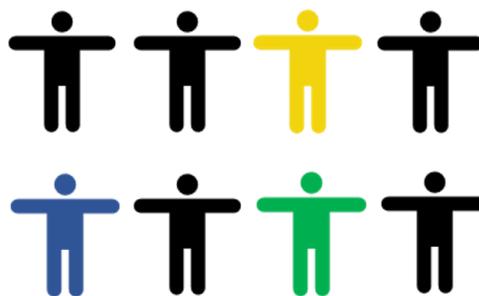


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Executive Summary

Relative to their non-disabled peers, individuals with differing abilities – particularly individuals with intellectual and/or developmental disabilities (I/DD) – have been excluded from workforce opportunities. Recognition that individuals with I/DD should have the same access to opportunities as individuals without disabilities for full integration and inclusion in the activities of community life is the consensus view. Yet it is one that is but a few decades old. And it reflects new norms that were enshrined in the 1999 *Olmstead* decision and have found expression in subsequent policy measures, including, amongst others, the Workforce Innovation and Opportunity Act (WIOA) of 2014.

In the last 10-15 years, Nevada has stated that integrated employment for individuals with intellectual disabilities is a priority. As such, the state has launched various initiatives to help expand integrated employment opportunities for those individuals with intellectual disabilities who may want to pursue them. In 2014, then-Governor Brian Sandoval issued Executive Order 2014-16, which established the Task Force on Integrated Employment. In 2015, the Task Force published Nevada’s Strategic Plan on Integrated Employment 2015-2025.

However, despite reports, initiatives, and new policies enacted in Nevada in recent years, data reveal that integrated employment opportunities for individuals with I/DD remain limited. Nevada lags most other states in the extent to which individuals with intellectual disabilities participate in integrated employment. States support individuals with intellectual disabilities in four settings: integrated employment, community-based non-work, facility-based work, and facility-based non-work. Over the period 2008-2018, the percentage of individuals with I/DD receiving integrated employment services fell from 20 percent to 17 percent. Facility-based services – both work and non-work – account for more than 80 percent of services rendered to individuals with intellectual disabilities and 90 percent of total funding. **Given that Nevada’s stakeholders have identified competitive, integrated employment as a goal and have embraced Employment First as a guiding principle, why have integrated employment outcomes declined?**

This report seeks to address the question. In the process, our team identified some of the barriers that may hinder Nevada’s ability to develop and expand integrated employment opportunities for individuals with intellectual and/or developmental disabilities. A confluence of factors – both national and state – underscore the timeliness, urgency, and objective of this report.

This report is based on the following assumptions. First, competitive integrated employment for individuals with I/DD is a priority of the State. However, a commitment to honor person-centered planning and supported decision-making frameworks means that some individuals with I/DD may choose to receive services from facility-based settings (or any one of the four settings or some combination thereof). We believe Nevada should maintain a balanced portfolio of options to serve the distinct needs and varied interests of individuals with intellectual disabilities. As such, the limited availability of integrated employment opportunities (and community-based, non-work services) raises cause for concern. We are not proposing the elimination of any one type of service. Rather, we seek to identify the barriers that hinder the state’s ability to expand integrated employment opportunities for individuals with I/DD who choose to pursue them.

Section One of this report provides an overview of individuals with disabilities in Nevada. Specifically, our team examines the participation of individuals in integrated employment in Nevada. Our analysis of data reveals:

- Compared to Nevada’s peer states (in terms of population), Nevada is spending less to support individuals with I/DD. In 2018, Nevada spent \$34.6 million on services to support individuals with I/DD. This is significantly lower than funding levels reported by Nevada’s peers with similar populations: Connecticut, \$237.5 million; Iowa, \$58.2 million; Kansas, \$109.1 million; Mississippi, \$60.2 million; Nebraska, \$104.6 million; New Mexico, \$78.0 million, and Utah, \$53.8 million.
- Data does not suggest that Nevada has a greater number of individuals with more severe disabilities than its peer states. Except for Kansas, Nevada reported fewer individuals with I/DD in integrated employment outcomes than its peer states. Integrated employment services accounted for a small percentage (almost 17 percent) of all services rendered to individuals with I/DD in 2018. This percentage was lower than the national average of 21 percent. Moreover, integrated employment services have *declined* over the period 2008-2018 – from 20 percent in 2008 to 17 percent in 2018. These outcomes are troubling given that a recent report found that 62 percent of individuals with disabilities surveyed said they “do not have paid community job and would like a job in the community.”
- Facility-based services – both work and non-work – accounted for the lion’s share (81 percent) of all individuals with intellectual and/or developmental disabilities served by the Nevada Department of Health and Human Services (DHHS) Aging and Disability Services Division (ADSD) in 2018. Facility-based services – both work and non-work – accounted for 85 percent of all funding provided by DHHS ADSD in 2018.
- Data also reveal that mean earnings among individuals with disabilities have fallen slightly and poverty rates have ticked upwards.

Section Two identifies policy challenges and gaps that may contribute to fewer integrated employment outcomes (as a percentage of all outcomes). Our team examines recent quantitative and qualitative data against the goals and strategies outlined in Nevada’s Integrated Employment Strategic Plan 2015-2025. Our team looks at six broad areas:

- Education and Transition Planning
- Employer Engagement, Development, and Support
- Supply of Opportunities
- Impact of Work on Benefits
- Performance Management and Data Systems, and
- Government as Leader



Some of the challenges our research team identified are as follows:

- Some students with IEPs and their families have limited access to information. Some students face significant information and service delivery gaps. Many students with disabilities are not

receiving pre-employment transition services (Pre-ETS), which is a federal requirement per the 2014 Workforce Innovation and Opportunity Act (WIOA).

- Person-centered planning and the supported decision-making framework are not being consistently and/or effectively integrated into transition planning for students. Integrated employment is often not included in service plans developed by case managers.
- Employer outreach, training, and engagement are limited.
- Limited integrated employment and community-based non-work opportunities may result in an over-reliance on facility-based settings.
- There is continued concern about a “benefits cliff”, even though the fear may be more perception than reality.
- Public agencies (and providers) do not collect, use, and report data and metrics in ways that align with interventions or goals, and
- There is a lack of organizational leadership and ownership of efforts to expand integrated employment outcomes for individuals with intellectual and/or developmental disabilities.

Section Three provides a set of recommendations that policy makers may want to take under advisement. Our team offers the following key recommendations.

- Conduct an external evaluation of the Department of Health and Human Services (DHHS) Aging and Disability Services Division and Department of Employment, Training and Rehabilitation Bureau of Vocational Rehabilitation (BVR) and assess against the State Employment Leadership Network (SELN) Framework for Developing High-Performing Integrated Employment Systems.
 - Explore the costs and benefits of moving BVR into the Nevada Department of Education (NDE) or DHHS, as other states have done.
 - Conduct a process evaluation of DHHS ASD as the developmental disability agency of record to determine whether it can be a more proactive partner in improving integrated employment outcomes. Determine if and where there is attrition in participation.
- Designate a responsible agency to own, implement and monitor Nevada’s Integrated Employment Strategic Plan; identify a dedicated leader (champion) within each primary agency (e.g., DHHS, BVR, NDE).
- Codify Employment First principles in legislation.
- Strengthen performance management and data management systems.
- Modernize funding and financing systems to prioritize competitive, integrated employment.
- Improve education and outreach around services and benefits, and
- Leverage the lessons of the coronavirus pandemic to reimagine a more inclusive workforce for individuals with intellectual and/or developmental disabilities.



Integrated Employment Opportunities for Individuals with Disabilities in Nevada: An Assessment

Introduction

The coronavirus pandemic has devastated Nevada’s economy and many of its workers. At its worst, the pandemic has revealed pre-existing fissures in the state’s workforce delivery system that have failed our community’s most vulnerable members. At its best, the public health care crisis has presented Nevada’s decision makers with an opportunity to reimagine Nevada’s workforce system and create a more inclusive workforce.

Relative to their non-disabled peers, individuals with differing abilities – particularly individuals with intellectual and/or developmental disabilities (I/DD) – historically and disproportionately have been excluded from workforce opportunities. Recognition that individuals with I/DD should have the same access to opportunities as individuals without disabilities for full integration and inclusion in the activities and functions of community life, such as employment, community service, and recreational activities, is the consensus view. Yet it is one that is but a few decades old. And it reflects new norms that were enshrined in the 1999 *Olmstead* decision and have found expression in subsequent policy measures, including, amongst others, the Workforce Innovation and Opportunity Act (WIOA) of 2014.

In the last 10-15 years, Nevada has stated that competitive, integrated employment for individuals with intellectual and/or developmental disabilities is a priority.^a As such, the state has launched various initiatives to help expand integrated employment opportunities for those individuals with I/DD who may want to pursue them.¹ (For a summary of recent achievements, see the position statement on Integrated Employment of Sherry Manning, former Executive Director of the Nevada Governor’s Council on Development Disabilities (NGCDD), “Changing Nevada’s Employment Landscape: Increasing Integrated Employment Outcomes for Nevadans with Intellectual/Developmental Disabilities.”)² Many of these efforts have been initiated, facilitated, and supported by the NGCDD, which was “authorized in accordance with Public Law 106-402 of the Developmental Disabilities Assistance and Bill of Rights Act (DD Act) and established under Nevada Revised Statute 232.320 within the State of Nevada, designating the

^a Competitive integrated employment is defined as “work that is performed on a full-time or part-time basis for which an individual is: (a) compensated at or above minimum wage and comparable to the customary rate paid by the employer to employees without disabilities performing similar duties and with similar training and experience; (b) receiving the same level of benefits provided to other employees without disabilities in similar positions; (c) at a location where the employee interacts with other individuals without disabilities; and (d) presented opportunities for advancement similar to other employees without disabilities in similar positions.

Nevada Department of Health and Human Services Director's Office with the purpose of providing support to the Council under the regulations of the DD Act Section 125(d)."³

NGCDD promotes equal opportunity, self-determination, and community inclusion. Its position on employment is "that individuals with developmental disabilities who can and want to work should have access to the resources and supports necessary to gain and maintain meaningful community-based employment."⁴ For some workers with intellectual and/or developmental disabilities, competitive integrated employment is one pathway to fuller inclusion in the community.

In 2014, then-Governor Brian Sandoval issued Executive Order 2014-16, which established the Task Force on Integrated Employment.⁵ The Executive Order outlined the need for the Task Force:

"Whereas, all Nevadans, including individuals with intellectual/development disabilities, should be able to work in an appropriate setting that will allow each individual to offer their strengths to the workforce landscape, improve their quality of life, earn a competitive wage, and contribute to their families, communities, and the economy;

Whereas individuals with intellectual/developmental disabilities continue to experience some of the lowest workforce participation rates, thus creating a need for person-centered planning to support and promote employment opportunities and outcomes for individuals with intellectual/developmental disabilities, and to create a more diversified, inclusive, and integrated workforce [...]."⁶

In 2015, the Task Force (and the Nevada Department of Employment, Training and Rehabilitation Bureau of Vocational Rehabilitation) published Nevada's Strategic Plan on Integrated Employment 2015-2025.⁷ The document contains a strategic plan with twelve goals and dozens of strategies. The Strategic Plan states: "The prevailing philosophy that guides all aspects of this plan is that Nevada will be strengthened by promoting competitive, integrated employment where people with I/DD are employed at or above the state minimum wage."⁸ Undergirding this report is the assumption that competitive, integrated employment is a state goal.

Despite reports, initiatives, and new policies enacted in Nevada in recent years, data reveal that integrated employment opportunities for individuals with intellectual disabilities remain limited. Nevada lags most other states in the extent to which individuals with intellectual disabilities participate in integrated employment.

States may support individuals with intellectual disabilities in four settings: integrated employment, community-based non-work, facility-based work, and facility-based non-work. Over the period 2008-2018, the percentage of individuals with I/DD receiving integrated employment services has fallen from 20.4 percent to 16.7 percent.⁹ Facility-based services – both work and non-work – account for more than 80 percent of services rendered to individuals with I/DD and 90 percent of total funding. Moreover, Nevada service providers continue to apply for and use U.S. Department of Labor 14(c) certificates, which authorize "employers to pay subminimum wages to workers with disabilities that impair their productivity for the work they perform."¹⁰ Community-based non-work services accounted for less than two percent of all services in 2018. There is a significant reliance on facility-based services to support individuals with I/DD.

Whether the reason for the decline in integrated employment outcomes is the cause or the symptom, it is also telling that Nevada appears to have moved away from its explicit embrace of Employment First principles, which, amongst others, acknowledge that “employment in the general workforce is the first and preferred outcome in the provision of publicly funded services for all working age citizens with disabilities, regardless of level of disability.”¹¹

In 2013, executive leadership at the University of Nevada, Reno Nevada Center for Excellence in Disabilities (NCED) and the NGCDD made a presentation to the Nevada Legislature on Employment First in Nevada. In 2015, a research report commissioned by the Task Force on Integrated Employment stated: “Nevada’s position regarding employment is that all adults in Nevada – including Nevadans with intellectual/developmental disabilities – should expect independence and competitive employment. However, for those Nevadans with I/DD who do not currently choose employment, meaningful day habilitation should be an option.”¹²

Today, however, the NGCDD website states the following: “NGCDD believes that individuals with developmental disabilities who can and want to work should have access to the resources and supports necessary to gain and maintain meaningful community-based employment.”¹³ Unlike a handful of other states, Nevada has not yet enacted Employment First legislation that would codify some of the principles and policies that support competitive, integrated employment.

Given that Nevada’s stakeholders have identified competitive, integrated employment as a state goal and have embraced Employment First as a guiding principle, why have integrated employment outcomes (as a percentage of total outcomes) declined?

This report seeks to address the question. In the process, our team identified some of the barriers that may hinder Nevada’s ability to develop and expand integrated employment opportunities for individuals with intellectual and/or developmental disabilities. A confluence of factors – both national and state – underscores the timeliness, urgency, and objective of this report. First, Nevada’s ten-year Integrated Employment Strategic Plan is now five years old, which provides a natural inflection point to assess progress made up to this point.

Nationally, conversations about integrated employment for individuals with intellectual disabilities have attracted considerable focus in recent years. In 2014, the U.S. Centers for Medicare and Medicaid Services issued a rule requiring that Medicaid Home and Community Based Services (HCBS)—including employment-related services—must be delivered in settings that promote and support community integration for the individuals they serve; states must demonstrate compliance with this rule by March 2023.¹⁴ Last year, the U.S. Commission on Civil Rights examined the issue of subminimum wage practices, the findings of which it released in its report *Subminimum Wages: Impacts on the Civil Rights of People with Disabilities*.¹⁵ Last but not least, the U.S. Congress has proposed a bill, the Transformation to Competitive Employment Act, that would phase out the use of subminimum wage practices over a multi-year period.¹⁶

National conversations provide a serendipitous opportunity to pause and assess where Nevada stands on its commitment to increase integrated employment opportunities for individuals with intellectual disabilities. With the goal of creating a more inclusive workplace, this report examines the extent to which Nevada has created integrated employment opportunities for individuals with

intellectual and/or developmental disabilities, identifies barriers that may impede progress, and offers recommendations that decision makers may take under advisement.

This report is based on the following assumptions. First, competitive, integrated employment for individuals with I/DD is a goal of the State, as indicated in Executive Order 2014-16, and additional documents and activities. However, a commitment to honor person-centered planning and supported decision-making frameworks means that some individuals with I/DD may choose to receive services from facility-based settings (or any one of the four settings). We believe that Nevada should maintain a balanced portfolio of options to better align with the distinct needs and varied interests of each individual with intellectual disabilities. As such, the limited availability of integrated employment opportunities (and community-based, non-work services) raises cause for concern. We are not proposing the elimination of any one type of service. Rather, our team seeks to identify barriers that hinder the state's ability to expand integrated employment opportunities for individuals with intellectual disabilities who choose to pursue them.

The analysis presented in this report is based on a review of state and national data and dozens of interviews with self-advocates, families, agency representatives, workforce development ecosystem stakeholders, service providers, advocacy groups, nonprofit representatives, state and local education agency officials, and (other) state and national experts.^b As part of this project, the Guinn Center administered a survey of employers in Nevada using a U.S. Department of Labor survey – *Survey of Employer Perspectives on the Employment of People with Disabilities*.¹⁷

Section One of this report provides an overview of individuals with disabilities in Nevada. Our team examines the participation of individuals in integrated employment in Nevada. Despite the publication of recent reports and implementation of new policies, data reveal that integrated employment outcomes (as a percentage of all outcomes) have declined in the last decade.

Section Two identifies policy challenges and gaps that may contribute to the decline in integrated employment outcomes for individuals with intellectual and/or developmental disabilities. Our team examines recent quantitative and qualitative data against the goals and strategies outlined in Nevada's Integrated Employment Strategic Plan 2015-2025. Our team looks at six broad areas:

- Education and Transition Planning
- Employer Engagement, Development, and Support

^b This report was supported by the Marshall R. Matley Foundation and the Nevada Governor's Council on Developmental Disabilities (NGCDD) through grant funds from the U.S. Department of Health and Human Services; Administration on Community Living grant #2001NVSCDD-01 and 25 percent matching funds appropriated by the Nevada State Legislature under NRS 232.320 administered through the State of Nevada Department of Health and Human Services. The contents are solely the responsibility of the authors and do not necessarily represent the official views of the NGCDD or any other associated or supporting agency. This report shall be considered "Draft" until the NGCDD Council approves it at its December 2021 meeting.

- Supply of Opportunities
- Impact of Work on Benefits
- Performance Management and Data Systems, and
- Government as Leader

Some of the challenges our research team identified are as follows:

- Some students with IEPs and their families have limited access to information; some students face significant information and service delivery gaps.
- Person-centered planning and the supported decision-making framework are not being consistently and/or effectively integrated into transition planning for students. Integrated employment is often not included in service plans developed with case managers.
- Employer outreach, training, and engagement are limited.
- Limited integrated employment and community-based non-work opportunities may result in an over-reliance on facility-based settings.
- There is continued concern about a “benefits cliff”, even though the fear may be more perception than reality.
- Public agencies do not collect, use, and report data and metrics in ways that align with interventions or goals, and
- There is a lack of organizational leadership and ownership of efforts to expand integrated employment outcomes for individuals with intellectual and/or developmental disabilities.

Section Three provides a set of recommendations that policy makers may want to take under advisement. Our team offers the following key recommendations.

- Conduct an external evaluation of the Department of Health and Human Services (DHHS) Aging and Disability Services Division and Department of Employment, Training and Rehabilitation Bureau of Vocational Rehabilitation (BVR) and assess against the State Employment Leadership Network (SELN) Framework for Developing High-Performing Integrated Employment Systems.
 - Explore the costs and benefits of moving BVR into the Nevada Department of Education (NDE) or DHHS, as other states have done. Conduct a process evaluation of DHHS ASD as the developmental disability agency of record to determine whether it can be a more proactive partner in improving integrated employment outcomes. Determine if and where there is attrition in participation.
- Designate an agency to implement and monitor Nevada’s Integrated Employment Strategic Plan; identify a dedicated champion within each primary agency (e.g., DHHS, BVR, NDE).
- Codify Employment First principles in legislation.
- Strengthen performance management and data management systems.
- Modernize funding and financing systems to prioritize competitive, integrated employment.
- Improve education and outreach around services and benefits.

Section 1

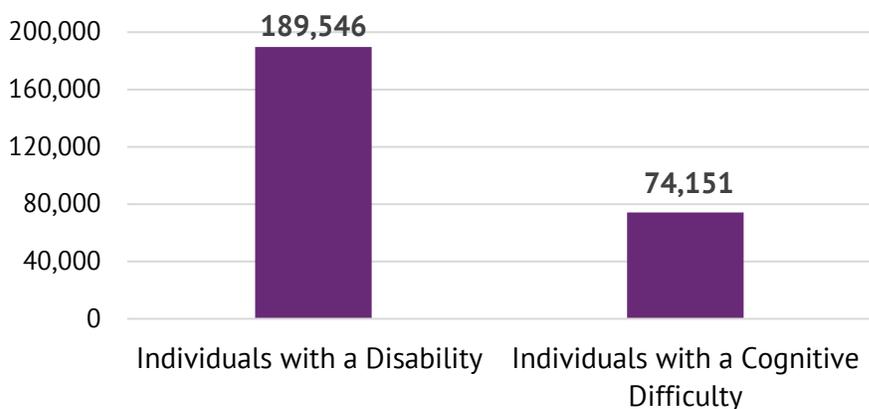
Outcomes for Individuals with Disabilities in Nevada

Socioeconomic Status of Individuals with Disabilities

This section presents an overview on key data points regarding outcomes for individuals with disabilities in Nevada. Where possible given the data source, we focus on outcomes for individuals with intellectual (or cognitive) disabilities.^c It is worth noting that, quite often, agencies report total numbers of cases and/or the number of individuals served, but they rarely provide estimates of the total number of individuals that may be eligible for services (the “denominator”). As such, this often makes it difficult to determine “unmet” need.

U.S. Census Bureau data and survey data collected by National Core Indicators, which is a dataset assembled by public developmental disabilities agencies to measure and track their own performance, provide insights into the adult population with disabilities in Nevada. Using U.S. Census data, we estimated there are 374,515 individuals with disabilities in Nevada, 264,895 of whom are aged 0-64 with a disability and about 189,546 of whom are aged 18-64 with a disability. U.S. Census data suggest there are 74,151 adults (aged 18-64) that have a “cognitive [or intellectual] difficulty” (see Figure 1).¹⁸ According to the 2018-2019 NCI report – of the population of adults with intellectual disabilities, 11 percent indicated that they had a severe or profound intellectual disability.¹⁹

Figure 1. Estimates of Nevada Adult Population (aged 18-64) with a Cognitive Disability



^c While the primary focus of this report is the extent to which individuals with intellectual disabilities have access to integrated employment opportunities, national and state data does not always differentiate data by disability category. Where possible, our team presents data specific to individuals with intellectual disabilities. When using data that references cognitive disabilities, we adopt that term. Otherwise, we use the term intellectual disabilities.

Text Box 1. Example of Customized Employment

Note: The text box below provides an example of how stakeholders incorporated person-centered planning and supported decision-making principles and worked with the individual, Ben Lowery, to provide customized employment, which resulted in an integrated employment opportunity.

Ben Lowery: An Eight Year Success Story

In early 2013, Ben Lowery participated in Goodwill Industries of Southern Nevada (GWSN)'s Community Based Training (CBT) program in Las Vegas. There, Ben was given training on how to work as a retail associate. Despite his self-confidence challenges, Ben passed the program with help from his trainer.

Ben loved working at Goodwill, and immediately applied for a job. Ben could only work part time, and at that time, Goodwill did not have suitable part time positions available. Ben decided to begin volunteering his time at Goodwill and learned each job duty more in depth.

Ben visited one of the Goodwill Career Centers and worked with Disability Employment Specialist (now Employment Trainer). Ben and his trainer discussed possible job opportunities, but Ben told his trainer that he only wanted to work for Goodwill. Ben was not interested in any other job or any other company.

Once his employment goals were set, he began to work hard and made meaningful progress. Ben and his trainer created a competitive resume that outlined his experience in the CBT program as well as his time to volunteering. Ben also completed interview training and mock interviews with not only his direct trainer, but with every Employment Specialist in Career Connections. Acknowledging his skills and training, GWSN created a part-time position for Ben. Ben was hired after submitting his online application, resume, and conducting a successful interview. When Ben began his career at GWSN in October 2013, he received job coaching while cashiering during his first year of employment. Now, Ben no longer needs that support, and he is the favorite cashier for numerous Goodwill shoppers. He is about to celebrate seven years of successful employment and growth at one of Goodwill's stores in Clark County. Ben stated, "My favorite part about working at Goodwill is how everyone made me believe I could do anything in the store I wanted to. I have worked as a Processor, a Donation Attendant, and a Cashier. I can work as well as anyone else."

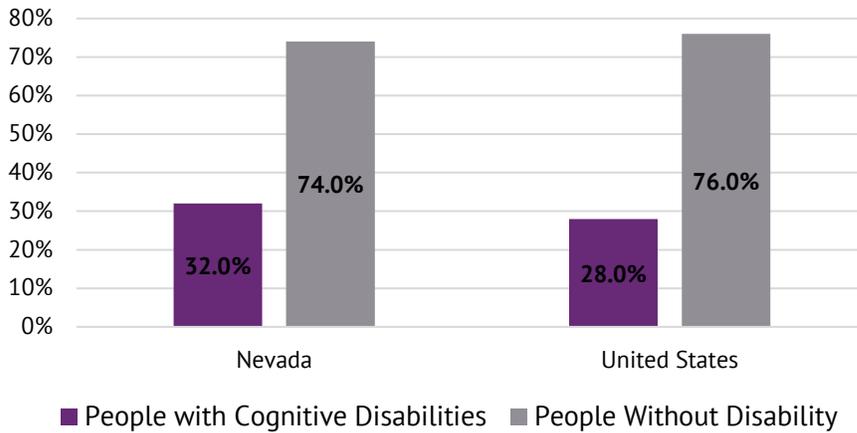


Employment, Income, and Poverty

Employment Among Nevadans with Disabilities Is Low

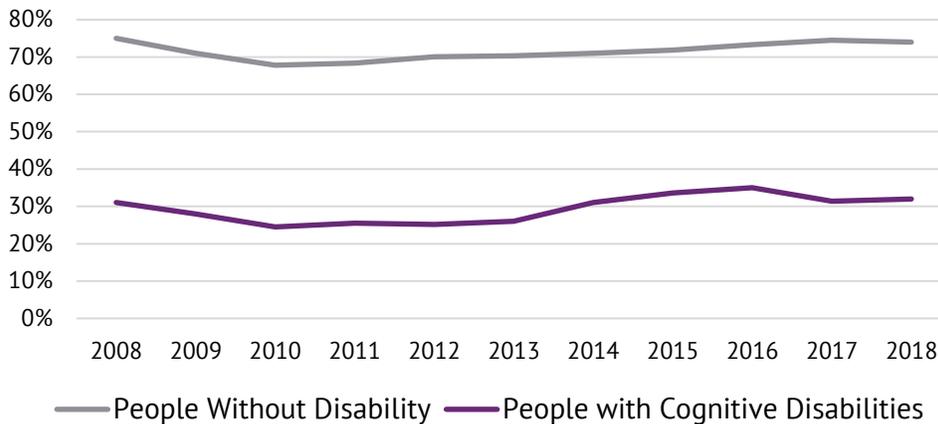
The employment rate for individuals with cognitive or intellectual disabilities is always lower than that for individuals without disabilities. One article noted, “[Nationally], employment rates among people with disabilities are very, very low: Only 40 percent of adults with disabilities in their prime working years (ages 25-54) have a job, compared to 79 percent of all prime-age adults.”²⁰ The employment rate for Nevadans with cognitive disabilities (aged 16-64) is 32.0 percent, which exceeds the national average of 28.0 percent (see Figure 2).²¹ The employment gap in Nevada, as measured by the difference between the employment rates of people with cognitive disabilities and people without disabilities, is 42 percentage points.

Figure 2. Employment Rate, 2018²²



For Nevadans with cognitive disabilities, the employment rate has fluctuated. Relative to their counterparts without disabilities, the employment rate for Nevadans with cognitive disabilities increased more steeply in the 2014-2016 period (see Figure 3).²³

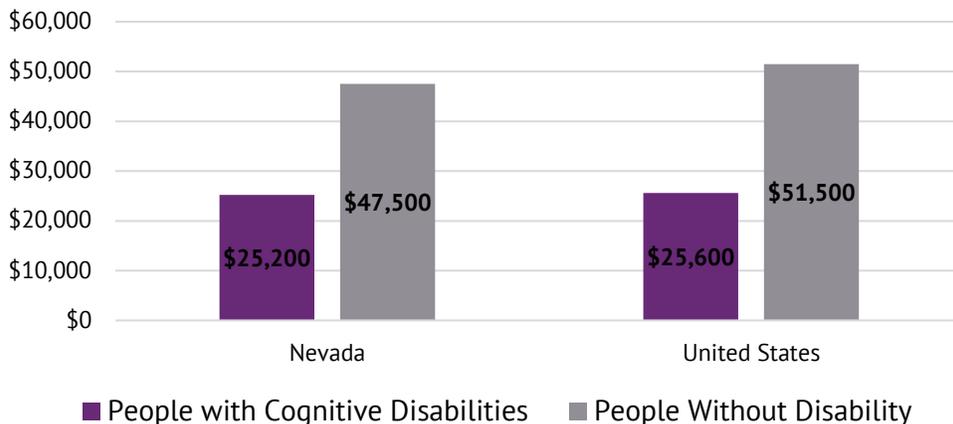
Figure 3. Employment Rate in Nevada, 2008-2018²⁴



Nevadans with Cognitive Disabilities Earn Less Than People Without Disabilities

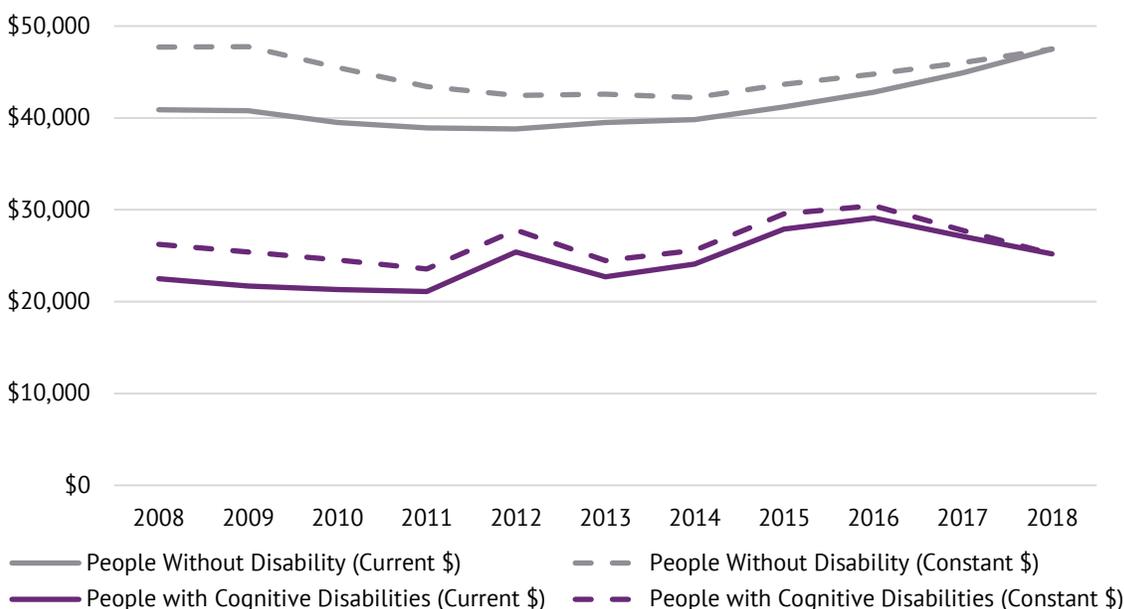
If individuals with cognitive or intellectual disabilities are employed, they earn, on average, less than individuals without disabilities. Annual mean earnings from work for people with cognitive disabilities in Nevada approximates the national average (see Figure 4). Nevadans without disabilities earn, on average, nearly twice that of their counterparts with cognitive disabilities (a 61.3 percent difference).²⁵ The annual income gap is \$22,300, which means that Nevadans with cognitive disabilities earn roughly \$1,858 per month less than those without disabilities.

Figure 4. Annual Mean Earnings from Work, 2018²⁶



Nevadans with cognitive disabilities enjoyed episodic mean earnings growth over 2008-2018, increasing from \$22,500 in 2008 to \$25,200 in 2018 (in current dollars), reflecting a 12.0 percent increase.²⁷ However, when adjusted for inflation, annual mean earnings for Nevadans with cognitive disabilities decreased by 4.0 percent between 2008 and 2018.

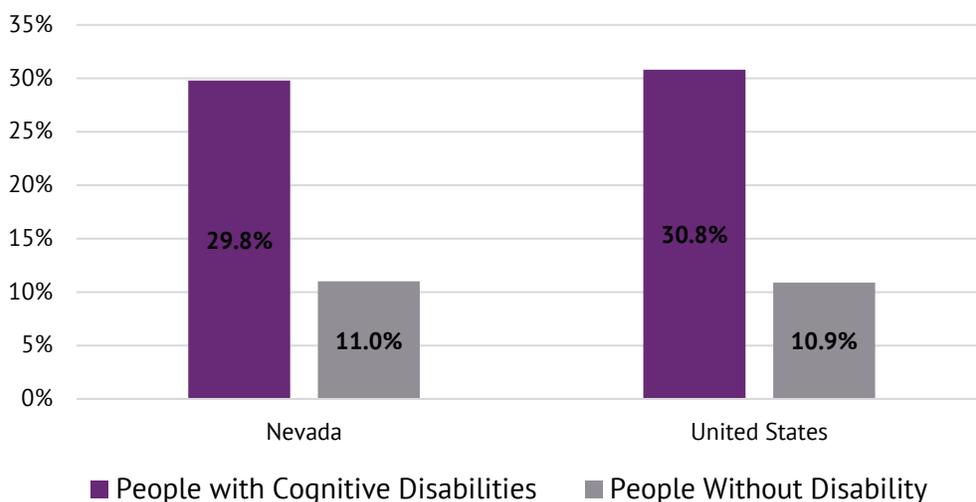
Figure 5. Annual Mean Earnings from Work in Nevada, 2018-2018²⁸



Poverty Among Nevadans with Cognitive Disabilities is High

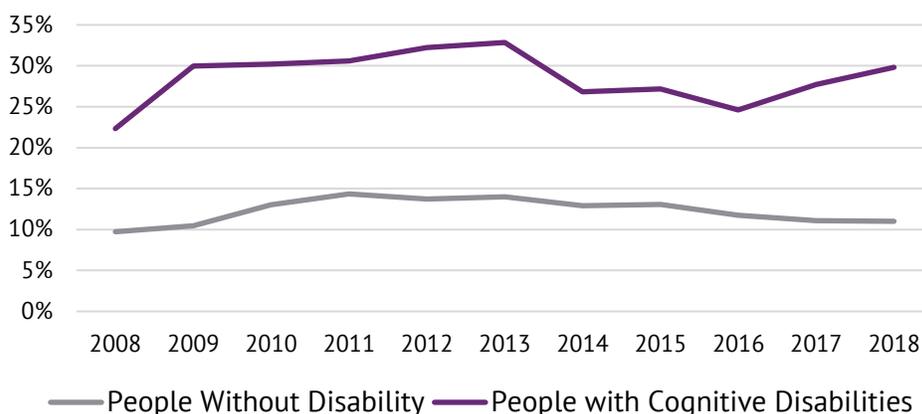
Given the low employment rate and relatively lower earnings, poverty rates among individuals with cognitive disabilities are higher. Individuals with cognitive disabilities live in poverty “at more than twice the rate of people without disabilities.”²⁹ Individuals with cognitive disabilities comprise about 12 percent of the U.S. working age population, but “account for than half of those living in long-term poverty.”³⁰ As Figure 6 shows, the poverty gap (the difference between the poverty rates of people with cognitive disabilities and those without) in Nevada is 18.8 percentage points. While just over one in 10 people without disabilities in Nevada are in poverty, nearly one-third of Nevadans with cognitive disabilities (29.8 percent) are living below the poverty line.³¹

Figure 6. Poverty Rate, 2018³²



The poverty rate for Nevadans with cognitive disabilities increased annually from 2008-2013, before declining in 2014 through 2016. The rate increased again in 2017 and again in 2018, marking a sharp divergence between their counterparts without disabilities. The poverty gap widened to 18.8 percentage points in 2018.

Figure 7. Poverty Rate in Nevada, 2008-2018³³



Integrated Employment

As data in the previous section reveal, individuals with a disability in Nevada are less likely to work, earn less when they do work, and are more likely to live in poverty. However, research suggests that employment (and labor force participation) for individuals with intellectual and/or developmental disabilities can have a positive impact on the greater economy – through higher growth, job creation, and tax revenue.³⁴ A working paper published by the Disability Program at the International Labor Organization reads as follows:

“There is sufficient evidence today that socio-economic integration of persons with disabilities is not only a question of social justice and a right, but also the best solution in terms of social costs/benefits, even when there are no disability benefits. Access to employment is the most cost-effective way to reduce the poverty of children, youth and adults with disabilities, their families, and their communities.”³⁵

Given this, the opportunity for individuals with I/DD to participate in the labor force, should they wish to, is a desired outcome. Employment can improve the economic security of individuals and families. Wages can increase income, improve housing stability, and reduce poverty. As such, gains in labor force participation by individuals with intellectual and/or developmental disabilities can also generate benefits for the larger economy.

Briefly, there are several state agencies in Nevada that provide long-term support to individuals with intellectual disabilities that have been identified and meet the criteria for supported employment. Collectively, these agencies can provide support and services to help individuals with disabilities secure and maintain employment, should they choose to pursue this outcome.

The Nevada Department of Health and Human Services Aging and Disability Services Division (ADSD) “represents Nevada’s elders, children and adults with disabilities or special health care needs.”³⁶ The Department of Employment, Training and Rehabilitation Bureau of Vocational Rehabilitation helps “people with disabilities become employed and to help those already employed perform more successfully through training, counseling and other support methods.”³⁷ DHHS ADSD Regional Centers serve children and adults with intellectual and/or developmental disabilities. ADSD Regional Centers provide “accessible services and service coordination that offer supports to people that reflect their personal choice and desires. Services, choices, and opportunities will focus on best practices, community integration, family supports, and employment.” DHHS ADSD service coordinators are tasked with helping each individual develop a support plan and individualized plan for employment (IPE) based upon the individual’s interest, goals, and abilities. DHHS ADSD Regional Centers provide the following services: family support (including self-directed family support arrangement, family preservation program, purchase of service, and respite), job placement services, psychological services, vocational training, adaptive skill development, and community living arrangements. DHHS ADSD offers the following waiver covered services that can support customized, supported, and integrated employment:

- Jobs and Day Training: Day Habilitation, Pre-Vocational, Supported Employment and Career Planning; and

- Specialized Services: Behavioral Consultation, Training and Intervention, Non-medical transportation, Nursing, Nutritional Counseling, and Counseling.

Recent reports present conflicting conclusions about the demand for employment as a desired outcome. The NCI dataset of survey data, which is collected directly from individuals who have intellectual disabilities, reveal that many individuals would like to work in the community. In the NCI Nevada State report, of the individuals surveyed, 62 percent said they “do not have paid community job and would like a job in the community;” this reflects an increase from 46 percent in 2015-2016.³⁸ This suggests that an increasing number of individuals with disabilities are interested in employment. However, only 28 percent had “community employment as a goal in their service plan.”³⁹ This suggests that there is a communication or coordination gap between an individual’s preferences and what case managers (such as ASD Regional Center service coordinators) are including in the individual’s service plan. Only 21 percent indicated that they were taking “classes, training or [...] something to get a job or do better at [their] current job.” Of those surveyed in Nevada, 78 percent indicated they attended a day program or sheltered workshop, which is higher than the national average of 56 percent, and an increase in Nevada from 70 percent in 2015.⁴⁰ In stark contrast, in a recent national report released in February 2021, the U.S. Bureau of Labor Statistics wrote “in 2020, three percent of those with a disability and eight percent of those without a disability wanted a job.”⁴¹

NCI survey respondents also indicated that they needed additional services, which are presented in Table 1. Transportation appears to remain a challenge for individuals with intellectual disabilities (for more background, see Guinn Center’s 2017 report, *Roadblocks*).⁴² Individuals also indicated they needed additional assistance finding, maintaining, or changing jobs as well as help with education and training. Only eight percent of survey respondents in Nevada indicated they needed additional assistance with benefits and insurance information.

Table 1. Additional Services Needed by Individuals with Intellectual Disabilities in Nevada, 2018-2019⁴³

Additional Services Needed	Nevada	U.S.
Social or Relationship Issues or Meeting People	22%	12%
Transportation	18%	12%
Assistance Finding, Maintaining, or Changing Jobs	18%	11%
Education or Training	18%	10%
Dental Care Coordination	12%	6%
Assistance Finding, Maintaining, or Changing Housing	11%	6%
Health Care Coordination	10%	5%
Benefits and Insurance Information	8%	5%
Service Coordination or Case Management	5%	4%
Day Services (Not Employment)	5%	7%
Communication Technology	4%	5%
Respite or Family Support	2%	8%
Residential Support Services	2%	5%
Environmental Adaptations	1%	5%
Other	4%	7%

Categories of Day and Employment Services

In the pages that follow, we examine data on integrated employment outcomes for individuals with intellectual disabilities in Nevada. For individuals with disabilities who seek to participate in employment and community activities, state agencies can support these individuals with four types or categories of day and employment services: (1) integrated employment, (2) community-based non-work, (3) facility-based work, and (4) facility-based non-work.

Individual integrated employment includes services that are provided in a community setting and involve paid employment of the participant. This includes competitive employment, individual supported employment, group supported employment, and self-employment supports.^{44, d} Integrated employment services include competitive employment, individual supported employment, self-employment, enclaves, and mobile crews. Competitive integrated employment is defined as “work that is performed on a full-time or part-time basis for which an individual is: (a) compensated at or above minimum wage and comparable to the customary rate paid by the employer to employees without disabilities performing similar duties and with similar training and experience; (b) receiving the same level of benefits provided to other employees without disabilities in similar positions; (c) at a location where the employee interacts with other individuals without disabilities; and (d) presented opportunities for advancement similar to other employees without disabilities in similar positions.”⁴⁵

Community-based non-work is defined as “non-job-related supports focusing on community involvement such as access to public resources [...] or volunteer activities.”⁴⁶ “Community-based non-work services include all services that are explicitly focused on supporting people with I/DD to participate in individually chosen and scheduled activities and at locations in the community that members of the general community typically participate in and access. Activities may include volunteer work; postsecondary, adult, or continuing education; accessing community facilities such as the library, gym, or recreation center; any activities that people with and without disabilities do in their spare time.”⁴⁷ It may also include activities that support career exploration, wrap around work time, or serve as a retirement option.

Facility-based employment or work services are “vocational services provided in settings where most people have a disability and receive continuous job-related supports and supervision.

^d Customized employment “refers to competitive integrated employment, for an individual with a significant disability, that is based on an individualized determination of the strengths, needs, and interests of the individual with a significant disability, is designed to meet the specific abilities of the individual with a significant disability and the business needs of the employer.” Supported employment refers to “competitive integrated employment, including customized employment, with ongoing support services for individuals with the most significant disabilities consistent with their strengths, abilities, interests, and informed choice.” Customized employment supplements supported employment services when more intensive interventions are needed to identify, obtain, or maintain employment.

Facility-based work services are also referred to as sheltered work, work activity services, or extended employment programs.”⁴⁸

Facility-based non-work includes “services in a setting where most participants have a disability. These services do not involve paid employment. Individuals may participate in community activities, but the majority of an individual’s time is spent in the program setting. Continuous supports and supervision are provided to all participants. This service category is also referred to as day activity, day habilitation, and medical day care programs.”⁴⁹

We acknowledge that honoring person-centered planning means that some individuals with I/DD may choose to receive services from facility-based settings (or any one of the four settings or some combination thereof). To meet the specific needs and varied interests of individuals with I/DD, Nevada should maintain a balanced portfolio of opportunities (options). As such, we are not proposing the elimination of any type of setting. However, this report seeks to identify the barriers that have prevented the expansion of integrated employment opportunities, despite years of recognizing this outcome as a state goal.

In the pages that follow, our team presents data on several indicators from StateData.Info, which is a longitudinal database funded by the U.S. Department of Health and Human Services Administration for Community Living.⁵⁰ StateData.Info includes data from state IDD agencies, and vocational rehabilitation outcomes and services from the Rehabilitation Services Administration, Social Security Administration, state mental health agencies, the U.S. Census Bureau, the National Core Indicators Project, and the U.S. Department of Labor.

StateData.Info defines the indicators as follows:

Integrated Employment: Number served in integrated employment, including competitive employment, individual supported employment, and group supported employment (e.g., enclaves, mobile work crews).

Facility-based work: Number served in facility-based work programs including day, including sheltered workshops.

Facility-based non-work: Number served in facility-based non-work programs including day habilitation or day activity services.

Community-based non-work: Number served in programs where individuals engage in recreational, skill training or volunteer activities in settings where most people do not have disabilities. Usually includes community integration or participation services.



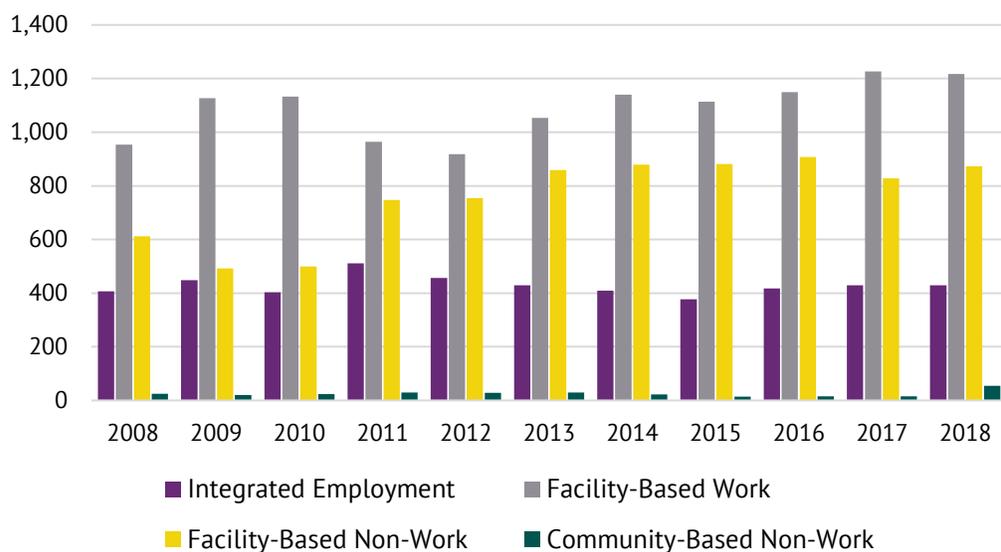
Source: Photo courtesy of the Garden Foundation

Integrated Employment Service Outcomes Have Declined Over Time

Integrated employment services account for a small percentage of all service outcomes in Nevada. Combined, the number of people in facility-based work and facility-based non-work exceed individuals in integrated employment. Facility-based work services have grown steadily over the period 2008-2018. In 2018, 1,217 individuals received facility-based work services. Facility-based non-work peaked in 2016 with 907 individuals (see Figure 8). Integrated employment in Nevada reached its highest level of 511 in 2011, then declined in each year thereafter through 2015, when 377 individuals received this service.⁵¹ In 2008, 407 individuals received integrated employment services, and in 2018, 430 individuals received integrated employment services, reflecting a 5.7 percent increase. By contrast, 954 individuals were served in facility-based work in 2008, a number that grew to 1,217 by 2018, reflecting a 27.6 percent increase.^e

Facility-based non-work increased by 42.6 percent over the same time frame, from 612 individuals in 2008 to 873 individuals in 2018. More than 1,600 Nevadans were served in facility-based work and non-work in 2018, which is roughly 3.9 times higher than the 430 individuals receiving integrated employment services. Over the period 2008-2018, approximately 76.0-83.6 percent of individuals with I/DD were served in facility-based work and facility-based non-work settings.

Figure 8. Number Served in Day and Employment Services in Nevada, by Service Outcomes, 2008 – 2018⁵²



Note: Recipients of IDD agency services (e.g., Nevada DHHS ADSD).

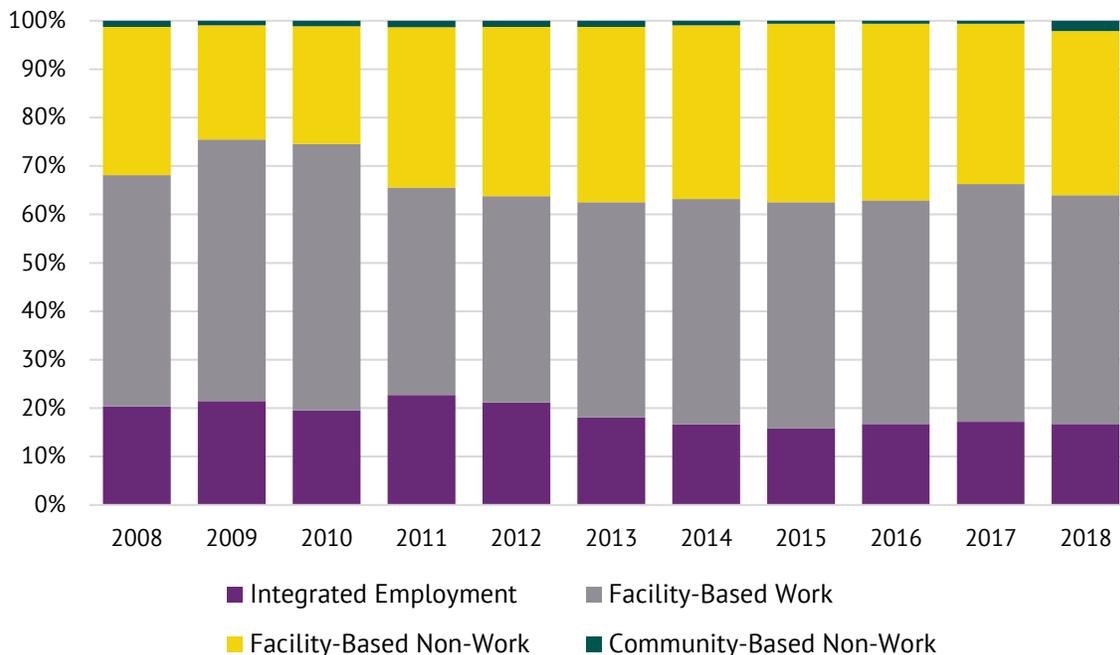
^e Nevada DETR BVR noted the following: “While impactful, the customized employment model was not sustainable due to its cost per client and the lack of qualified service providers. BVR program provides integrated employment services to every client of BVR. BVR counselors are required to select the appropriate significance category for each BVR client, based upon each individual’s disability and barriers.

National data show that over the last decade, facility-based work services – as a percentage of all services – declined. However, integrated employment services also declined. In contrast, non-work services have increased.⁵³ These national trends bear out in Nevada.

First, each service outcome – measured on a per-person basis – as a percentage of those served in day and employment services, has fluctuated over time. Facility-based work comprises the largest share in any given year, ranging from a low of 42.6 percent in 2012 to a high of 55.0 percent in 2010 (see Figure 9).⁵⁴ Facility-based work accounted for 47.7 percent of all services in 2008 to 47.3 percent in 2018, reflecting a slight decline. For those years in which facility-based work accounts for a smaller share of the total served, facility-based non-work seemingly absorbs the difference. Collectively, the two facility-based service outcomes make up anywhere from 76.0 percent to 83.6 percent of all service outcomes. While community-based non-work constitutes a negligible share of the total, the percentage has increased from 1.3 percent in 2008 to 2.1 percent in 2018.

Integrated employment services comprise a significantly smaller share of all services, which has slightly declined over the period of analysis. In 2018, integrated employment accounted for 16.7 percent of service outcomes, representing a year-over-year decrease from its 2017 share of 17.2 percent and six percentage points below its 2011 high of 22.7 percent.

Figure 9. Percentage Served in Day and Employment Services in Nevada: Service Outcomes, 2008 – 2018⁵⁵



Note: Recipients of IDD agency services (e.g., Nevada DHHS ADSD).

A comparison of work and non-work service outcomes reveals that more than half of those served in day and employment services resulted in an employment outcome – either a facility-based or integrated employment outcome (see Figure 10).⁵⁶ In 2018, 64.0 percent of Nevadans served in day and employment services received either an integrated employment or facility-based work outcome. While this represents nearly two-thirds of the total served, it is 11.5 percentage points lower than the 2011 peak. From the figure above (see Figure 9), we observe that the more likely work outcome is a facility-based work outcome (as opposed to integrated employment).

Figure 10. Percentage Served in Day and Employment Services in Nevada: Work vs. Non-Work Service Outcomes, 2008 – 2018⁵⁷

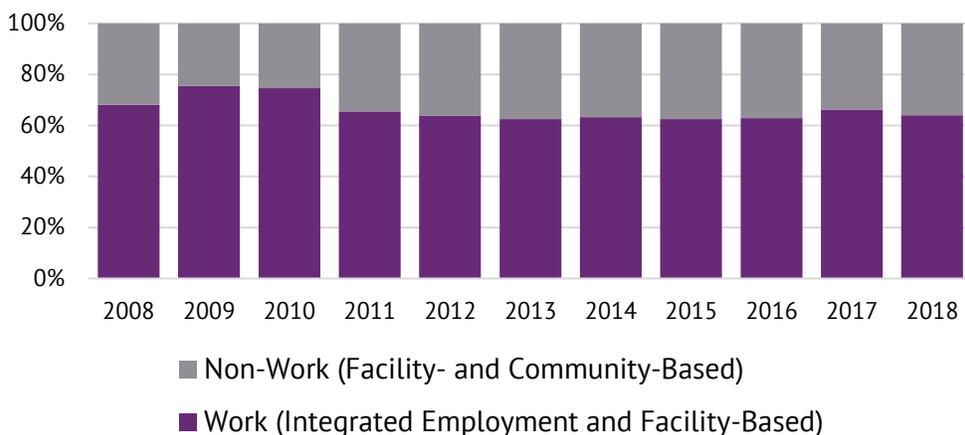
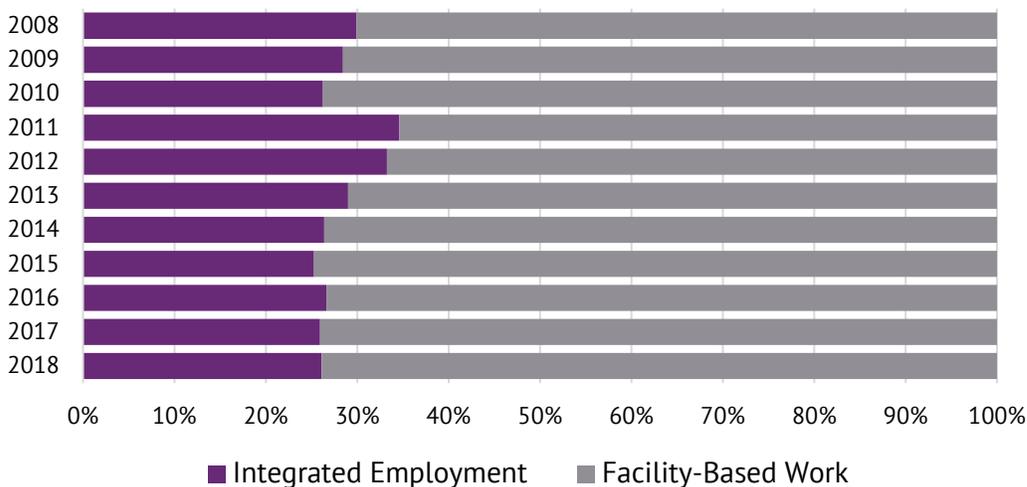


Figure 11 further illustrates that integrated employment services constitute a comparatively smaller share of work service outcomes in Nevada than facility-based work. Of those with an employment outcome in day and employment services, 26.1 percent received integrated employment services in 2018, while 73.9 percent were served in facility-based work. Integrated employment services as share of work service outcomes have been declining since its 2011 high, when more than one-third of individuals (34.6 percent) were served in integrated employment.⁵⁸

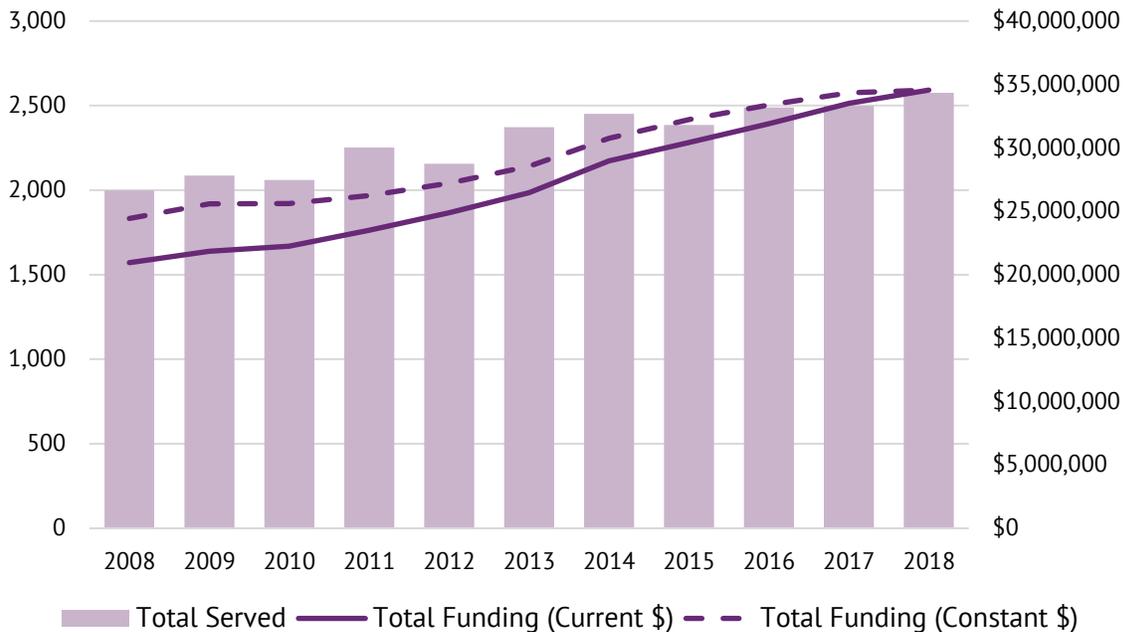
Figure 11. Distribution of Work Service Outcomes in Nevada, by Setting, 2008 – 2018⁵⁹



Funding for Day and Employment Services Has Increased

The total number of individuals served in day and employment services in Nevada exhibits a pattern of alternating increases and decreases from 2008 through 2012. Two years of increases in 2013 and 2014 were followed by a decrease in 2015, after which the total number served increased in each subsequent year through 2018 (see Figure 12).⁶⁰ Data indicates 1,998 individuals were served in day and employment services in 2008, a number that grew to 2,575 by 2018, reflecting a 28.9 percent increase. Although the total number of individuals served in Nevada experienced some ebbs and flows, total funding increased over the previous year in every year since 2008. Total funding in 2008 was approximately \$20.9 million and grew to roughly \$34.6 million in 2018 (65.0 percent). It increased in inflated-adjusted terms, or constant dollars, as well, on an annual basis, for a 41.5 percent real-dollar increase in total funding.

Figure 12. Total Number Served in Day and Employment Services and Total Funding for All Day and Employment Services in Nevada, 2008 – 2018, (constant U.S. dollars)⁶¹



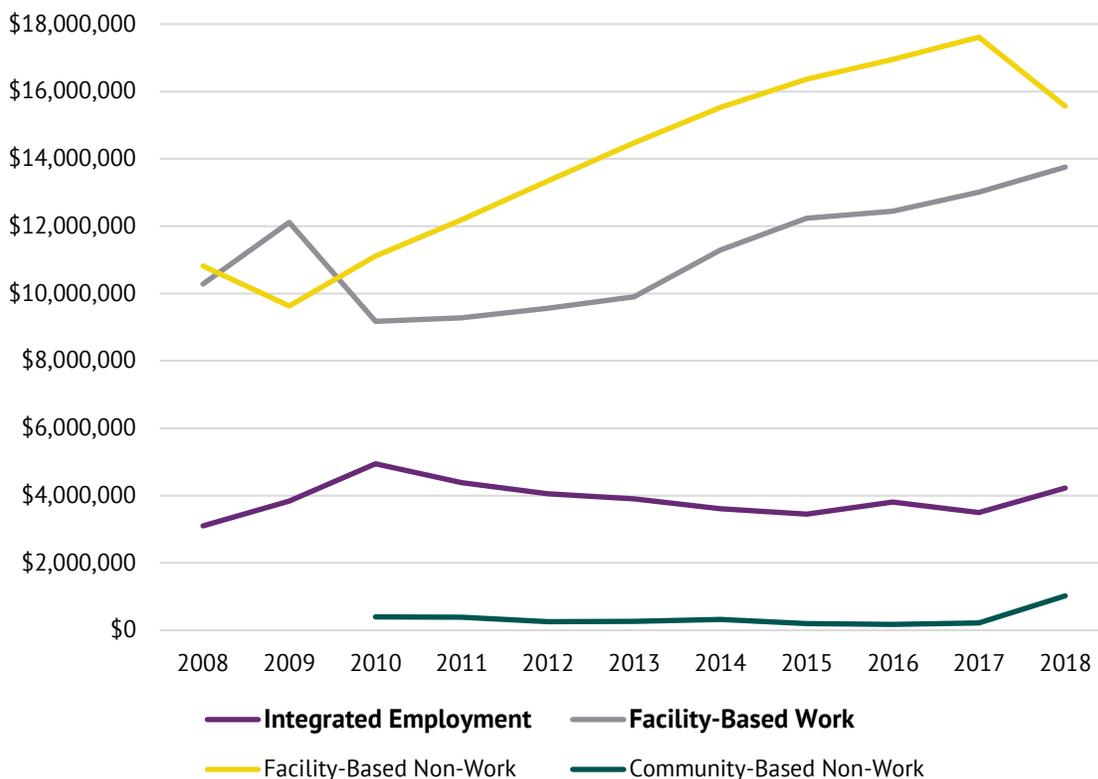
Note: Recipients of IDD agency services (e.g., Nevada DHHS ADSD).

But Funding for Integrated Employment Services Has Declined

Total funding for facility-based work increased steadily since 2010. Between 2010 and 2018, funding for facility-based work increased 72.7 percent.⁶² Funding for facility-based non-work was lower than that for facility-based work only in 2009 and has outpaced its work counterpart in each year since, though its rate of increase is somewhat less steep because of the funding drop-off in 2018 (61.3 percent) (see Figure 13).

Except for 2010, funding for integrated employment services has gradually declined. As Figure 13 indicates, the funding gap between integrated employment services and facility-based work and non-work is fairly pronounced. In 2010, total funding (constant dollars) for integrated employment services was nearly \$4.9 million, and by 2018, that amount decreased slightly to around \$4.2 million, reflecting an 18 percent decrease over time. By contrast, in 2018, funding for facility-based work was approximately \$13.8 million, and funding for facility-based non-work was roughly \$15.6 million. Over the past decade, on average, funding for facility-based work and non-work has accounted for 85 percent of all funding.

Figure 13. Funding for All Day and Employment Services in Nevada, by Service Outcomes, 2008 – 2018, (constant U.S. dollars)⁶³

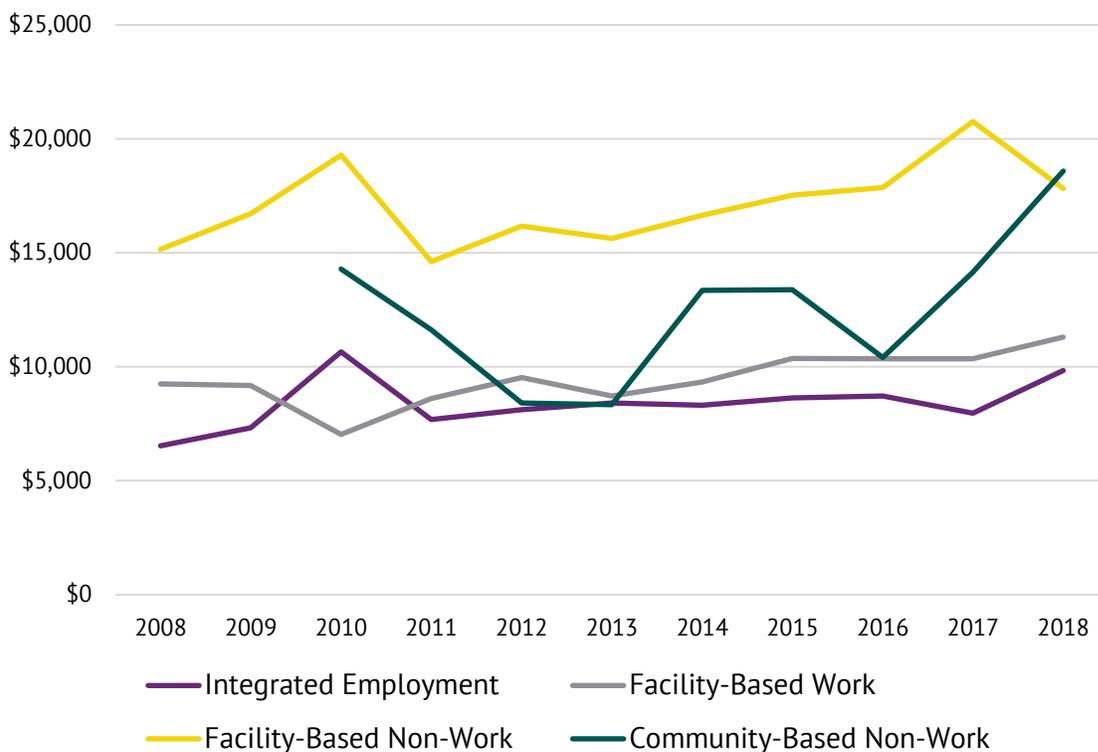


Note: Recipients of IDD agency services (e.g., Nevada DHHS ADSD). Community-based non-work funding data not available for 2009; community-based non-work funding for 2008 cannot be displayed.

Integrated Employment Services Average Spending Is Lower than Other Services

Although total funding for facility-based work services in Nevada exceeds that for integrated employment services by a considerable amount, the comparatively higher number of individuals served in the former means that average spending per service is somewhat closer, if not equivalent. Average spending for integrated employment services in 2010 was \$10,654 – its highest average dollar amount over the period – while that for facility-based work services was \$7,031 (see Figure 14).⁶⁴ That is the only year in which average integrated employment services funding outpaced that for facility-based work services. In 2018, average funding for facility-based work services was \$11,302, while that for integrated employment services was \$9,831. The average funding amount for facility-based non-work services in 2018 was \$17,820. Community-based non-work funding services covers a smaller population than the other service (e.g., 55 individuals in 2018). Thus, the average funding amount per service tends to be higher, as in 2018, when it amounted to \$18,589.

Figure 14. Funding for All Day and Employment Services in Nevada: Average Spending Per Service, 2008 – 2018⁶⁵



Note: Recipients of IDD agency services (e.g., Nevada DHHS ADSD). Community-based non-work funding data not available for 2009; community-based non-work funding for 2008 cannot be displayed.

Again, as illustrated in Figure 14, in 2012, average funding for facility-based work services was \$9,522, while that for integrated services was \$8,413. Average funding for facility-based non-work services is higher than integrated employment services and facility-based work services. Table 2 presents data from Figures 8 and 14 and compares it to national data. This table originally appeared in the 2015 Nevada Funding Strategy Study, prepared for the Nevada Department of Health and Human Services Aging and Disability Services Division by the State Employment Leadership Network.⁶⁶ As Table 2 indicates, Nevada directs more dollars to facility-based work services than the national average but significantly less dollars to community-based non-work services. As noted previously and shown again here, facility-based work and facility-based non-work have accounted for almost 85 percent of all service funds allocated over the past decade 2008-2018.

Table 2. Intellectual and Developmental Disability Agency Data, FY 2012⁶⁷

	Nevada	U.S. Average
Individuals in integrated employment services (n=457)	21.0%	18.0%
Dollars allocated to integrated employment	15.0%	12.6%
Average spending per individual in integrated employment	\$8,113	\$7,746
Total dollars (number of individuals * dollars allocated)	\$3,707,641	
Individuals in facility-based work services (n=918)	42.0%	26.7%
Dollars allocated to facility-based work services	35.0%	18.7%
Average spending per individual in facility-based work	\$9,522	\$9,074
Total dollars (number of individuals * dollars allocated)	\$8,741,196	
Individuals in community-based non-work services (n=28)	2.0%	42.3%
Dollars allocated to community-based non-work services	1.0%	46.1%
Average spending per individual in community-based non-work	\$8,413	\$11,244
Total dollars (number of individuals * dollars allocated)	\$235,564	
Individuals in facility-based non-work services (n=754)	35.0%	50.7%
Dollars allocated to facility-based non-work	49.0%	56.9%
Average spending per individual in facility-based non-work	\$16,175	\$13,683
Total dollars (number of individuals * dollars allocated)	\$12,195,950	

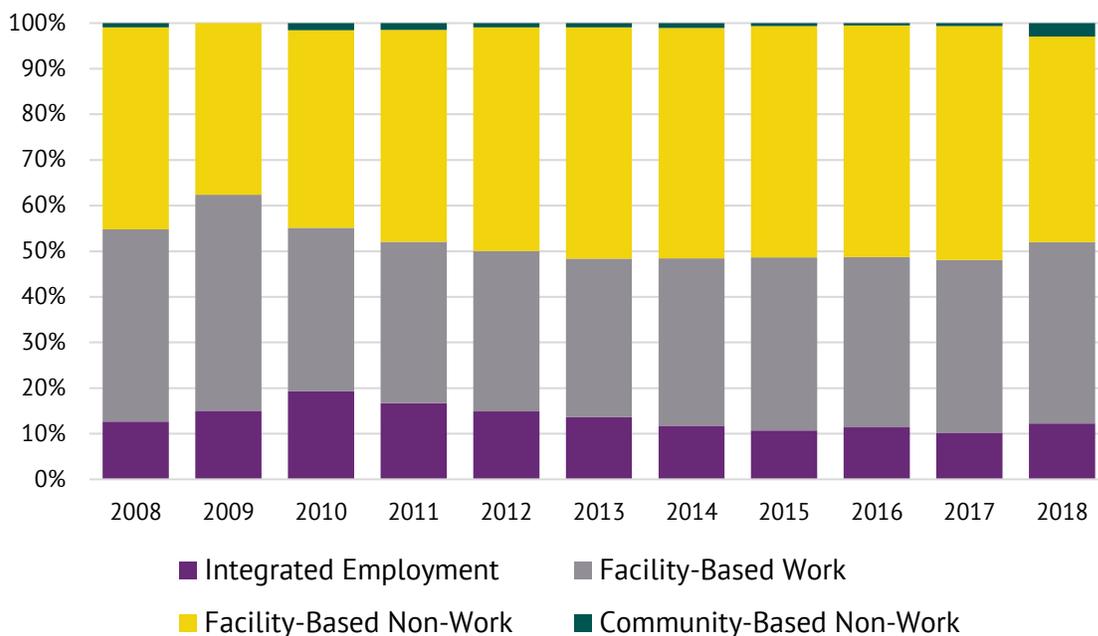


Source: Photo courtesy of the Rovetti Family

The share of funding for service outcomes in Nevada is somewhat analogous to the shares of individuals served in day and employment services in that facility-based services – both work and non-work – collectively account for the largest percentage of total funding. In 2017, facility-based work and facility-based non-work comprised 89.2 percent of total funding. But in 2010, when total funding and average spending for integrated employment services peaked, the collective share of facility-based services amounted to 79.2 percent (see Figure 15).⁶⁸

In fact, nearly one-fifth (19.3 percent) of day and employment services funding was dedicated to integrated employment services in 2010. Specifically, integrated employment services reached its highest total funding level, its highest average spending level, and its highest percentage of total funding. In 2018, funding for integrated employment services comprised just 12.2 percent of total funding, while facility-based work made up 39.8 percent of total funding, and facility-based non-work accounted for 45.0 percent of total funding. One major distinction between share of total served and share of total funding is that, with respect to the former, facility-based work services constituted the largest share per year. However, except for 2009, facility-based non-work services represents the largest share of total funding.

Figure 15. Funding for All Day and Employment Services in Nevada: Service Outcomes Share, 2008 – 2018⁶⁹

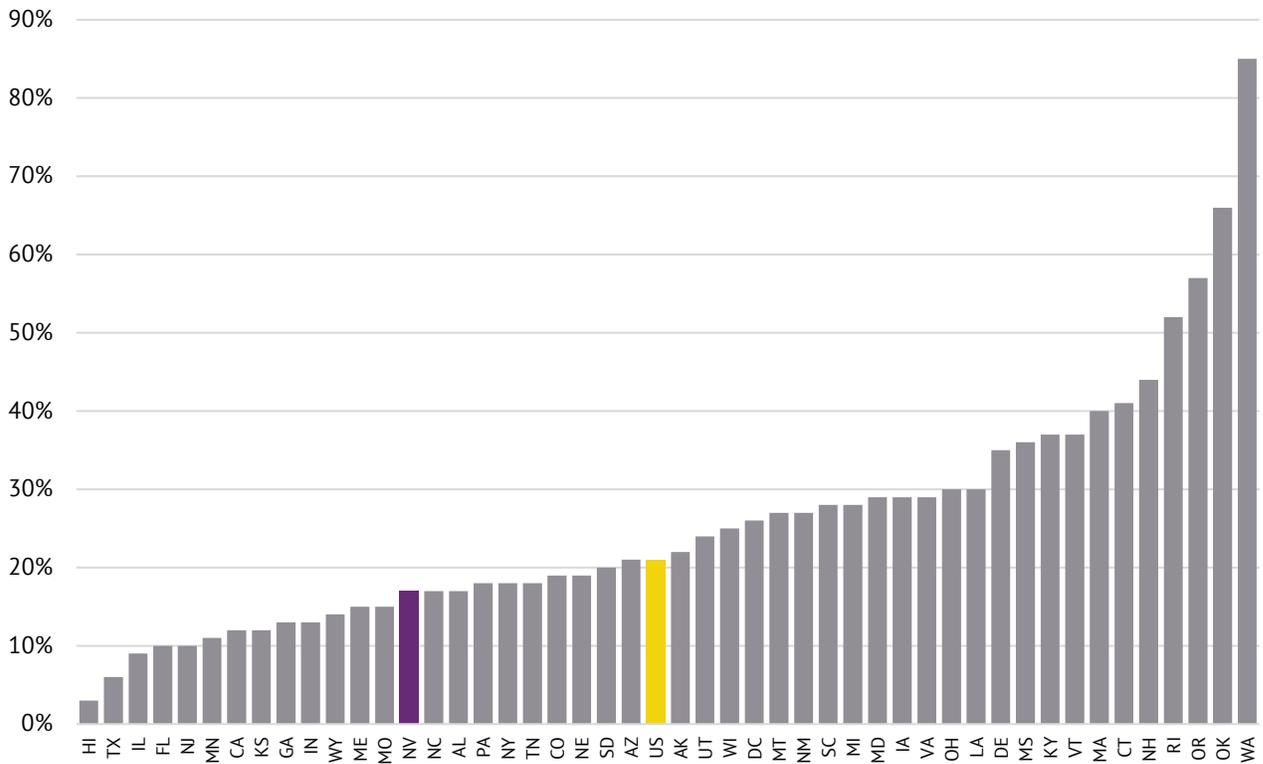


Note: Recipients of IDD agency services (e.g., Nevada DHHS ADSD). Community-based non-work funding data not available for 2009.

Nevada Lags Most States in Integrated Employment Services

Nevada underperforms most states in its share of people served in integrated employment relative to the total served in day and employment services, as shown in Figure 16. In 2018, Nevada’s integrated employment percentage was 17.0 percent, which was below the national average of 21.0 percent.⁷⁰ The states cannot be ranked, as many have identical percentages (e.g., Maryland, Iowa, and Virginia have integrated employment shares of 29.0 percent). However, it may be illustrative to consider them in quartiles, or four groupings of approximately 12 states (see Figure 16 note; only 47 states are displayed for 2018). If we arranged them by quartiles, Nevada would rank near the bottom of the second-lowest quartile. Washington has the highest integrated employment percentage (85.0 percent), while Hawaii has the lowest (3.0 percent).

Figure 16. Integrated Employment Percentage, by State, 2018⁷¹



Note: Recipients of IDD agency services (e.g., Nevada DHHS ADSD). 2018 IDD agency data is not available for Arkansas, Idaho, North Dakota, and West Virginia; these states are not displayed in the figure above.

Table 3 (on the following page) presents information on the four categories of employment and day habilitation services supported and funded in Nevada and compares the Silver State to a set of peer states that have comparable populations. These include Connecticut, Iowa, Kansas, Mississippi, Nebraska, New Mexico, and Utah. The comparisons reveal the following:

- First, Nevada has approximately 74,151 individuals aged 18-64 with cognitive disabilities. According to the NCI Nevada report, of the population of adults with intellectual disabilities, only 11 percent indicated that they had a severe or profound intellectual disability.⁷²
- In 2018, Nevada served the fewest individuals (2,575) among its peers. In contrast, Iowa served 15,023 individuals with intellectual and/or developmental disabilities in day and employment services. Nevada served only three percent of the state's total I/DD population. In contrast, Iowa served approximately 20 percent of its population with disabilities.
- Funding varies across the states. Nevada reported the lowest amount of funding: \$34.5 million. Connecticut reported the highest level of funding: \$237.4 million. Nevada's regional neighbors, New Mexico and Utah, reported funding levels of \$53.7 million and \$77.9 million, respectively.
- Except for Iowa, Nevada has the lowest percentage of community-based non-work services (2 percent) among its peer states. New Mexico has the highest percentage at 87 percent.
- Among its peer states, Nevada has the second lowest percentage (17 percent) of individuals in integrated employment settings, just slightly ahead of Kansas (12 percent). Connecticut and Mississippi have the two highest percentages of individuals with I/DD receiving integrated employment services— 41 percent and 36 percent, respectively. Both states are in the top quartile of states based on the percentage of the population receiving integrated employment services.
- Nevada reported the highest percentage of individuals receiving facility-based work services at 47 percent. Kansas followed with 35 percent of individuals with I/DD receiving facility-based work services. Nevada's neighbors, New Mexico and Utah, reported that no individual with intellectual disabilities received facility-based work services.



Table 3. Employment Services in Nevada and Peer States, FY 2018⁷³

	Nevada	Connecticut	Iowa	Kansas	Mississippi	Nebraska	New Mexico	Utah
Population	2,887,475	3,530,088	3,088,842	2,849,329	2,922,647	1,875,468	2,057,526	3,019,579
Number of Individuals 18-64 Years with Cognitive Difficulties	74,151	85,609	76,220	79,763	108,159	43,791	70,229	68,803
Total Served by I/DD Agency	2,575	10,830	15,023	7,597	4,658	4,493	5,101	3,825
Percent Served	3%	13%	20%	10%	4%	10%	7%	6%
Total Funding	\$ 34,561,644	\$ 237,466,271	\$ 58,208,946	\$ 109,147,052	\$ 60,248,130	\$ 104,641,232	\$ 77,961,764	\$ 53,770,586
Funding Per Person	\$ 13,422	\$ 21,927	\$ 3,875	\$ 14,367	\$ 12,934	\$ 23,290	\$ 15,284	\$ 14,058
Individuals in integrated employment services (%)	17%	41%	29%	12%	36%	19%	27%	24%
Number of individuals	430	4,416	4,289	933	1,654	865	1,354	934
Dollars allocated to integrated employment (%)	12%	31%	34%	1%	24%	5%	11%	14%
Average spending per individual in integrated employment	\$ 9,831	\$ 16,550	\$ 4,607	\$ 493	\$ 8,643	\$ 6,552	\$ 6,543	\$ 7,864
Individuals in facility-based work services (%)	47%	1%	10%	35%	2%	22%	0%	0%
Number of individuals	1,217	56	1,498	2,670	84	982	0	0
Dollars allocated to facility-based work services (%)	40%	61%	15%	99%	1%	5%	0%	0%
Average spending per individual in facility-based work	\$ 11,302	\$ 40,643	\$ 5,711	\$ 40,707	\$ 3,150	\$ 4,883	0	0
Individuals in community-based non-work services (%)	2%	11%	0%	64%	28%	63%	87%	76%
Number of individuals	55	1,171	0	4,839	1,295	2,838	4,459	2,891
Dollars allocated to community-based non-work services (%)	3%	7%	0%	.	42%	29%	79%	86%
Average spending per individual in community-based non-work	\$ 18,589	\$ 14,401	\$ -	.	\$ 19,701	\$ 10,579	\$ 13,746	\$ 16,059
Individuals in facility-based non-work services (%)	34%	48%	61%	53%	35%	72%	16%	0%
Number of individuals	873	5,163	9,236	4,040	1,625	3,217	806	-
Dollars allocated to facility-based non-work (%)	45%	1%	.	.	33%	61%	10%	0%
Average spending per individual in facility-based non-work	\$ 17,820	\$ 28,132	.	.	\$ 12,415	\$ 19,942	\$ 9,688	0

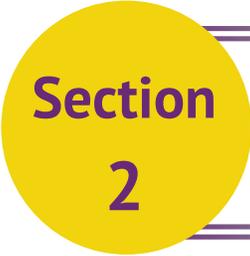
Conclusion

Nevada's decision makers have indicated that providing competitive, integrated employment opportunities is a goal for individuals with intellectual disabilities should they desire to avail themselves of those options. However, the data presented here reveal that integrated employment outcomes (and funding) look much the same as they did 10-15 years ago in Nevada. Our analysis of the data reveals:

- Compared to Nevada's peer states (in terms of population), Nevada is spending less to support individuals with I/DD. In 2018, Nevada spent \$34.6 million on services to support individuals with I/DD. This is significantly lower than funding levels reported by Nevada's peers with similar populations: Connecticut, \$237.5 million; Iowa, \$58.2 million; Kansas, \$109.1 million; Mississippi, \$60.2 million; Nebraska, \$104.6 million; New Mexico, \$78.0 million, and Utah, \$53.8 million.
- Data does not suggest that Nevada has a greater number of individuals with more severe disabilities than its peer states. Except for Kansas, Nevada reported fewer individuals with I/DD in integrated employment outcomes than its peer states. Integrated employment services accounted for a small percentage (almost 17 percent) of all services rendered to individuals with I/DD in 2018. This percentage was lower than the national average of 21 percent. Moreover, integrated employment services have *declined* over the period 2008-2018 – from 20 percent in 2008 to 17 percent in 2018. These outcomes are troubling given that a recent report found that 62 percent of individuals with disabilities surveyed said they “do not have paid community job and would like a job in the community.”
- Facility-based services – both work and non-work – accounted for the lion's share (81 percent) of all individuals with intellectual and/or developmental disabilities served by DHHS ADSD in 2018. (Recall that DHHS ADSD provides funding for services to support individuals with intellectual and/or developmental disabilities.) Facility-based services – both work and non-work – accounted for 85 percent of all funding provided by DHHS ADSD in 2018. Integrated employment funding accounted for an even smaller percentage (12 percent) of all employment services funding in Nevada in 2018.
- Individuals placed in community-based non-work settings accounted for only 2 percent of all service outcomes in 2018. This percentage is significantly lower than the national average of 40 percent (as of 2018), and lower than all peer states (other than Iowa).
- Data also reveal that mean earnings among individuals with disabilities have fallen slightly (see Figure 5) and poverty rates have ticked upwards (see Figure 7).

The significant discrepancy between the state's articulated goal of integrated employment and the documented outcomes begs the question: what are some of the barriers that may hinder Nevada's ability to expand integrated employment outcomes for individuals with I/DD? Based on the characteristics of Nevada's population, there is no reason to suggest integrated employment outcomes should be significantly different than our peer states. This would indicate that there are administrative and policy challenges to expanding integrated employment outcomes.



Section
2

Policy Landscape Analysis and Challenges

Barriers to Expanding Integrated Employment Outcomes

As the previous section indicated, integrated employment outcomes as a percentage of all outcomes have declined over the period 2008-2018. Moreover, integrated employment outcomes account for less than 20 percent of all outcomes. Why have integrated employment outcomes not expanded? What barriers – structural, financial, and otherwise – are hindering Nevada’s ability to expand integrated employment opportunities for individuals with intellectual disabilities?

Section Two identifies policy challenges and gaps that may contribute to Nevada’s failure to significantly expand competitive, integrated employment opportunities for individuals with intellectual disabilities. Our team examined quantitative and qualitative data against several of the goals and strategies outlined in Nevada’s Integrated Employment Strategic Plan 2015-2025. We analyzed national and state data and conducted dozens of interviews with agency stakeholders and government representatives, self-advocates, community groups, employers, and service providers in Nevada, as well as experts, agency officials, and technical assistance providers in other states.

Our team looked at six broad areas:

- (1) Education and Transition Planning
- (2) Employer Engagement, Development, and Support
- (3) Supply of Opportunities
- (4) Impact of Work on Benefits
- (5) Performance Management and Data Systems, and
- (6) Government as Leader

Our researchers found that individuals with intellectual disabilities face several barriers as they seek to locate integrated employment opportunities. Among these are: significant gaps in information and communication and/or coordination across agencies, limited employer outreach and (subsequent) engagement, limited opportunities for employment outside of facility-based services, and a lack of accurate information about the impact of wages on existing benefits. The barriers faced by individuals are compounded by systemic failures – including the lack of data to monitor and evaluate system outcomes and the lack of institutional (agency) leadership to oversee and drive continued progress in expanding opportunities to place individuals with intellectual disabilities in integrated employment settings.

Education and Transition Planning

The pathway to economic livelihood and security is identified in one's formative years and as early as high school. Achievement and opportunities provided in secondary schools can predict one's long-term success. Given the importance of education, it is not surprising that education and training featured prominently in the Nevada's Strategic Plan on Integrated Employment 2015-2025.⁷⁴ Below are two goals from this document that highlight the importance of education and training.

Strategic Plan Goal 1: Education, employment and other related systems within Nevada have and maintain sufficient resources and funding for competitive, integrated employment.

Strategic Plan Goal 3: Nevada develops effective partnerships that include all stakeholders to implement competitive, integrated employment.

In this section, our team summarizes a selection of data points that provide some context for the analysis. Included among these are descriptive statistics as well as recent data on educational outcomes for students with disabilities. A summary of policy and legal frameworks that support transition planning follows the summary of data. Our team concludes by discussing several challenges that may hinder Nevada's ability to expand integrated employment opportunities for individuals with intellectual and/or developmental disabilities (I/DD).

Students with Disabilities

In the 2019-2020 school year, 12.2 percent of Nevada's K-12 public school students participated in an Individualized Education Program (IEP) and were designated as special education students under the Individuals with Disabilities Education Act (IDEA) (see Table 4). Students with IEPs may have one (or more) identified disability.

The number of students with IEPs in Nevada's K-12 public education system has increased as the population has grown. In 2003-2004, there were 42,543 students receiving special education services; in 2014-2015, 54,312 students received these services; and in 2019-2020, 60,051 students (or 12.2 percent of total enrollment) received said services. Only 9.0 percent of students enrolled in the State Public Charter School Authority have IEPs. Among all K-12 public school students with IEPs, 15,654 are secondary students (enrolled in grades 9-12); of these, more than 10,000 secondary students are enrolled in Clark County School District, and more than 2,000 secondary students are enrolled in Washoe County School District.⁷⁵ An additional 886 are enrolled in 13th and 14th grades.⁷⁶

Among children aged 6-21 with a disability, almost half (49.1 percent) were diagnosed with "Specific Learning Disabilities," which refers to "a disability in one or more of the basic psychological processes involved in understanding or using language, spoken or written, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell or do mathematical calculations."⁷⁷ The next most prevalent disability types in Nevada were Speech or Language Impairments (14.0 percent of total disabilities) and Autism (13.7 percent of total disabilities). Both Autism and "Specific Learning Disabilities" comprise a greater share of disabilities among students in Nevada than they do nationally.

Table 4. Students with Disabilities in Nevada's K-12 Public Schools, 2019-2020

School District	Total Enrollment	IEP Students	IEP as % of enrollment	School District	Total Enrollment	IEP Students	IEP as % of enrollment
State	492,638	60,051	12.2%	Lyon	9,066	1,251	13.8%
Achievement	1,512	129	8.5%	Lincoln	993	151	15.2%
Carson City	7,850	1,129	14.4%	Lyon	9,066	1,251	13.8%
Churchill	3,396	526	15.5%	Mineral	582	93	16.0%
Clark	325,081	39,292	12.1%	Nye	5,367	751	14.0%
Douglas	5,834	782	13.4%	Pershing	658	112	17.0%
Elko	10,131	1,273	12.6%	State Charters	42,333	3,792	9.0%
Esmeralda	96	-	-	Storey	460	64	13.9%
Eureka	321	42	13.1%	Washoe	64,402	8,908	13.8%
Humboldt	3,514	507	14.4%	White Pine	1,655	271	16.4%
Lander	1,002	133	13.3%				

Only 3.9 percent of students with disabilities have intellectual and/or developmental disabilities.⁷⁸ Based on the distribution of category of disability, one could plausibly assume that of the 60,051 students in Nevada that have IEPs, approximately 2,342 have intellectual and/or developmental disabilities. And of the 16,540 students in grades 9-14 that have IEPs, roughly 645 students may have intellectual and/or developmental disabilities. Of the 4,404 students with IEPs in grades 12-14, 172 may have I/DD. Admittedly, these are approximate estimates, but policy makers in Nevada have struggled previously to identify the number of students who may require transition services.

Policy and Legal Frameworks that Support Transition Planning

Recent national and state legislative reforms have laid the groundwork for strengthening pathways for post-secondary transitions and opportunities (including integrated employment) for individuals with intellectual and/or developmental disabilities). In 2014, the Federal government passed the Workforce Innovation and Opportunity Act (WIOA), which provides new requirements designed to help “job seekers access employment, education, training, and support services to succeed in the labor market.”⁷⁹ Among the new requirements, WIOA prescribes that state vocational rehabilitation agencies and local education agencies provide pre-employment transition services (Pre-ETS). Coupled with the Individuals with Disabilities Education Act (IDEA), as part of the IEP which requires schools to help secondary school students who are eligible for special education services prepare for the transition to adulthood, there now exists a strong legal framework to strengthen high quality pathways to post-secondary opportunities for individuals with intellectual disabilities.^f

^f Every student has the right to a quality education, no matter their level of ability. Passed in 1975, the Individuals with Disabilities Education Act (IDEA) ensures that students with a disability who are determined eligible for special education services (students with disabilities) are provided with a Free Appropriate Public Education (FAPE) that is tailored to their individual needs, as articulated (or embodied) in the Individualized Education program (IEP). A Free

Per the 2004 reauthorization of IDEA, “the IEP must include: appropriate measurable post-secondary goals based upon age-appropriate transition assessments related to training, education, employment, and, where appropriate, independent living skills; and the transition services (including courses of study) needed to assist the child in reaching those goals” (see Nevada Administrative Code 388.284).⁸⁰ Nevada law requires that transition planning begin no later than age 14.⁸¹ The transition plan should be student focused (e.g., person-centered planning) and reflect his (her) choices, preferences, interests, and needs in the areas of education and training, employment, adult living arrangements, and community experiences. The IEP team, in identifying annual goals and services for a student, must determine what specific programs and opportunities (e.g., internships, work-based learning experiences, etc.) will align with the student’s interests and help the student prepare for the transition from school to adult life.

In Nevada, the Department of Employment, Training and Rehabilitation (DETR) Bureau of Vocational Rehabilitation (BVR) “works with eligible individuals with disabilities to achieve their employment goals. Applicants must have a mental, cognitive, and/or physical impairment that substantially interferes with their ability to work and must also require BVR services to become employed.” Under WIOA’s new requirements, state vocational rehabilitation agencies are mandated to set aside at least 15 percent of federal funding (Section 110 grant funds) to provide pre-employment transition services to students with disabilities who are otherwise eligible for BVR services; *all* students with disabilities (not simply those with intellectual disabilities) who are otherwise eligible for BVR may receive pre-employment transition services (Pre-ETS). In Nevada, BVR, in collaboration with local educational agencies, must “provide, or arrange for the provision of, pre-employment transition services for all students with disabilities.”⁸² These services include job exploration counseling, counseling regarding postsecondary education and training programs, instruction in self-advocacy, work-based learning experiences, and workplace readiness training. A student is not required to have an open case with the BVR to receive these services, and all students aged 16-21 are eligible for Pre-ETS. (See Appendix A for the Code of Federal Regulations regarding the Scope of vocational rehabilitation services for individuals with disabilities.)⁸³

Under WIOA’s new requirements (and revisions to Section 511), BVR must determine eligibility before youth can secure employment that pays subminimum wage (in a sheltered workshop).⁸⁴ Additionally, the student must be determined “ineligible for vocational rehabilitation services, or be accepted for vocational rehabilitation services and be unsuccessful in achieving an employment outcome after a reasonable period of time;” and the student must “receive career counseling, and information and referrals from the vocational rehabilitation agency to programs and other resources in the local area that offer employment-related services designed to help the youth attain competitive integrated employment.”⁸⁵

As noted in the Nevada Disability Law and Advocacy Center (NDLAC) transition handbook, vocational rehabilitation (VR) services are available to students in high school who have a

Appropriate Public Education (FAPE) means that special education and related services with specially designed instruction are provided to students at no cost.

disability that results in a substantial barrier to employment. Students may apply directly to Vocational Rehabilitation or may be referred (by a teacher, etc.).⁸⁶

According to the NDLC handbook, “Outreach [...] should occur as early as possible during the transition planning process and must include a description of the purpose of the BVR program, eligibility requirements, application procedures, and scope of services that may be provided to those eligible individuals. Students may apply for BVR services at age 14 and BVR may assist with planning activities related to employment and/or post-secondary training.”⁸⁷ BVR transition counselors may be invited to attend the student’s IEP meetings.

The transition process is summarized in the paragraphs below.

- DETR Bureau of Vocational Rehabilitation (BVR) counselors, including transition specialists, are responsible for communicating and coordinating with schools to identify and work with students with disabilities who are interested in applying for VR services.
- Once a student has applied to BVR, the transition specialist works with the student throughout the process, including but not limited to the provision or coordination of Pre-ETS.⁸⁸
 - BVR provides pre-employment transition services (Pre-ETS) and transition services through VR counselors (also known as “transition specialists”) assigned to school districts.
- Transition coordinators/specialists are responsible for coordinating and/or providing the five required activities under Pre-ETS to students with disabilities who are eligible or potentially eligible for VR services. Transition coordinators are responsible for—
 - Providing job exploration counseling, counseling on enrollment opportunities in transition programs and postsecondary educational opportunities, and instruction in self-advocacy to students who are potentially eligible for VR services;
 - Conducting outreach to local education agencies (and schools);
 - Coordinating the identification of all students with disabilities in need of Pre-ETS and facilitating the referral process; and
 - Facilitating parental agreement for students to receive Pre-ETS.⁸⁹

In addition to BVR directly providing Pre-ETS through its transition coordinators and BVR counselors, all five required activities are available to students with disabilities through fee-for-service contracts with providers and community rehabilitation providers, third-party cooperative arrangements (with school districts and community colleges), among others.

Here we note that while BVR is required to coordinate the identification of students with disabilities in need of vocational rehabilitation services (and the provision of those services), school districts (e.g., teachers, school site teams, etc.) are responsible for the initial identification of these students who may be interested in transition services or Pre-ETS and the subsequent referral to the transition specialist. Schools account for almost half (47 percent) of referrals to BVR.⁹⁰ Referrals for Pre-ETS or transition services (which are submitted through a “request for services” form) are coordinated between special education teachers (or teachers of record) and

the transition coordinator, the transition specialist, or VR counselor. Additionally, BVR may receive notification of students with disabilities interested in Pre-ETS directly from a third-party provider. BVR transition specialists, however, are responsible for ensuring all school districts are aware of the role of transition specialists and the VR programs and services available to eligible students.

Education Outcomes

Educational outcomes among students with intellectual (and other) disabilities in Nevada remain mixed. While high school graduation rates among individuals with (all) disabilities have increased, many students have not successfully connected with integrated employment opportunities. In the pages that follow, our research team presents data on a selection of key outcomes.

One positive outcome is that students with disabilities in Nevada are graduating at higher rates than students in the United States. Table 5, which presents information on the status of students with IEPs when they transition out of high school and exit services, reveals that the proportion of students exiting special education services with a regular high school diploma was higher in Nevada (61.9 percent) than in the U.S. (47.1 percent).⁹¹ The higher than national average may be attributed to the fact that in 2017, the Nevada Legislature passed Assembly Bill 64, which provided for alternate pathways for students with disabilities to receive a standard diploma.⁹²

However, two other data points raise cause for concern. In the 2018-2019 school year, 12.6 percent of students aged 14-21 in Nevada served under IDEA who exited special education services dropped out, compared to 10.7 percent nationally. And only 6.2 percent of Nevadans aged 14-21 served under IDEA who exited special education services transferred to regular education, compared to 9.0 percent nationally.⁹³

Table 5. Students Aged 14-21 Served under IDEA, by Exit Reason, 2018-2019

Exit Reason	Nevada (N=3,121)	U.S. (N=632,746)
Died	0.1%	0.2%
Dropped out	12.1%	10.5%
Graduated with alternate high school diploma	0.0%	0.0%
Graduated with regular high school diploma	62.8%	47.5%
Moved, known to be continuing	12.5%	25.2%
Reached maximum age	3.1%	0.8%
Received a certificate	3.5%	6.4%
Transferred to regular education	6.0%	9.5%
Total	100.0%	100.0%

State data also reveal that students with disabilities are participating in high-quality pathway programs – such as Career and Technical Education (CTE) – at lower rates than their representation in the total population. Research demonstrates “positive outcomes for students who take Career and Technical Education (CTE) courses. Involvement in these programs results in students being twice as likely to obtain full-time jobs after high school than students not

involved. CTE program involvement also results in higher pay and a higher high school graduation rate.⁹⁴ In Nevada, students who participate in CTE programs have graduation rates that are 17 percent higher on average than students who do not participate in CTE programs.⁹⁵ Data also reveal that “students with disabilities enrolled in CTE classes are more likely to graduate and meet state proficiency goals.”⁹⁶

In 2018-2019, CTE participation among students with IEPs was lower than their representation in the total population: 10.3 percent of students in grades 9-12 have an IEP, but only 8.5 percent of CTE students have an IEP. And CTE enrollment among students with IEPs in Nevada has declined in recent years: in 2002-2003, students with disabilities comprised 14 percent of the students who participated in CTE courses but only 8.5 percent in 2018-2019. Outcomes for students with IEPs who participate in CTE programs remain positive, however. In 2016-2017, the overall graduation rate in Nevada was 80.9 percent and the graduation rate for students with IEPs was 64.7 percent. The graduation rate for all CTE students was 91.2 percent and the graduation rate for CTE students with IEPs was 82.4 percent.⁹⁷ In other words, the graduation rate for CTE students with disabilities was higher than the overall Nevada graduation rate.

As Table 6 indicates, postsecondary outcomes for students with disabilities have gradually improved in recent years. Over the period 2010-2018, the percentage of students with IEPs who have enrolled in higher education within one year of graduating has increased from 20.0 percent to 22.0 percent (see Table 6). Efforts to reduce (if not eliminate) the use of the adjusted diploma may very well likely coincide with increased enrollment in higher education programs.

Overall outcomes remain poor, however, especially when compared to the national average. Notwithstanding the low levels of educational attainment among Nevadans more broadly, according to U.S. Census Bureau data, on average over the period 2014-2018, only 16.4 percent of individuals with disabilities (25 years and older) in Nevada had a bachelor’s degree or higher compared to 26 percent for individuals without a disability.⁹⁸

In 2018, 58.0 percent of Nevada’s students leaving school with an IEP in place were either enrolled in higher education or competitively employed within one year of leaving. And 72.0 percent of students who left school with an IEP in place were either enrolled in higher education, enrolled in some other postsecondary education or training program, or competitively employed, within one year of leaving school.⁹

The data suggest that in 2018, over one-third (36 percent) of students with IEPs were competitively employed within 12 months of graduating. This is an increase from 2010 (when only 22 percent were competitively employed after graduating), but it is a decrease from 42.4 percent in 2016.

⁹ One example of a training program might be a registered apprenticeship program. Here we note that data from the U.S. Department of Labor’s Registered Apprenticeship Partners Information Database System (RAPIDS) indicates that no more than one percent of registered apprenticeships in Nevada each year report having a disability.

Table 6. Employment and Educational Enrollment Outcomes Within One Year of Leaving High School among Students with an IEP in Effect at the Time of Leaving School, 2010-2018⁹⁹

	2010	2011	2012	2013	2014	2015	2016	2017	2018
Enrolled in higher education	20.0%	18.0%	24.0%	21.4%	21.6%	18.5%	18.9%	20.7%	22.0%
Enrolled in higher education or competitively employed	44.0%	50.0%	54.0%	56.1%	56.1%	54.7%	61.3%	57.3%	58.0%
Enrolled in higher education, competitively employed, or enrolled in other postsecondary education or training program	62.0%	67.0%	66.0%	69.8%	69.6%	68.9%	75.1%	71.9%	72.0%

Note: “Leaving high school” does not solely refer to graduation. Students who dropped out, did not return to school (even though they were expected to do so), or aged out were also included).

Postsecondary outcomes for students with IEPs vary by school district. Table 7 reviews postsecondary outcomes by school district.¹⁰⁰ The variation is considerable: for example, Pershing County School District had a 93.0 percent graduation rate among students with IEPs and met all state targets, while Clark County School District had a 68 percent graduation rate among students with IEPs and missed the state target for all metrics except for the dropout rate.

Outcomes may vary because districts may have different programs and types of support. By way of example, in 2018-2019, Lyon County School District (LCSD) hired a Transition Coordinator whose responsibilities include ensuring the school district is offering pre-employment transition services to all students with disabilities through professional development activities and monitoring, developing employment opportunities for students with disabilities through job coaching, outreaching to businesses, and creating and implementing a data collection system for transition age students that captures their transferrable skills and work habits.

According to BVR, “In partnership with Lyon County, the district wide Transition Coordinator was made possible through braided funding with BVR. BVR has since funded a second Transition Coordinator in LCSD and one in Douglas County School District. BVR has made this same offer to Washoe County and Clark County School Districts, but both school districts have declined.”¹⁰¹

BVR is also “providing Practical Assessment Exploration System (PAES) Labs to facilitate more effective partnerships in the delivery of Pre-Employment Transition Services and to better prepare students with disabilities for entry into Career Technical Education (CTE) programs. BVR braided funding with Washoe County School District (WCSD) in the purchase of three PAES Labs. Briefly, PAES is a functional skills curriculum with an embedded formative assessment system that identifies: 1) Aptitude for competitive integrated employment, 2) Functional skill levels, 3) Career interests, and 4) Work behavior strengths and barriers to success. PAES Labs create a simulated work environment within a classroom where students with disabilities learn work-related problem-solving skills, understand proper work behavior by developing soft skills, develop a thorough knowledge of job skills and gain insight into real work settings.”

Table 7. Employment and Educational Enrollment Outcomes Within One Year of Leaving High School among Students with an IEP at the Time of Leaving School, by District, 2018-2019^h

School District	Graduation Rate	Dropout Rate	Percent of youth who were enrolled in higher education	Percent of youth who were enrolled in higher education or were competitively employed	Percent of youth who were enrolled in higher education, other postsecondary education or training program, or were competitively employed or in other employment
State Target	100.0%	5.0%	28.0%	57.0%	73.0%
State Data	66.0%	4.4%	22.0%	58.0%	72.0%
Carson City	81.0%	Y	30.0%	75.0%	90.0%
Churchill	61.0%	Y	Y	Y	Y
Clark	68.0%	5.0%	23.0%	54.0%	69.0%
Douglas	68.0%	Y	22.0%	72.0%	94.0%
Elko	87.0%	Y	25.0%	75.0%	79.0%
Esmeralda	NA	NA	NA	NA	NA
Eureka	Y	Y	Y	Y	Y
Humboldt	79.0%	Y	0.0%	54.0%	85.0%
Lander	N	Y	N	N	N
Lincoln	N	N	Y	N	Y
Lyon	57.0%	Y	16.0%	52.0%	71.0%
Mineral	N	Y	N	N	N
Nye	67.0%	7.7%	12.0%	52.0%	64.0%
Pershing	93.0%	Y	Y	Y	Y
Storey	N	Y	NA	NA	NA
Washoe	63.0%	3.2%	22.0%	68.0%	78.0%
White Pine	65.0%	Y	Y	Y	Y
State Public Charter School Authority	62.0%	3.6%	14.0%	55.0%	66.0%

Transition Outcomes

An analysis of data taken directly from Bureau of Vocational Rehabilitation annual reports suggest that many students eligible for vocational rehabilitation services and Pre-ETS and are not receiving them. According to BVR, the number of students who were likely eligible for VR services but had not (yet) applied was 951 students in State Fiscal Year (SFY) 2018, 449 students in SFY 2019, and 930 students in SFY 2020.¹⁰²

As noted in its annual reports, BVR's goal is to "ensure participants receive appropriate pre-employment transition services." BVR reported that it provided Pre-ETS to 1,065 students with disabilities in Federal Fiscal Year (FFY) 2017 and 1,725 students in FFY 2018. BVR provided Pre-

^h "Y" and "N" are cases where the data were suppressed because there were fewer than ten students per group. "Y" represents that the state targets were met; "N" indicates that the targets were not met. "NA" indicates that the school district did not have students with IEPs enrolled in the relevant grade(s). Graduation and Dropout rates were taken from the 2017-18 school year.

ETS to 904 students in FFY 2019, which was significantly short of its stated goal of 1,898 students by 45 percent.^{103, i}

Our research team has two concerns with the data regularly reported by BVR. First, it is not clear what evidence-based reasoning informs the development of the Bureau's goals. Second, and more importantly, BVR's stated goal suggests that hundreds of eligible students with IEPs are not receiving Pre-ETS services. Specifically, Pre-ETS services are available to *any* student with an IEP (aged 16-21) in Nevada.¹⁰⁴ In 2019-2020, there were 15,654 high school students (grades 9-12) with IEPs in Nevada. There were approximately 8,116 students with IEPs in grades 11-14, which is one plausible estimate of the number of individuals eligible for Pre-ETS services. According to BVR, it sought to provide Pre-ETS services to only 23 percent of them (1,898) and ultimately only provided services to 11 percent (904) of the eligible population. Community and government agency stakeholders with whom we spoke shared that "Nevada is really struggling with the delivery of Pre-ETS services."

In FFY 2019, BVR noted the following performance outcomes:

- BVR's stated goal was to increase the participation of transition students in VR services by 1,014 students; only 495 students participated (which equates to 49 percent of BVR's goal).
- BVR's stated goal was to help 400 students with disabilities transition to employment or post-secondary educational opportunities; BVR assisted 156 students (or 39 percent of its goal). (As stated previously, we estimate that there are 645 students with I/DD in grades 9-14.)

Monitoring and analyzing post-secondary (employment) outcomes for individuals with intellectual disabilities is challenging because Nevada's stakeholders did not articulate specific performance targets in the state's Integrated Employment Strategic Plan 2015-2025 (i.e., by 2025, integrated employment services will account for 30 percent of all services, etc.). Nor is any single agency tasked with implementing and monitoring the state's Integrated Employment Strategic Plan or overseeing data and performance management systems. Currently, Nevada does not have a data dashboard that collects and houses data from all relevant agencies and regularly reports on performance metrics.

ⁱ In 2013, researchers at the Center for Studying Disability Policy compared vocational rehabilitation experiences of transition-age youth with disabilities across states.¹ While the data is dated (2004-2006), Nevada ranked in the bottom quartile of all states, based on an assessment of four specific metrics. On the service ratio metric, defined as the ratio of youth who received VR services among those who apply, Nevada's value was 0.52, which was slightly lower than the national average of 0.56. Nevada ranked in the bottom quartile of states on the employment ratio meaning the proportion of all youth with disabilities whose cases with VR were closed with employment outcomes. In Nevada, only 1.7 percent of transition-age youth who applied for and received VR services eventually were employed when their case was closed; the national average was 2.3 percent.

Key Findings

Access to information and to appropriate services remain a significant challenge.

In Nevada's Integrated Employment Strategic Plan, access to information was identified as a challenge by stakeholders. The plan's authors wrote:

"Information is not widely available to families in their search for services and supports. School districts, community-based providers, and state agencies' staff are not fully aware of resources themselves, leaving parents [...] with the responsibility of finding out what is available, and how to access care. There was consensus that neither people with I/DD, nor their families, are provided sufficient information to make informed decisions concerning training, services, and employment opportunities. Access to information was identified as a key concern at every level of the system, from individuals and families to communities and statewide systems."¹⁰⁵

Often, these gaps in information lead to inadequate service delivery or misalignment between students interests and opportunities. In Nevada's Integrated Employment Strategic Plan, stakeholders describe the challenge related to services in the following way:

"Existing methods for identifying students with I/DD, the implementation of vocational assessments, and the delivery of employment-related planning and training services are not consistent or sufficient across the state. Proactive engagement of individuals to identify interests and match their interests to training opportunities is needed. Earlier intervention, access to more options, and opportunities and better transitions through collaboration, coordination, and shared resources are needed."¹⁰⁶

The architects of the plan also wrote:

"Transitional supports for individuals are often insufficient to prepare people with I/DD beyond their high school experience. Within the educational system, transitional plans are often established too late and include only rudimentary goals. [S]taffing, such as transitional officers, are not always available to families. Within the adult serving system (vocational rehabilitation and regional centers), services are not often initiated prior to the age of 18, and when they are, few resources exist for students."¹⁰⁷

To address these information and service delivery gaps in Nevada, the architects of the state's Integrated Employment Strategic Plan identified three strategies:

- Expand innovative partnerships and collaborations and promote communication with all partners to leverage resources, reduce duplication of efforts and expand opportunities for employment.
- Establish memorandums of understanding (MOUs)/interlocal agreements with key state and local agency partners, to define roles and responsibilities, remove barriers to employment supports as people transition from one funding stream to another, and secure grant funding, including braided or blended funding to implement innovative projects statewide; and
- Implement data sharing policies, practices and systems with state agencies, school districts and providers of competitive, integrated employment services.¹⁰⁸

Even though stakeholders identified these challenges and designed strategies to address them, our research – including an analysis of data and qualitative information derived from interviews – suggests that these challenges remain. There is no evidence that the ecosystem that supports individuals with intellectual disabilities has significantly addressed or improved these barriers.

Specifically, access to information, inadequate service delivery, and insufficient transition planning are and remain significant barriers for individuals with I/DD and their families. Information about vocational rehabilitation services and post-secondary opportunities is not consistently reaching students with disabilities (and their families). The information gaps, lack of services, and insufficient transition planning efforts appear more acute in Nevada’s urban school districts. Several families shared that their current 12th grade students with IEPs had not yet received any information about post-secondary transitions or received a referral to BVR. A few parents with high school seniors with IEPs shared that they had never heard of the Bureau of Vocational Rehabilitation, had never had a BVR transition specialist attend their student’s IEP meetings, and were unaware of the transition services available to their student after graduation. A handful of families stated that their former student with a disability had never connected with BVR before graduating from Clark County School District (CCSD); consequently, these individuals were not employed and were “sitting at home.” A nonprofit in southern Nevada that provides opportunities for individuals with disabilities stated that more than half of their young adult age clients had never connected with post-secondary services (e.g., Bureau of Vocational Rehabilitation) before leaving high school.

The following challenges were identified during interviews with families, self-advocates, and stakeholders:

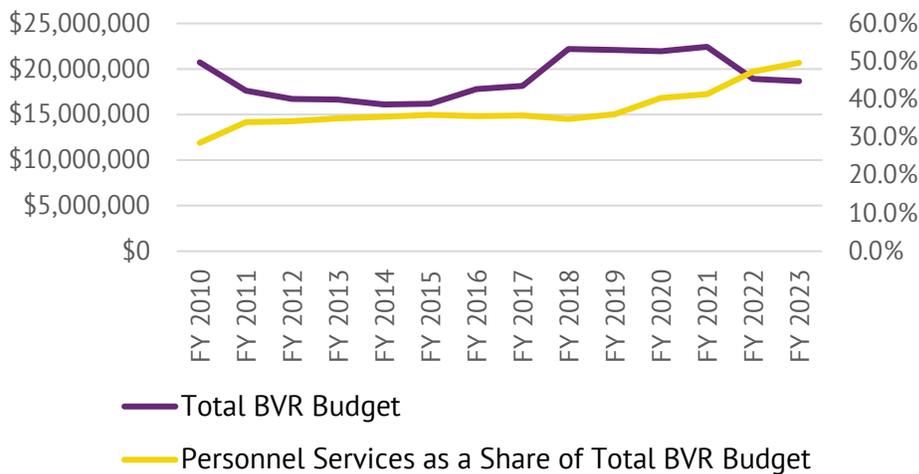
- Lack of information and/or awareness among special education teachers/IEP teams, parents, and youth with disabilities regarding transition services, post-secondary opportunities, the BVR referral process, programs, and services (e.g., parents did not know about BVR, and did not know they could invite BVR to IEP meetings, etc.);
- Lack of sufficient or effective outreach efforts (by school and BVR) to transition-age students;
- Varying levels of engagement with BVR and a commitment to transition planning by principals and school site leadership teams;
- Limited collaboration between schools and BVR to assess, plan, and deliver Pre-ETS and other vocational rehabilitation services for eligible students with disabilities;
- Lack of communication between BVR counselors and special education teachers (and/or the student’s IEP team);
- Lack of benefits counseling for students and parents and/or guardians;
- Limited Pre-ETS programming, inefficient model and/or system of delivery; and
- Limited work-based learning opportunities: students with disabilities comprised only 6.5 percent of all work-based learning opportunities.¹⁰⁹

Stakeholders suggested that these communication challenges and consequent gaps in information and the provision of services stem from three phenomena.

- (1) First, school districts and BVR may not have sufficient transition specialists and/or coordinators, which means that each coordinator may have hundreds of students to assist. The role of the transition specialist is to work with the student to develop a post-secondary transition plan, discuss the student’s interests, and identify appropriate opportunities that meet the student’s interests, goals, and plans. Ideally, transition specialists might also play a role in identifying potential employers, making new contacts, and building (and maintaining) relationships with employers (and community organizations). As of 2020-21, Clark County School District (CCSD) had only eight transition specialists, which is a decline from 2017 when it had 10-15 transition specialists, to serve thousands of secondary school students with IEPs; (there were approximately 7,577 high school students with IEPs in CCCD as of 2019-2020). Other districts, including Washoe County School District, may have only one transition specialist; some rural districts may not have a single transition specialist.¹¹⁰

According to BVR, prior to the pandemic, each BVR counselor had a caseload of 90 individuals with disabilities (including but not limited to students and including but not limited to individuals with intellectual disabilities);¹¹¹ this is an increase from a caseload of 80 in 2013 when BVR reported 126 employees.¹¹² Community service providers shared that following the pandemic and state mandated budget cuts, each BVR counselor may now have 100 cases. Data in Figure 17 reveal that personnel expenses as a percentage of the Bureau of Vocational Rehabilitation budget have increased by 56 percent over the period 2010-2023 during which time the total BVR budget decreased by 10 percent.

Figure 17. DETR BVR Budget and Personnel Services as a Share of Total BVR Budget, FY 2010 - FY 2023¹¹³



- (2) Second, school site teams and stakeholders (including, but not limited to, special education teachers or teachers of record, district transition coordinators, school counselors, etc.) may not have an adequate or complete understanding of transition services and post-secondary opportunities available to eligible students. For example, during the coronavirus pandemic,

some teachers reached out to external (university) partners (rather than BVR or the district transition coordinator) looking for transition resources for their students. School site teams may not understand they have to initiate the referral process to BVR for their students. Community rehabilitation providers indicated that teachers do not have sufficient information about Pre-ETS and/or available services, and yet are responsible for making the referral to BVR on behalf of the student. In short, there are significant gaps in the exchange of information and communication across education and vocational rehabilitation partners.

Moreover, the degree of partnership and interaction between vocational rehabilitation services and school districts and schools varies and can be a function of individual personalities and relationships. If principals understand the transition process, they may be more inclined to reach out to BVR transition coordinators. However, some stakeholders shared that “getting into schools has often been challenging” and that some school leaders are “resistant.” For example, BVR has offered to support the Transition Coordinator position in both WCSD and CCSD, but both districts have declined. According to one agency official, “Some larger school districts in Nevada have refused to allow BVR’s Pre-ETS providers onto campuses, thereby denying BVR the ability to deliver Pre-ETS to students with disabilities in need of these services.” School leaders are not required to follow Nevada Department of Education recommendations for collaboration or best practices for serving students with disabilities, nor is there uniform guidance about how to provide transition services.

Currently, BVR has a cooperative agreement in place with Jobs for Nevada’s Graduates to provide Pre-ETS services. This partnership has helped BVR obtain direct access to students to provide Pre-ETS and share information about transition services and opportunities. To the issue of the importance of school site leadership in addressing transition, our team references recommendations offered by the Council of the Great City Schools. By way of background, in 2020, CCSD commissioned the Council of the Great City Schools “to review the district’s services for students with disabilities.”¹¹⁴ Upon the conclusion of the team’s assessment of CCSD, the organization offered the following recommendations which underscore the importance of school site leadership in addressing the needs of students with disabilities:

“Principal Leadership. Use a summer boot camp to focus on principal leadership and their oversight of special education, effective inclusive instruction/behavioral supports, standards for special-day classes in their buildings, and the unique needs of [English Language Learners] with disabilities. Establish continuing professional learning communities (PLCs) for principals on these and other subjects.”¹¹⁵

“Monitoring and Accountability. Expect all principals to be responsible for overseeing special education in their buildings and hold them explicitly accountable for such. Embed [...] activities into the monitoring and accountability systems.”¹¹⁶

- (3) Third, the overall process and relationships among agencies may not be clear. Agency stakeholders with whom our research team spoke acknowledged that the transition process lacks clarity and coordination. Currently, there is no formal requirement to collaborate or accountability mechanism by which to evaluate the degree of cooperation. Many of the ecosystem stakeholders (e.g., BVR (DETR), DHHS (ADSD), and NDE (and school districts) do

have interlocal agreements (and even informal workgroups).^j While stakeholders from BVR, DHHS, and NDE have met informally over the past year to share information about the eligibility process and requirements for each relevant agency, efforts should be made to formalize procedures for sharing information, streamlining processes (around the referral process for transition students), and improving overall service delivery.

It is worth noting that the gaps in information and provision of services to students with disabilities who are of transition age appear especially pronounced in Nevada's large, urban school districts – namely, Clark County and Washoe County School Districts. Representatives from a selection of Nevada's rural school districts reported that the transition coordinators work closely with students:

“Our high school special education coordinator works with a couple of agencies and community colleges to get our students prepared for employment and post-secondary education. I think we do a pretty good job here. I think our size contributes to the amount of time and care we put into our students. We know them and their families. We know they will be part of our community for the rest of our lives, so the investment is for the betterment of us all.”¹¹⁷

The current system (and organizational design) in Nevada is configured in such a way that there is neither an incentive nor a penalty should a student with a disability not connect with post-secondary transition services and learn about post-secondary opportunities. While the State of Nevada must report post-secondary outcomes for students with disabilities to the federal government (as part of IDEA), outcomes other than graduation are not included in the Nevada School Performance Framework (NSPF). While “school districts are responsible for the identification of students with disabilities who may be interested in transition services or preemployment transition services and making the necessary referrals to the appropriate transition specialist assigned to the school district,” there is no penalty if they do not connect students with BVR services before they graduate.¹¹⁸ BVR outcomes are only monitored after a student enters the BVR system and receives a case number. Neither BVR nor school districts incur any penalties should students with IEPs not be provided pre-employment transition services.

In the absence of institutional accountability, students are at risk of falling through the cracks. It is worth noting here that eight states in the country have organizationally placed their vocational rehabilitation agency in their state's Department of Education. This sort of organizational configuration could help strengthen the alignment between local education agencies (and schools) and vocational rehabilitation services and facilitate a seamless exchange of information across case management, the provision of services, and the exchange of data and information.

^j DHHS ADSD and DETR BVR have an interlocal agreement in place, which underscores the agencies' recognition of the importance of and need for sharing information about benefits, eligibility, service provision, etc. BVR has an interlocal agreement with the Nevada Department of Education, DHHS ADSD, and every school district with at least one high school.

Person-centered planning and the supported decision-making framework are not being used and/or integrated into transition planning.

One of the strategies under Goal 3 is to “research and employ evidence-based best practices, including person-centered planning.” Our interviews with some families and stakeholders revealed that person-centered planning and the supported decision-making framework are not being integrated consistently and/or effectively into transition planning.

As noted by NGCDD, “The principles of Informed Choice, Person Centered Planning and Self-Determination dictate that adults with intellectual/developmental disabilities are respected and supported in making their own life decisions.”¹¹⁹ Person-centered planning is defined as “an ongoing problem-solving process used to help people with disabilities plan for their future.”¹²⁰ In 2019, the Nevada Legislature passed Assembly Bill 480, which “authorizes an adult with a disability to enter into a supported decision-making agreement in which he or she designates one or more supporters to provide assistance when making decisions or engaging in certain other activities.”¹²¹ The supported decision-making agreement “must be in writing” and must “list the types of decisions with which the supporter is authorized to assist the principal” (Nevada Revised Statutes 162.C.200). Nevada is one of eight states and the District of Columbia that has codified a supported decision-making law.¹²² This legal framework is designed to assist an individual with a disability to make and communicate decisions about what they want to their families and guardians (and others), “while avoiding restrictive and unnecessary guardianships.”¹²³

Ideally, these frameworks – informed choice, person-centered planning, and supported decision-making framework – should be included in or integrated into the IEP process, particularly when students are enrolled in 11th and 12th grades and exploring life beyond high school. However, stakeholders (including families, community service providers, advocates, and experts) with whom we spoke shared that these principles and frameworks are not being used with fidelity in IEP meetings and the overall transition process. Students and parents are not incorporating it as they articulate transition plans, explore post-secondary opportunities, and identify the supports students need to be successful. Consequently, according to a legal expert, in the absence of these frameworks and in the face of inadequate information about post-secondary opportunities, some families are entering “restrictive” (and unnecessary) guardianships.”

Post-secondary transition programs have been canceled.

Two of the strategies in Nevada’s Integrated Employment Strategic Plan 2015-2025 address third-party cooperative agreements specifically:

1. “Develop third-party cooperative arrangements between state agencies and education systems;” and
2. “Increase the number of third-party cooperative arrangements with school districts across all regions of Nevada which support competitive, integrated employment.”¹²⁴

These agreements are important because they allow the Bureau of Vocational Rehabilitation to partner with public agencies to “combine their resources to provide vocationally focused services to help individuals with disabilities obtain and retain competitive, integrated employment and

maximize their ability to live independently in their communities.”¹²⁵ Despite the recommendations stated in the Strategic Plan, the number of third-party cooperative agreements (TPCAs) between BVR and community partners has declined in recent years. In email correspondence with the Guinn Center, DETR explained that TPCAs have been “eliminated due to their costs being 266 percent – 456 percent higher per individual served than in general BVR.”¹²⁶

Almost a decade ago, BVR developed its first TPCA to help provide supportive services to individuals with I/DD who were interested in pursuing employment opportunities and/or post-secondary educational opportunities. In 2016, BVR had six TPCAs. However, in recent years, all but one TPCA has been canceled, which could affect the number of people who are placed in competitive integrated employment and/or pursue post-secondary opportunities.¹²⁷

In 2012, BVR funded its first TPCA – the Vocational Opportunities for Inclusive Career Education (VOICE) program in the Washoe County School District (WCSD), which focused on pre-employment transition services, work readiness skills training and specialized job development for the achievement of integrated employment for these students and youth.¹²⁸ VOICE has served over 500 students since it was launched in 2012. Due to budget cuts, WCSD terminated the VOICE program and its TPCA contract with BVR. WCSD has since repurposed VOICE counselors into special education case managers who are offering VOICE-like programming at several schools.

BVR also had TPCAs with Truckee Meadows Community College (TMCC) and Western Nevada College (WNC), which supported the CareerConnect programs at each campus. The Career Connect program focused on VR youth transitioning from high school to college and the office provided guidance to students to acquire the academic preparation, work readiness skills, internship opportunities, and job development necessary to successfully complete college and obtain competitive integrated employment. BVR terminated these programs in 2020, however.

Additionally, BVR previously had a TPCA with the University of Nevada, Las Vegas, which terminated the agreement in 2019. UNLV stakeholders noted that updated guidance issued by Rehabilitation Services Administration (RSA) and staffing challenges (e.g., turnover/vacancies) at BVR made it more difficult for UNLV to maintain its TPCA with BVR.

Stakeholders with whom we spoke shared that they did not understand the logic behind BVR’s decision to cancel the TPCAs. First, expanding TPCA agreements is a stated goal in the State’s Integrated Employment Strategic Plan. Second, Nevada’s Bureau of Vocational Rehabilitation has consistently encountered challenges generating funding match dollars to draw down federal (Section 110) funds. For example, over the period State Fiscal Year (SFY) 2012 to 2015, Nevada relinquished almost \$20 million in federal funds due to its inability to provide matching funds. In the past, however, these third-party cooperative agreements have enabled Nevada to “generate match” to draw down federal funds (albeit not for the entire amount).¹²⁹

Fewer transition programs to support individuals with intellectual and/or developmental disabilities may explain, in part, why Nevada has not made progress in recent years increasing the percentage of individuals placed in integrated employment. Moreover, the limited availability of programs currently to offer academic and career support, coaching, and counseling to prepare

individuals with disabilities for integrated employment will make it that much more challenging to increase the number of individuals placed in these settings in the years ahead.

Data reveal that integrated employment outcomes have declined over the past decade (2008-2018). Our analysis suggests that the transition process is obstructed by many of the same significant challenges and structural barriers that were identified in the Integrated Employment Strategic Plan 2015-2025. Among the challenges identified are:

- Significant information gaps among parents, students, teachers, and school site personnel
- Significant service delivery gaps (e.g., limited and/or inadequate provision of services including but not limited to Pre-ETS, etc.)
- Weak communication channels across relevant agencies around transition planning
- Person-centered planning and the supported decision-making frameworks are not being used and/or integrated into transition planning for students, and
- (Post-secondary) transition programs have been eliminated.

Conclusion

The percentage of individuals with I/DD working in integrated employment has declined over the past decade. An analysis of data reveal that there are significant institutional and structural barriers that may undermine significant improvements in integrated employment outcomes.

- Students with disabilities are participating in CTE programs at lower rates (8.5 percent) than their representation in the total student population (10.3 percent). And CTE enrollment among students with IEPs in Nevada has declined over the past 10-15 years.
- Challenges identified in Nevada's Strategic Plan for Integrated Employment in 2015 have not been resolved. Limited access to information, inadequate service delivery, and insufficient transition planning means that some students with disabilities are graduating without ever having received services or getting connected to transition services. As an example, BVR provided pre-employment training services to only 11 percent of the eligible student population in 2019-2020.
- School district personnel are responsible for referring students with disabilities to transition services (offered through BVR and DHHS ADSD Desert Regional Centers). Students are not consistently getting connected with services, the reasons for which have been attributed to the following:
 - School building personnel do not understand the transition process.
 - Communication between local education agencies and BVR is limited, and
 - Communication between agencies and the level of commitment to transition planning is a function of school site leadership.
- Person-centered planning and the supported decision-making framework are not being effectively and/or consistently integrated into transition planning.



For Further Consideration

- Expand the number of transition specialists. This will enable each transition specialist to spend more time on each individual student's transition plan. Additionally, this might also enable the transition specialists to spend time identifying work-based opportunities for students and developing relationships with local employers who might provide internships or work-based experiences for high school students with intellectual disabilities.
- Strengthen outreach to students with disabilities and their families to promote and encourage participation in CTE programs.
- Strengthen career pathways (including pre-apprenticeship and registered apprenticeship programs) for students (and adults) with disabilities.^k
- Require each local education agency (school district) and school building leader to report to the State Board of Education and the Nevada Legislature on outcomes for students with disabilities.
- Hold principals accountable for overseeing special education in their buildings and for post-secondary outcomes among students with disabilities.
- Support Nevada Department of Education's ongoing efforts to revise and update Nevada Administrative Code (NAC) 388.281 and 388.284, which would require all IEP transition planning requirements to begin when a student with a disability has attained 14 years of age. (Currently, Nevada has a system of bifurcated requirements whereby some components of the transition plan are required to be delivered at the age of 14 and other components by the age of 16. NDE is currently working to align requirements so that all transition planning for students with disabilities would begin at age 14 (as of 2022). Upon enactment of this reform, students with IEPs, for example, would become eligible for Pre-ETS at the age of 14.)¹³⁰
- Move the Bureau of Vocational Rehabilitation into the Nevada Department of Education to better align communication and systems in support of effective transitions to post-secondary pathways. Short of this, Nevada's decision makers should explore ways to mandate greater collaboration between BVR and school districts (and school building leaders).
- Expand the number of benefit counselors and begin benefits counseling with students and their families by the age of 14 as part of the transition planning process.
- Expand training on person-centered planning and the supported decision-making framework. Stakeholders need to provide more training on person-centered planning and the supported decision-making framework to IEP teams, general education teachers, school administrators, transition specialists, advocacy groups, and even nonprofits.



^k By way of example, the Governor's Office of Workforce Innovation (OWINN) is using WIOA funds to launch an information technology career pathway for individuals with autism.

Employer Engagement, Development, and Support

Employer engagement and coordination with businesses is a stated goal in the Rehabilitation Services portion of the Workforce Innovation and Opportunity Act (WIOA) Unified State Plan. Nevada's Bureau of Vocational Rehabilitation (BVR) outlined how the agency "will work with employers to identify competitive integrated employment and career exploration opportunities in order to facilitate the provision of services."¹³¹ In FY 2014-15, NGCDD funded education efforts led by the Aging and Disabilities Services Division (ADSD) of the Department of Health and Human Services (DHHS) and directed to community-based employers and employer groups so that they were able to make informed business decisions to hire people with I/DD.¹³²

In Nevada's Integrated Employment Strategic Plan 2015-2025, stakeholders recognized the importance of employer engagement in achieving competitive, integrated employment and included the following two goals.

Strategic Plan Goal 6: Nevada provides ongoing training and support for employers and their employees with I/DD.

Strategic Plan Goal 7: All Nevada companies have enough information about and access to people with I/DD seeking employment to make informed business decisions to hire them.

Additionally, the plan stated, "[A] pool of employers is needed to provide choices for jobs and work experiences/workplace training. Proactive engagement of businesses is critical for competitive, integrated employment."¹³³ To strengthen employer engagement, the Strategic Plan included the following strategies for increasing employer engagement:

- (1) "Provide outreach, training and support to employers and human resource groups to dispel myths and fears, and to educate them about hiring people with I/DD, the benefits to doing so, and the job supports available to sustain these employees."
- (2) "Develop a structure to support local coalitions that link providers, businesses, schools and families with people with I/DD."
- (3) "Support partnerships and resources for employers to help them manage legal, tax, and employment requirements."
- (4) "Engage a number of industries, including small businesses and entrepreneurial ventures to participate in competitive, integrated employment," and
- (5) "Educate local and statewide workforce development boards so they fully support integrated employment for people with I/DD as a winning strategy for workforce development."¹³⁴

At the February 2020 meeting of the Nevada State Rehabilitation Council, the Bureau of Vocational Rehabilitation reported that it "reaches out to businesses through its Business Services team through contact lists developed from participation at job fairs, business development expositions, the economic development forum, the local and state workforce boards, human resource associations, regional workforce consortia, chambers of commerce membership/participation, and statewide economic development efforts. These contacts are

capitalized upon for one-on-one relationship that can be leveraged into employment opportunities, and pre-employment training sites.”¹³⁵ BVR also noted that it “provides VR provides disability 101 training to Employers” and it does have a basic website (<https://vrnevada.org>).¹³⁶

However, employer training and outreach remains limited. Nevada’s BVR appears to have had limited success with employer training to address employer concerns related to hiring individuals with intellectual disabilities. Previous attempts to offer training appear to have been subject to delays, even before the onset of the coronavirus pandemic. In November 2019, BVR reported at the Nevada State Rehabilitation Council meeting the following: “In recognition of the lack of choices for individuals with developmental and intellectual disabilities, not wanting to be in day habilitation or sheltered settings, VR is working with TransCen Inc. to bring the Meaningful Day program to Nevada. VR will partner with the Aging and Disability Services Division (ADSD) for cross training of VR and ADSD/Regional Center staff to learn [about] this innovative approach to braiding funding in an effort for a more meaningful day for clients.”¹³⁷ Implementation of the Meaningful Day model, which will be funded by Medicaid waiver funds, is a collaborative effort among BVR, DHHS ADSD, and community rehabilitation programs. After significant delays, a pilot is expected to launch in Fall 2021.¹

In February 2020, the BVR presented a review of its portion of the Unified State Plan. In its discussion of ‘strategies to improve performance,’ VR proposed the following actions: (1) “Provide businesses with disability awareness training, including ‘Windmills,’” and (2) “Educate businesses about rehabilitation technologies/assistive technologies and peer supports.”¹³⁸ To provide background, Windmills is a nationally recognized, “high impact, changing the perception of disability training curriculum. The program consists of 12 modules that use participation and discovery as learning vehicles.”¹³⁹ However, Nevada BVR representatives shared that they are not offering the full curriculum consisting of 12 modules, but rather a modified version consisting of four virtual models, which seeks to “change attitudinal barriers and create a new perspective on the unique abilities of individuals with disabilities.”¹⁴⁰ One year after announcing that it would be launching Windmills, a BVR representative shared in March 2021 that while several existing BVR partners (e.g., Opportunity Village) have received the training, not a single new employer in Nevada has enrolled in the training.¹⁴¹

The reported lack of progress on training and employer outreach is confirmed by additional sources of qualitative data. In 2020, the Guinn Center conducted a survey of employers in Nevada using a U.S. Department of Labor validated survey instrument.¹⁴² Almost 65 employers representing different sectors and located in different regions of Nevada responded. While the sample of survey responses is not large enough to allow for more rigorous statistical methodologies, the results are revealing and confirm what data and interviews have suggested.

In the survey, only 13 percent of survey respondents indicated that their company had hired someone with a disability in the last 12 months. Roughly 40 percent said that their company actively seeks job applications from individuals with disabilities. The two primary ways employers

¹ Implementation of the Meaningful Day pilot has been delayed due to the coronavirus pandemic, as well as to delays in the certification of interested providers who are not yet eligible.

seek applicants with disabilities are by (1) creating “partnerships with disability-related advocacy organizations in Nevada” and (2) contacting “career centers at community colleges and universities when vacancies arise.”¹⁴³

Almost two thirds (65 percent) of those surveyed responded, “No” when asked “Has anyone (e.g., job navigator, job coach, or transition coordinator) ever approached your business (or nonprofit) and discussed hiring an individual with a disability?”

The survey result that almost two-thirds of survey respondents had never been contacted by a job coach, job counselor or job navigator about hiring someone with a disability was echoed in follow on interviews with workforce development ecosystem stakeholders across the Silver State. Our research team spoke to more than one dozen businesses and senior leaders at chambers of commerce, regional development authorities, and workforce development boards in Nevada. All confirmed that they have never been contacted by BVR representatives to discuss hiring individuals with disabilities, attending an employer-awareness training (e.g., Windmills or other trainings), or partnering on workshops and trainings.

The training that BVR has indicated it will provide could help strengthen employer engagement. The Employer Survey asked employers to consider the types of information that might “persuade them to recruit people with a disability.” Below, we summarize the information employers would like to receive:

- 29 percent of employers said information that addressed their concerns about the cost to the business.
- 44 percent of employers said information that shows how hiring people with disabilities has benefited other companies in their industry.
- 41 percent said information that demonstrates how hiring people with disabilities has benefited nationally recognized companies (e.g., a Fortune 500 company).
- 43 percent said information on how hiring people with disabilities can benefit the company’s bottom line.
- 44 percent said information showing how hiring people with disabilities can increase the company’s productivity, and
- 51 percent said information that was supported by research and statistics.

Among the most significant factors affecting the surveyed employer’s decision to hire people with disabilities were the following:

- “Concerns about maintaining/supervising the safety of the person with a disability
- The nature of the work is such that it cannot be safely performed by people with disabilities
- Concerns about the cost of health care coverage
- Concerns about the cost of workers’ compensation premiums
- Not knowing how much accommodations for people with disabilities will cost, and
- The actual cost of accommodating people with disabilities.”¹⁴⁴

The surveyed employers indicated that the following strategies would be “helpful in reducing barriers to hiring people with disabilities into their company:”

- “Centralized accommodations fund (e.g., state fund to help pay for accommodations for employees with disabilities)
- Using a recruiting source that specializes in placing people with disabilities
- Employer tax credits and incentives
- Developing a targeted recruitment program for people with disabilities, and
- On-site consultation or technical assistance, and assistive technology.”¹⁴⁵

Unfortunately, the lack of employer training has an impact on outcomes for students with disabilities. By way of example, the Nevada Department of Education reported that students with disabilities in Nevada account for only 6.5 percent of secondary students who participate in work-based learning opportunities.¹⁴⁶ The low and slightly declining percentage of individuals with I/DD working in integrated employment could arguably be a function of limited employer outreach and training, which translates into low levels of employer engagement.

One promising development is that Nevada employers appear to be taking advantage of the federal Work Opportunity Tax Credit (WOTC), which is available to employers for hiring individuals from certain targeted groups who have consistently faced significant barriers to employment.¹⁴⁷ This tax credit is referred to as the “the disability access credit and barrier removal tax deduction.” As noted by BVR, “Another financial incentive available to employers is the Work Opportunity Tax Credit (WOTC), which provides eligible employers with a tax credit up to 40 percent of the first \$6,000 of first-year wages of a new employee, if said employee is part of a targeted group, e.g., an individual with a disability, provided the appropriate government agency has certified the employee as disabled. The credit is available to the employer once the employee has worked for at least 120 hours.”¹⁴⁸ The two targeted groups that may include but are not limited to individuals with disabilities are ‘Vocational Rehabilitation Referral’ and ‘SSI recipient.’ A Vocational Rehabilitation Referral (VR) includes an individual with “a physical or mental disability” who has been “referred to the employer while receiving or upon completion of rehabilitative services pursuant to (a) a state plan approved under the Rehabilitation Act of 1973, or an Employment Network Plan under the Ticket to Work program, or (c) a program carried out under the Department of Veterans Affairs.” A qualified SSI Recipient is one who “if a month for which this person received SSI benefits is within 60 days of the date this person is hired.”

Table 8 presents data on the count of WOTC tax credit certifications issued to individuals with disabilities who were eligible in Nevada and its peer states. As seen, employers in Nevada have increased their use of the WOTC for Vocational Rehabilitation Referrals. Here we note that DETR reported that in 2020, Nevada established a new WOTC processing system so that the count in 2020 includes tax credits in the calendar year as well as backlogged applications.

Table 8. Certificates issued from the Federal Work Opportunity Tax Credit program for which individuals with disabilities deemed the employer eligible, 2017-2020¹⁴⁹

State	2017		2018		2019		2020		Total VR (2017- 2020)
	VR	SSI	VR	SSI	VR	SSI	VR	SSI	
Connecticut	39	3	22	22	18	177	8	21	87
Iowa	476	556	481	953	302	601	354	432	1,613
Kansas	177	21	149	277	127	336	110	90	563
Mississippi	105	44	287	467	153	406	164	944	709
Nebraska	1,453	363	326	211	309	248	235	190	2,323
Nevada	13	23	579	9	484	56	695	1,948	1,771
New Mexico	51	106	37	142	93	185	92	134	273
Utah	94	12	325	157	335	213	333	289	1,087

To conclude, employer outreach is limited. Our team's survey of private businesses and additional interviews with workforce ecosystem stakeholders revealed that said entities have never been contacted about employer trainings or information about hiring an individual with an intellectual disability. In the absence of robust employer outreach, employer engagement is limited in Nevada.



For Further Consideration

- Hire a statewide Employer Engagement Specialist. The Employer Engagement Specialist would develop an employment strategy and policy and improving employment outcomes for individuals with I/DD.



Supply of Opportunities

In general, there are four types of employment services that Nevada provides to individuals with intellectual and/or developmental disabilities: integrated employment, community-based non-work, facility-based work, and facility-based non-work.¹⁵⁰ Of these four, the Task Force on Integrated Employment and the subsequent Strategic Plan identified integrated employment as the optimal or desired outcome, as evidenced by the goal below.

Strategic Plan Goal 9: The State of Nevada, including the publicly funded university system, is a model employer who supports policies, procedures, regulations, and practices to increase opportunities, foster innovation, reduce barriers, facilitate accommodations, and informed choice for competitive, integrated employment of people with I/DD consistently across the state.

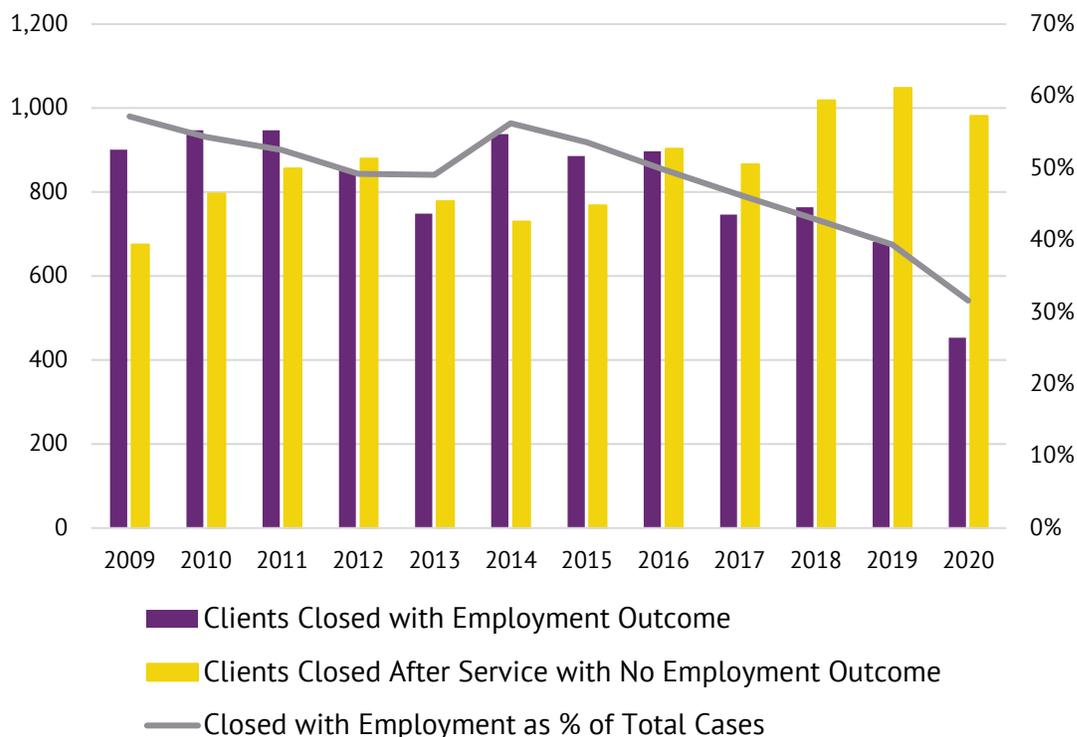
Data reveal that there are limited employment options or opportunities for Nevadans with intellectual disabilities. As discussed previously, over the period 2008-2018, participation in integrated employment in Nevada has declined.

To address opportunities for individuals with disabilities, each state has a State Rehabilitation Council, which helps ensure that vocational rehabilitation programs (e.g., those provided by DETR Bureau of Vocational Rehabilitation) are consumer oriented, consumer driven, and that the programs' services and resources result in employment outcomes for individuals with disabilities. One of the goals of the Nevada State Rehabilitation Council's (NSRC) State Plan is to "increase the number of successful employment outcomes."¹⁵¹ Data from BVR show that the percentage of vocational rehabilitation clients placed in employment has decreased over time. Minutes from meetings of the Nevada State Rehabilitation Council include references to employment outcome goals that were frequently "not met" or had "decreased" and/or were perceived as "so low."¹⁵²

Additionally, BVR reported that in State Fiscal Year 2015, BVR placed 170 individuals with I/DD (out of 588 eligible) into competitive, integrated employment; in 2016, it placed 203 individuals with I/DD (out of 685 eligible) into integrated employment; and in 2017, it placed 172 individuals (out of 559 eligible) into employment.¹⁵³ By their own accounts, BVR is consistently placing less than one-third of eligible applicants in employment.

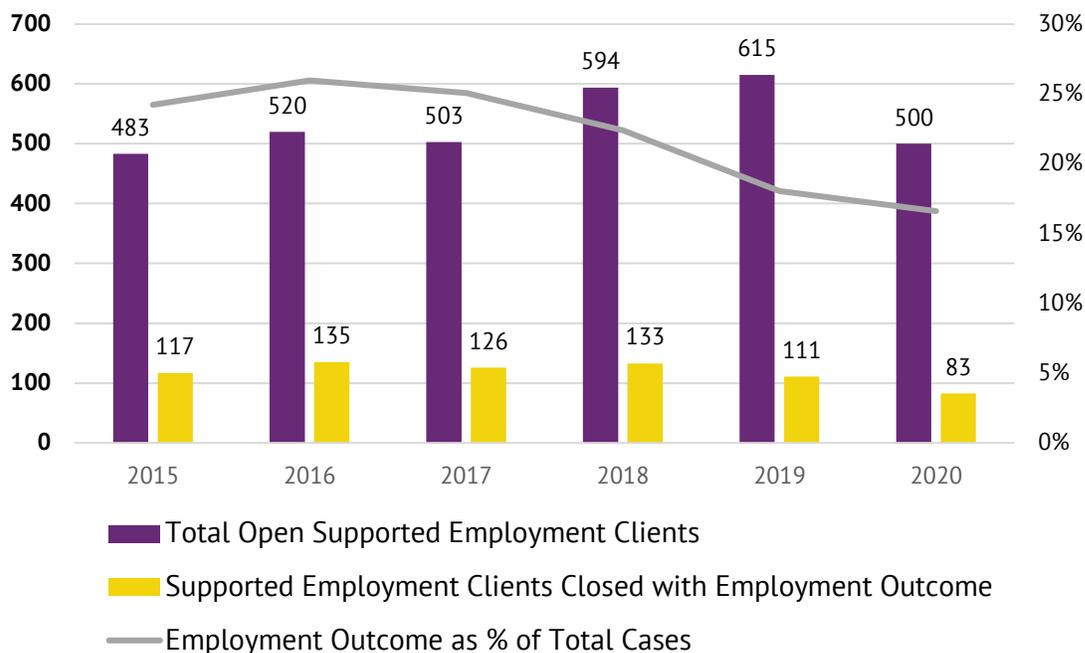
Figures 18 and 19 present data that has been published in various editions of the Nevada State Rehabilitation Council Annual Reports. Figure 18 presents data on outcomes on BVR cases that ended with successful employment. The gray line shows that the percentage of BVR cases that have been closed with a successful employment outcome has decreased over time.

Figure 18. Employment Outcomes among Clients Receiving Services from the Nevada Bureau of Vocational Rehabilitation, 2009-2020¹⁵⁴



Another goal of the Nevada State Rehabilitation Council’s State Plan is to “increase participation in supported employment.”¹⁵⁵ Supported employment is defined as “Individuals receiver[ing] appropriate, ongoing support to find and maintain employment. For example, the 14(c) certificate holder may pay a job coach to work alongside an individual to provide consultation as the individual is learning the responsibilities of the position, but the need for assistance may fade as the individual masters the tasks or develops closer working relationships with other onsite employees. Services are determined by the individuals’ needs and intended to maximize individuals’ integration within the workplace.”¹⁵⁶ Figure 19 presents data on supported employment outcomes among individuals who sought services from Nevada BVR. As Figure 19 indicates, the number of supported employment clients whose cases were closed after the client was successfully placed in employment has declined over time. The gray line reveals that the percentage of total supported employment cases ending with employment has decreased over time from 26 percent in 2016 to 18 percent in 2019.

Figure 19. Total Open Supported Employment Clients and Cases Closed with an Employment Outcome, 2009-2020¹⁵⁷



Community-based non-work settings (e.g., museums, libraries, etc.) accounted for only two percent of employment among individuals with I/DD in 2018, placing Nevada second-to-last among the 40 states and District of Columbia for which there was available data.¹⁵⁸ Community-based non-work services “include all services that are explicitly focused on supporting people with I/DD to participate in individually chosen and scheduled activities and at locations in the community that members of the general community typically participate in and access. Activities may include volunteer work; postsecondary, adult, or continuing education; accessing community facilities such as the library, gym, or recreation center; any activities that people with and without disabilities do in their spare time.”¹⁵⁹

In Nevada, individuals with intellectual and/or developmental disabilities are largely located in facility-based settings – both work and non-work placements. In 2018, facility-based settings accounted for more than 80 percent of service outcomes; and almost 90 percent of funding was directed to facility-based settings, including sheltered workshops and day habilitation programs in non-integrated settings.¹⁶⁰

In Nevada’s Integrated Employment Strategic Plan 2015-2015, the following was noted: “Key informants felt that day habilitation should be included in options for people with I/DD but voiced concern that they are sometimes provided as the only viable option, rather than competitive, integrated employment being the first option offered. Day habilitation settings were often not seen as a resource that supports employment preparedness due to a perceived lack of opportunities for skill development.”¹⁶¹ In November 2019 at the State Rehabilitation Council meeting, BVR also referenced “the lack of choices for individuals with developmental and

intellectual disabilities, not wanting to be in day habilitation or sheltered settings” when presenting information for the Unified State Plan about a new training program (e.g., Meaningful Day).¹⁶²

There are several reasons why individuals with I/DD may be concentrated in facility-based settings in Nevada. Stated differently, there may be several reasons why Nevada is over-reliant on facility-based settings.

- First, individuals may choose to work in facility-based settings. As was noted in the U.S. Civil Rights Commission 2020 Report, *Subminimum Wages: Impacts on the Civil Rights of People with Disabilities*, “[M]any parents and employers are in favor of [sheltered workshops], seeing [them] as a place of safety and dignity for persons with disabilities.”¹⁶³ Adhering to the principles of person-centered planning (and supported decision-making) means that individuals with I/DD should have the option to seek these settings should they so desire.
- Second, research suggests that while workshops which receive Medicaid funding are supposed to prepare individuals with I/DD for integrated employment, this rarely happens. A U.S. Government Accountability Office report found that only 5 percent of the workers in sheltered workshops they surveyed ever left the workshop for community employment.¹⁶⁴ While the report is dated, the findings align with recent data reported by DETR’s Bureau of Vocational Rehabilitation: in SFY 2017, of the 1,172 sheltered workshop employees in Nevada, only 6.3 percent indicated an interest in vocational rehabilitation services.¹⁶⁵
- Third, job training programs created as partnerships between high schools and facility-based programs may inevitably create a pipeline to segregated settings once students with disabilities graduate. Specifically, school districts, vocational rehabilitation services, and facility-based organizations may establish programs that place high school students with intellectual disabilities at facility-based settings for job coaching and job readiness training. By doing so, students, upon graduation, have an easily accessible pathway to a facility-based setting, which is a known and familiar setting to students and their families.

In previous section, our team discussed challenges around the transition process for students with I/DD in Nevada. This challenge is not specific to Nevada.¹⁶⁶ As noted, “a significant number of students with disabilities leave school and directly enter segregated institutions, including sheltered workshops and day programs.”¹⁶⁷ In some cases, “[S]tudents work in segregated adult sheltered workshops for one or more class periods per day, performing some of the same tasks as adults with disabilities. Many such students are ultimately placed as adults in the very sheltered workshops where they worked during school, without first having the opportunity to be informed about or try competitive integrated employment.”

In Nevada, the Bureau of Vocational Rehabilitation, in partnership with CCSD, DHHS ADSD Desert Regional Center, and Opportunity Village (a nonprofit serving adults with intellectual disabilities through vocational training, community employment, and small group enclave workplace experiences) manage the Job Discovery programs, which offer small group enclave workplace experiences in which students rotate job sites every 9-10 weeks.¹⁶⁸ The Desert

Regional Center and Opportunity Village also manage the Pathway to Work collaboration, which is a community-based job training program.¹⁶⁹

- Fourth, Nevada appears to have a limited number of service providers, particularly among organizations and entities that provide support and services to individuals with I/DD. The low number of entities (e.g., service providers, community organizations, etc.) extending support to individuals with I/DD in Nevada may be attributed to several reasons. Among these are the high costs of entry (high fixed costs), organizational capacity, reimbursement rates, fee-for-service contract rates, administrative burdens, regulatory hurdles, and incentive structures. While there may be some benefits to having few providers, it does limit the number of options available to individuals with I/DD and their families. Stakeholders should explore ways to train, support, and build capacity among nonprofits and/or community-based organizations to expand the number of opportunities available to individuals with I/DD.

Notwithstanding the reasons why facility-based settings account for the lion's share of services and funding to serve individuals with intellectual and/or developmental disabilities, our research team acknowledges two central concerns with facility-based settings as voiced by many in the disability rights community. The first is that facility-based settings (e.g., sheltered workshops, day habilitation programs, etc.) offer work experiences or training in segregated, as opposed to integrated, settings. The second is that many of these facilities are holders of 14(c) certificates, which allows employers to pay employees with I/DD at rates significantly below minimum wage.

Disability advocates have long expressed opposition to the use of 14(c) certificates. In 2019, the Nevada Legislature considered Assembly Bill 339, which sought to eliminate subminimum wage practices.¹⁷⁰ State and national conversations around the elimination of subminimum wage practices have gained momentum in recent years. In 2014, the U.S. Centers for Medicare and Medicaid Services (CMS) issued a rule requiring that Medicaid Home and Community Based Services (HCBS)—including employment-related services—be delivered in settings that promote and support community integration for the individuals they serve; states must demonstrate compliance with this rule by March 2023.¹⁷¹ In 2020, the U.S. Commission on Civil Rights examined the issue at length, publishing its findings in the report, *Subminimum Wages: Impacts on the Civil Rights of People with Disabilities*.¹⁷² At the end of 2020, national lawmakers considered reversing the Fair Labor Standards Act, and Congress deliberated (but did not pass) two bills: Raise the Wage Act and Transformation to Competitive Employment Act. In January 2021, President Biden unveiled his \$1.9 trillion American Rescue Plan, which initially included the elimination of subminimum wages for individuals with disabilities. This measure, however, was not included in the final bill. In April 2021, Congress re-introduced the Transformation to Competitive integrated Employment Act, which, if enacted, would “phase out over a five-year period sub-minimum wages for workers with disabilities by providing states, service providers, and other agencies the resources to create competitive integrated employment service models.”¹⁷³

Given the increasing scrutiny of 14(c) certificates and subminimum wage practices, many states have started the process of reducing the number of subminimum wage employees. Table 9 below presents 14(c) information for Nevada and its peer states (based on population size). As seen, Nevada, like many of its peers, has significantly reduced the number of subminimum wage employees by almost 60 percent over the period 2016-2020.

Table 9. Information on 14(c) certificates in Nevada and Peer States

State	Individuals with Disabilities	Individuals in Integrated Employment Services (2018)	Individuals in Facility-Based Services (2018)	Number of 14(c) Holders (2020)	Total 14(c) Employees (2020)	Number of 14(c) Holders (2016)	Total 14(c) Employees (2016)	% Change Employees	Location of BVR
Connecticut	263,831	41%	1%	32	1,861	61	3,933	-53%	Health & Human Services
Iowa	249,251	29%	10%	26	1,267	62	5,450	-77%	Department of Education
Kansas	262,198	12%	35%	34	2,131	48	3,517	-39%	Family/ Social Services
Mississippi	354,162	36%	2%	14	1,533	22	4,743	-68%	Own Department
Nebraska	150,884	19%	22%	13	501	23	1,830	-73%	Department of Education
Nevada	264,893	17%	47%	11	638	10	1,563	-59%	Dept. of Employment
New Mexico	220,167	27%	0%	3	182	5	520	-65%	Department of Education
Utah	218,005	24%	0%	19	1,352	19	1,626	-17%	Own Department

Data presented in Table 9 also underscore our previous point that Nevada has very few service providers extending support to individuals with I/DD, as reflected in the number of 14(c) certificate holders. For example, Nevada has 11 14(c) certificate holders, while Connecticut, with a similar population (and higher levels of integrated employment), has 32 14(c) certificate holders.

In theory, to maximize the options available to individuals with I/DD and their families, one would expect to see a more balanced mix (or diversified portfolio) of options. A more balanced option of services and opportunities could better serve the distinct needs and varied interests of individuals with I/DD. Currently, community-based non-work services account for only two percent of services rendered in Nevada and integrated employment services account for only 17 percent of services rendered. Efforts to expand integrated employment must evaluate and, if deemed optimal, explore strategies for expanding the number of service providers – particularly those that could support community based non-work opportunities (and integrated employment).



For Further Consideration

- Improve outreach to employers and community-based organizations to increase non-facility-based opportunities for individuals with intellectual and/or developmental disabilities.
- Leverage funding (e.g., Medicaid, etc.) to assist individuals successfully retain employment in integrated employment and/or community-based settings.
- Encourage school districts to form partnerships with organizations that promote integrated employment and eliminate those that place individuals in sheltered workshops.
- Help build and strengthen capacity to enable additional community service providers to support individuals with intellectual disabilities.



Impact of Work on Benefits

Some of the largest social safety net programs in the United States provide income, health care, nutrition, and housing supports to individuals with intellectual and/or developmental disabilities. Workers with I/DD also may rely on job supports administered through public programs. These supports include, amongst others, transportation, assistive technology, on-the-job assistance, and personal care services to help with activities of daily living. Any potential loss of benefits is a source of concern for individuals with I/DD who can and wish to work. Recognition of this concern was included in Nevada's Strategic Plan on Integrated Employment 2015-2015 (Goal 6).

Strategic Plan Goal 6: Nevada provides ongoing training and support for employers and their employees with I/DD.

Among the related strategies included in the plan are to “provide proactive benefits planning to people with I/DD and their families to navigate the impact of work on benefits and supports,” and to “promote policies to protect SSI and other benefits against income earned to provide access to needed supports that contribute to an adequate quality of life.”¹⁷⁴

Benefits for Workers with Disabilities

As the National Council on Disability (NCD) observes, “[a] reduction in or loss of benefits can be disruptive for people with disabilities who do not earn enough to maintain self-sufficiency but are considered to be working too much for public benefit program assistance.”¹⁷⁵ Programmatic complexity compounds the problem, and collectively, these can create barriers to explore employment. In this section, we examine challenges around benefits for individuals with I/DD who may be considering work or who are currently in the workforce.

A Benefits Cliff?

A “benefits cliff” or “cliff effect” is defined broadly as “the sudden and often unexpected decrease in public benefits that can occur with a small increase in earnings.”¹⁷⁶ Definitions of the benefits cliff do vary, however. A more formalized definition posits that “a major benefit cliff [is] where each extra \$1 of income leads to a loss in benefits of more than \$1.”¹⁷⁷

Benefits cliffs can disincentivize (integrated) employment. If an individual's or family's personal financial circumstances remain unchanged or are made worse by virtue of working, the rational economic decision is to forgo employment in favor of the status quo.

Were individuals and families reliant on any one program in isolation, cliff effects likely would be dampened. But many beneficiaries require assistance from more than one program at a given time. Challenges arise from the interaction of multiple programs, across which eligibility criteria are not aligned.¹⁷⁸ This interdependence can mean, that income in one program may count against the benefit level in another.¹⁷⁹

The National Council on Disability characterizes the “reduction or removal of benefits” as “[a] very real and imminent threat [that] discourages people with disabilities from participating in full-time employment.”¹⁸⁰ According to the subject matter experts with whom the Guinn Center research team spoke, however, while certain benefits may decrease as income increases, workers

with I/DD likely do not face cliff effects. There is a recognition that individuals with developmental and/or intellectual disabilities require a broad array of supports to participate in the workforce, so robust protections are embedded in programs to achieve optimal outcomes. None of the experts with whom our research team spoke ruled out the possibility that any given individual might face a benefits cliff, depending on his (her) circumstances, but the consensus is that it is not a broad-based phenomenon.

To illustrate the interdependence and complexity, our team considers two of the largest social assistance programs on which workers with I/DD may rely:

- Supplemental Security Income (SSI) “is a need-based public assistance program that provides monthly cash payments to aged, blind, or disabled individuals (including blind or disabled children) who have limited assets and little or no Social Security or other income.”¹⁸¹ It is funded by U.S. Treasury general funds, not Social Security taxes.¹⁸²
- Medicaid is “[a] jointly-funded, Federal-State health insurance program for people with limited income and resources. It covers certain children, and some or all of the aged, blind, and disabled in a state who are eligible to receive federally-assisted income maintenance payments.”¹⁸³

The qualifying criteria for SSI and Medicaid are manifold and quite complex; a comprehensive analysis is beyond the scope of this report. Here, however, our team considers the relationship between wage-based earned income and benefit payments to assess whether employment produces cliff effects. Our team does not rule out the possibility of benefits cliffs resulting from other factors such as assets in excess of limits, unearned income, etc.

Briefly, a total of 41,878 blind and disabled Nevadans received SSI federal benefits in 2019.¹⁸⁴ These beneficiaries accounted for nearly three-fourths (roughly 74.0 percent) of all SSI recipients but only made up about 1.4 percent of Nevada’s total population.¹⁸⁵ Broadly speaking, an individual qualifies for SSI if that person: (1) is aged, blind, or disabled pursuant to the Social Security Act (there are age-specific definitions of disability that must be met); (2) has limited income and resources; (3) meets a specified set of other requirements (e.g., certain citizenship requirements); and (4) files an application for payments.¹⁸⁶

To determine eligibility for SSI, the Social Security Administration (SSA) considers first whether a person can engage in substantial gainful activity (SGA). “Most adults are considered disabled for...SSI eligibility purposes if they are ‘unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment that can be expected to result in death or that has lasted or can be expected to last for a continuous period of not less than 12 months.’”¹⁸⁷ According to the SSA, “[a] person who is earning more than a certain monthly amount (net of impairment-related work expenses [IRWE]) is ordinarily considered to be engaging in SGA.”¹⁸⁸ Monthly earnings treated as SGA varies with a person’s disability.¹⁸⁹ SGA for the non-blind disabled in 2021 amounts to \$1,310 and applies both to Social Security income and SSI.¹⁹⁰

Once an individual has been approved for SSI and has received benefits for a month, the SSA does not consider whether that person is working over the SGA. Specifically, “SGA determinations are required to establish initial disability for SSI but are not required for continuing SSI eligibility

purposes.”¹⁹¹ If the SGA threshold is cleared, SSA will determine an individual’s monthly benefit amount. For these purposes, there is countable income, or income that is counted against the benefit amount, and income that is not counted against the benefit amount.

Countable income includes *earned income* (e.g., wages, net earnings from self-employment, certain royalties, honoraria, and sheltered workshop payments); *unearned income* (all income that is not earned such as Social Security benefits, pensions, e.g., state disability payments, unemployment benefits, interest income, dividends and cash from friends and relatives); *in-kind income* (food, shelter, or both that a person gets for free or for less than its fair market value); and *deemed income* (part of the income of a spouse with whom an individual lives, the individual’s parent(s) with whom the person lives).¹⁹² Income that is not counted is sometimes referred to as an income disregard. Amongst others, SSI excludes (does not count): the first \$20 of most income received in a month; the first \$65 of earnings and one-half of earnings over \$65 received in a month; the value of SNAP received; home energy assistance; etc.¹⁹³

This means that the SSA does deduct money from an individual’s SSI payment if that person earns income but does not count certain income against the benefit level. In 2021, the maximum federal amounts are as follows: \$794 for an eligible individual, \$1,191 for an eligible individual with an eligible spouse, and \$397 for an essential person.¹⁹⁴

On the next page to determine whether there is a cliff effect for an SSI recipient who receives wages from work – we construct three hypothetical scenarios with sample calculations, using an eligible individual to illustrate (see Text Box 2). The baseline scenario is an eligible individual who does not earn wages from work, and net of other limitations, receives a \$794 monthly benefit payment. All scenarios assume that the individual would receive the full monthly benefit payment if not otherwise reduced through countable earned income from work (i.e., wages).

The scenarios are meant to illustrate the nexus of SSI benefit payments and countable earned income from wages. The analysis indicates that there is no cliff effect, given that net monthly amounts for eligible individuals always exceed the SSI federal benefit rate, even at the phase-out threshold. To be clear, these examples rest on the assumption that the operational relationship is between the SSI federal benefit rate and wages from employment. Amongst others, they do not consider unearned income, in-kind income, or deemed income. Nor do they consider assets and other resources. It is possible that benefits cliffs may occur once all inputs are considered. But in isolation, increases in earned income from employment by SSI recipients would not produce a cliff effect.

Turning to Medicaid, a common fear amongst individuals with intellectual and/or developmental disabilities is that working will result in a loss of health insurance coverage and other supports that the program provides.¹⁹⁵ This fear can act as a deterrent to efforts to seek integrated employment.¹⁹⁶ As one study notes, “Medicaid often is especially important to working people with disabilities because private insurance typically does not cover all of the services and supports they need to live independently and to work.”¹⁹⁷ Similarly, a report from the U.S. Commission on Civil Rights observes that, “[m]any individuals with disabilities rely on Medicaid funding not only for their healthcare, but also to cover expenses incurred by day and employment services.”¹⁹⁸

To determine whether there is a cliff effect for an SSI recipient who receives wage from work, we construct three hypothetical scenarios with sample calculations. The baseline scenario is an eligible individual who does not earn wages from work, and net of other limitations, receives a \$794 monthly benefit payment.

- **Scenario 1:** An eligible individual with a total monthly income of \$1,000 in gross wages
 - Gross Wages
 - \$1,000 in gross wages, less \$20 (income that is not counted) = \$980
 - \$980, less \$65 (income that is not counted) = \$915
 - \$915, divided by 1/2 (countable income) = \$457.50
 - SSI Federal Benefit Rate
 - \$794 (SSI federal benefit rate) – \$457.50 (countable income) = \$336.50 (SSI federal benefit)
 - \$1,000 (gross wages) + \$336.50 (SSI federal benefit) = \$1,336.50 (total monthly amount)
 - \$1,336.50 (total monthly amount) – \$794 (SSI federal benefit rate) = \$542.50 (amount in excess of SSI federal benefit rate alone)
- **Scenario 2:** An eligible individual with a total monthly income of \$1,200 in gross wages
 - Gross Wages
 - \$1,200 in gross wages, less \$20 (income that is not counted) = \$1,180
 - \$1,180, less \$65 (income that is not counted) = \$1,115
 - \$1,115, divided by 1/2 (countable income) = \$557.50
 - SSI Federal Benefit Rate
 - \$794 (SSI federal benefit rate) – \$557.50 (countable income) = \$236.50 (SSI federal benefit)
 - \$1,200 (gross wages) + \$236.50 (SSI federal benefit) = \$1,436.50 (total monthly amount)
 - \$1,436.50 (total monthly amount) – \$794 (SSI federal benefit rate) = \$642.50 (amount in excess of SSI federal benefit rate alone)
- **Scenario 3:** An eligible individual with a total monthly income of \$1,673 in gross wages
 - Gross Wages
 - \$1,673 in gross wages, less \$20 (income that is not counted) = \$1,653
 - \$1,653, less \$65 (income that is not counted) = \$1,588
 - \$1,588, divided by 1/2 (countable income) = \$794
 - SSI Federal Benefit Rate
 - \$794 (SSI federal benefit rate) – \$794 (countable income) = \$0 (SSI federal benefit)
 - \$1,673 (gross wages) + \$0 (SSI federal benefit) = \$1,673 (total monthly amount)
 - \$1,673 (total monthly amount) – \$794 (SSI federal benefit rate) = \$879 (amount in excess of SSI federal benefit rate alone)

In the baseline scenario, the person receives the full SSI federal benefit of \$794. With gross wages of \$1,000, the SSI federal benefit is reduced to \$336.50. A gross wage increase of \$200 to \$1,200 would reduce the SSI federal benefit to \$236.50, and at the phase-out of \$1,673 in gross wages, the SSI federal benefit is \$0. The benefit portion of the individual's total monthly amount decreases as gross wages increase. A cliff effect would require that an individual's total monthly amount would reduce such that the person would be no better off, or perhaps worse off, than if that person had forgone work to receive the SSI federal benefit alone. Under this condition, each extra dollar of income would lead to a loss in benefits of more than one dollar.¹⁹⁹ Under the treatment of earnings in relation to SSI, that is not the case. Total monthly amounts increase as the person receives more in gross wages and always exceed the SSI federal benefit rate alone. For example, in 2021, at \$1,000 in gross wages, the total monthly amount is \$1,336.50; at \$1,200 in gross wages, the total monthly amount is \$1,436.50; and at \$1,673 in gross wages, which is the phase-out, the total monthly amount is equal to the gross wage amount of \$1,673. As gross wages increase, the amount in excess of SSI federal benefit rate increases, accordingly: for an individual with gross wages of \$1,000, the amount in excess of the SSI federal benefit rate is \$542.50; for an individual with gross wages of \$1,200, the amount in excess of the SSI federal benefit rate is \$642.50; and for an individual with gross wages of \$1,673 at the phase-out, the amount in excess of the SSI federal benefit rate is \$879.

Regarding Medicaid, the question of benefits receipt is a binary one. For an enrollee, the prevailing issue is whether the individual can maintain health insurance coverage (and possibly, additional supports provided through Medicaid) or will lose it altogether. Loss of coverage thus would constitute a significant cliff effect.

Insofar as eligibility criteria differ across SSI and Medicaid, there might be cause for concern, particularly as individuals with I/DD depend on the extra supports these programs can provide. Medicaid is a complicated system to navigate, and a cursory understanding of eligibility requirements would seem to suggest that fears surrounding loss of benefits are not unfounded.

Broadly, “[i]n Nevada, households with annual incomes of up to 138% of the federal poverty level may qualify for Medicaid. This is \$16,753 per year for an individual, or \$34,638 per year for a family of four.”²⁰⁰ Pursuant to the Affordable Care Act (ACA) of 2010, the income basis for Medicaid eligibility is Modified Adjusted Gross Income (MAGI), which is pre-tax income, less certain exemptions (but with some exclusions added back in).²⁰¹ Theoretically, an eligible individual with I/DD could earn a total monthly amount that includes a gross wage portion and the SSI federal benefit portion but exceed the Medicaid eligibility threshold.

However, to the extent that benefits cliffs arise from the unintended consequences of programmatic design that fails to account for interaction effects, this does not hold true for SSI and Medicaid. Programmatic alignment is an intentional design feature built into SSI and Medicaid for individuals with disabilities who receive benefits in these programs. Whereas programmatic interdependence can distort benefits receipt, for individuals with disabilities, it can confer an advantage.

Medicaid coverage is granted automatically to recipients of SSI in 34 states and the District of Columbia, such that an SSI application serves as a Medicaid application.²⁰² Eight states, including Nevada, align income, resource, and disability standards of the SSI program for the purposes of Medicaid eligibility determinations but require a standalone application.²⁰³ Thus, in Nevada, individuals qualify for Medical Assistance to the Aged, Blind, and Disabled (MAABD) in Medicaid by virtue of being an SSI recipient.²⁰⁴ The reason is that “SSI is a mandatory Medicaid eligibility pathway, which means that states are required by law to cover SSI recipients. In general, individuals in receipt of SSI for a given month are also eligible for Medicaid for that month, provided they meet all other Medicaid eligibility requirements.”²⁰⁵

In addition, under Section 1915 of the Social Security Act, states may also develop home and community-based services (HCBS) waivers to provide a combination of medical and non-medical services. These are commonly referred to as 1915(c) waivers, which is a reference to subsection (c) of Section 1915.²⁰⁶ According to an official with the Nevada Department of Health and Human Services, individuals who are not otherwise Medicaid-eligible may receive waiver services “because section 1915(c) of the Social Security Act waives certain income requirements. Once an individual, who otherwise would not qualify for Medicaid health insurance benefits due to being over income, is determined eligible for the 1915(c) waiver program they may be able to receive waiver services as well as Medicaid State Plan services (common health insurance benefits). The waiver provides an enhancement to traditional Medicaid through jobs/day training services, prevocational services, residential support services, etc.”²⁰⁷

Nevada has an approved waiver for Individuals with Intellectual Disabilities and Related Conditions (ID). The waiver offers the following services: jobs and day training services (day habilitation, prevocational services, supported employment, career planning); residential support services (intermittent or residential); residential support management; behavioral consultation, training, and intervention; counseling (individual and group); non-medical transportation; nursing services; and nutrition counseling.²⁰⁸

Thus, SSI beneficiaries typically receive health insurance coverage through Medicaid, as SSI is a mandatory Medicaid eligibility pathway. Furthermore, some non-beneficiaries – that is, those whose income is too high for SSI – may qualify for waiver services, and, accordingly, common health insurance benefits, as certain income requirements are waived to ensure that individuals with disabilities continues to receive health insurance coverage and additional supports, as necessary. (SSI beneficiaries can qualify for waiver services, as well.) In other words, protections are embedded throughout the Medicaid system to prevent coverage losses for the I/DD population and other individuals with disabilities.

The preceding discussion suggests that cliff effects in Medicaid are unlikely, though not impossible. There is a structural dimension to the SSI-Medicaid relationship in which loss of coverage may be a perceived threat: eligibility redeterminations. The Social Security Administration conducts redeterminations once every one to six years, and, in so doing, reviews an individual's income, resources, and living arrangements to ensure that the person continues to qualify for SSI and is receiving the correct payment.²⁰⁹ Given that SSI has income requirements, excess income can lead to termination from the SSI rolls.²¹⁰ Moreover, "SSI recipients typically become ineligible for Medicaid whenever their cash payments are suspended or terminated."²¹¹

This seems to imply that an individual would lose Medicaid coverage if her SSI payments were suspended, as both the mandatory Medicaid eligibility pathway through SSI would be foreclosed, and that person's income levels may be sufficiently high as to exceed qualifying criteria for Medicaid through traditional means, including that for waiver services. However, according to the Social Security Administration, "Section 1619(b) of the Social Security Act provides some protection for these beneficiaries."²¹² Specifically, "[i]n most cases, you can keep your Medicaid even if you earn too much to receive a monthly Supplemental Security Income (SSI) benefit[.]"²¹³ An SSI beneficiary whose earnings are too high to receive a monthly benefit payment may qualify for continuing Medicaid coverage if: that person was eligible for an SSI cash payment for at least one month; still meets the disability requirement and all other non-disability SSI requirements; needs Medicaid benefits to continue to work; and has "gross earnings that are insufficient to replace SSI, Medicaid and publicly funded attendant care services."²¹⁴

However, individuals evidently qualify for continued Medicaid coverage under Section 1619(b) only if their payments have been suspended, not terminated. Pursuant to the Policy Principles set forth in the Social Security Administration's Program Operations Manual System, "[r]einstatement [under 1619(b)] is possible at all times in all States, unless the individual's eligibility is terminated."²¹⁵ Termination may occur after 12 months of payment suspension.²¹⁶

It is possible, then, that individuals with disabilities whose SSI payments have been terminated may lose Medicaid coverage. That is where the greatest likelihood of a benefits cliff in Medicaid

lies. However, it appears as though both the SSA and Medicaid make every effort to find solutions for workers with disabilities to forestall loss of coverage. Additionally, for the individual who is terminated from the SSI rolls and whose income is otherwise too high to qualify for Medicaid, there is one remaining institutional guardrail in place to preempt coverage loss: Medicaid buy-in programs for workers with disabilities, which most states, including Nevada, have.²¹⁷

In Nevada, the Medicaid buy-in program for workers with disabilities is called Health Insurance for Work Advancement (HIWA). It is optional under Medicaid for employed workers with disabilities and allows qualifying individuals to “work, earn money, and have affordable health insurance coverage.”²¹⁸ Individuals with a combined net income that is less than 200 percent of the federal poverty level pay a monthly premium of 5 percent of their combined net income; those whose combined net income is between 200 percent and 250 percent of the federal poverty level pay a monthly premium of 7.5 percent of their combined net income.²¹⁹ In 2020, an average of three individuals received Medicaid coverage through HIWA.²²⁰ In interviews the Guinn Center conducted with State officials and subject matter experts, the limited take-up of HIWA was cited as suggestive evidence that sufficient protections are in place for workers with disabilities to receive Medicaid, rendering the loss of coverage a rare event.

Whether or not there is a tangible benefits cliff for working individuals with intellectual and developmental disabilities is difficult to determine with certainty. As multiple State officials and subject matter experts shared with the Guinn Center, the answer ultimately is unique to each beneficiary. Many different factors are considered in programmatic eligibility determinations, and qualifying criteria differ across programs, as discussed here. Ascertaining whether any one individual may face a benefits cliff is not possible, but the evidence seems to suggest that, at least in two of the largest programs, cliff effects are unlikely or uncommon.

While there are benefit eligibility screening tools, such as “SSA BEST,” which is provided by the Social Security Administration, there is no centralized benefits calculator that would allow an individual to enter the relevant inputs for individual programs – such as family income, assets, et cetera – but would produce a global estimate across programs or a benefits breakdown, by program.²²¹ Such an integrated system would permit users to enter hypothetical income scenarios to determine how earnings, or earnings changes, would affect their benefits in various programs.

Perceptions of Benefits Cliffs, Uncertainty, and Systems Navigability

Irrespective of whether there are tangible, provable cliff effects in social assistance programs for individuals with disabilities, the perception of the benefits cliff is quite real. An analysis by the Social Security Advisory Board (SSAB) shows that, amongst SSI-only recipients, only 12.1 percent were aware of 1619(b) continued Medicaid coverage.²²² Only 13.6% of individuals with disabilities know the truth, that the person with a disability will always come out ahead if they work (for every dollar they earn from a job, their SSI is reduced by less than a dollar).²²³

The SSAB observes that the effect of any law on a given individual’s behavior is contingent on how well they understand the law, and thus, there is evidence to suggest that SSI beneficiaries “do not understand how the law affects them.”²²⁴ This is an information deficiency, according to the SSAB, which cautions that, “[i]t is not clear the extent to which low awareness is a result of

poor information dissemination by SSA [Social Security Administration], lack of interest among recipients that are not work-oriented, or general complexity of the policies.”²²⁵ But it follows that fear of benefits loss is pervasive and entrenched, and it can discourage efforts to seek integrated employment. In part, this may explain why, as of December 2019, just 5.1 percent of Nevada’s SSI blind and disabled recipients were working.²²⁶

In a similar vein, the National Council on Disability (NCD) found that nonprofit agencies and members of the disability community reported that potential benefits loss, particularly SSI and health assistance, is a “common issue.”²²⁷ Some workers with disabilities request fewer hours or decline pay raises to avoid benefits loss.²²⁸

Perception of a benefits cliff also can be more nuanced than is traditionally understood. It may not be as straightforward as overcoming misinformation factors, such as the erroneous belief that SSI federal benefits are reduced by more than one dollar for every dollar earned from work. As one subject matter expert shared with the Guinn Center, the ratcheting down of the SSI federal benefit as wages increase is very visible, as our hypothetical scenarios for SSI recipients who receive wages from work previously demonstrated.

Consider an individual who experiences a decrease in his, her, or their monthly SSI federal benefit because of increased income from employment. That individual might not take total monthly amounts – or the monthly SSI federal benefit, plus earnings from work – into account but rather sees only the smaller SSI portion and believes overall monthly amounts have decreased. It is problematic because, all else equal, total monthly amounts for SSI recipients who work always exceed the SSI federal benefit amount, even at the phase-out. The problem is compounded for those who do not work a consistent number of hours per month and thus may observe month-to-month variations in SSI federal benefit amounts.

Recent reports suggest that the perception problem may explain, in part, why some individuals with disabilities and their families exhibit preferences for sheltered work: it affords stability and certainty around disability benefits that may outweigh the tangible economic gains from competitive integrated employment. In a study that sought to determine what factors influence decision making over sheltered workshops versus integrated employment, the authors found that 57 percent of families cited disability benefits as important or very important in choosing sheltered work.²²⁹ Retention of benefits was also important to adults with I/DD, 67 percent of whom cited that as factor in choosing sheltered workshops.²³⁰

The perception problem is accompanied by the uncertainty problem, which differs in accordance with time in the workforce. In other words, benefits uncertainty is not uniform across individuals with I/DD but turns on whether the person in question is considering employment or is already in the workforce. Potential workers typically are pre-transition-age or transition-age youth (though they may be older). Certainty around benefit levels is an important part of the planning process, so in the absence of clarity in advance, an individual may choose the security of “the familiar” in lieu of the uncertainty that attends the prospect of work.

For workers with I/DD that are not in salaried positions and may work variable hours, monthly adjustments in the income-benefit ratio do not only affect perceptions of the SSI federal benefit

amount but can produce uncertainty regarding the ability to cover expenses at any given time. One subject matter expert noted that choosing not to work may reduce anxieties about any potential income-benefit fluctuations.

Moreover, as with individuals of all abilities who rely on social supports, workers – or would-be workers – with I/DD confront a bureaucratic morass as part of the process to secure and maintain benefits. Navigating the complicated system can be confusing, intimidating, and time-consuming.

In Nevada, pre-transition and transition-age youth work with school districts and BVR.²³¹ Individuals of all ages may receive services from BVR, which helps “people with disabilities become employed and to help those already employed perform more successfully through training, counseling and other support methods.”²³²

On the benefits side, DETR’s Bureau of Disability Adjudication determines eligibility for SSI.²³³ The Division of Welfare and Supportive Services (DWSS) at the Nevada DHHS determines eligibility for Medicaid through the Medical Assistance to the Aged, Blind, and Disabled (MAABD) program, which makes determinations regarding the mandatory Medicaid eligibility pathway by virtue of receipt of SSI federal benefits.²³⁴ Individuals receiving waiver services through Nevada’s approved 1915(c) waiver (home and community-based services [HCBS]) for individuals with intellectual disabilities and related conditions (ID) will find that the “waiver serves recipients of all ages who have a documented intellectual disability or related condition, such as Autism or Down Syndrome, as determined by the Division of Health Care Financing and Policy (DHCFP) and the Aging and Disability Division (ADSD).”²³⁵

Perceptions of potential benefits loss and uncertainty in the pre-work planning phase can create barriers to entry. These individual perceptions and preferences are shaped by a complex system that is characterized by a lack of coordination or centralization and process that is not streamlined. This is made manifest by the absence of a single point of contact or caseworker for each person with disabilities who comes into contact with the apparatus of the State. That benefits counseling only becomes available to individuals who have secured a position only exacerbates the problem.

Given the interaction between benefits and employment, the different eligibility criteria, and the intensive case management often required by individuals with disabilities, it is not surprising that several states have organizationally placed their vocational rehabilitation services in the state’s health and human service department. Several states that have higher percentages of individuals placed in integrated employment have their vocational rehabilitation services located within their state health and human services department.

Many stakeholders in the disability community cite the “benefits” cliff as a reason that individuals with differing abilities may not seek competitive, integrated employment. The idea behind the benefits cliff, explicitly, is that individuals with intellectual and/or developmental disabilities may risk losing social safety net benefits once they enter the workforce and their income exceeds certain threshold amounts. Stated differently, the benefits cliff would suggest that an individual with a disability who secures employment could face a partial or full loss of social safety net benefits once the individual’s wages or earning exceed a certain level. However, our research suggests that the risk of a benefits cliff may be more of a perceived risk than an actual risk.

Interviews with self-advocates and other stakeholders in Nevada revealed that fear of this benefits cliff was a significant reason why individuals with I/DD have chosen not to pursue integrated employment. A 2021 U.S. Government Accountability Office report, *Subminimum Wage Program: Factors Influencing the Transition of Individuals with Disabilities to Competitive Integrated Employment*, echoed our research team’s findings: “Eight of the 17 interviewees considered this [concern about maintaining benefits] to be among the most important factors. One interviewee noted that many individuals working under a 14(c) certificate receive Supplemental Security Income (SSI), and that individuals or families may fear increased earnings will jeopardize the individual’s eligibility for SSI and access to the health care that may come with it.”²³⁶

The lack of information around benefits and the impact of employment on benefits underscores the need for more benefits counseling early in the transition process. As reported in the Rehabilitation Services Administration’s 2019 Monitoring Report, “According to reported data, less than 1.0 percent of individuals [in Nevada] received vocational counseling and guidance and customized employment services, and the percentage of individuals receiving benefits counseling was similarly low.” Specifically, benefits counseling accounted for less than less than 2 percent of BVR services provided to clients during FY 2015 and FY 2016.²³⁷ Very few of the community providers in Nevada offer benefits counseling.

The perception of a “benefits” cliff and the accompanying fear that employment may adversely affect benefits is significant. However, as the example scenarios illustrate, while increased wages may reduce benefits, the net gain remains positive (and higher). Several community rehabilitation providers acknowledged as much and recommended that “benefits counseling be given to both parents and individuals as early as possible.” This perception of reduced income may deter individuals away from integrated employment and into other settings or opportunities.

Finally, we note that notwithstanding the lack of clear and/or accurate information about the impact of employment on benefits, governments have taken steps to remove real and/or perceived barriers to choosing employment. New instruments include ABLE accounts, “which are tax-advantaged savings accounts for individuals with disabilities and their families [...]”²³⁸ ABLE accounts allow individuals to have tax-free savings accounts to cover qualified disability expenses, such as education, housing, transportation, employment training/support, and more.²³⁹ Up to \$100,000 of funds in an ABLE account is not treated as a countable resource, or asset, for Supplemental Security Income (SSI), which has countable resource limits of \$2,000 for an individual and \$3,000 for a couple.²⁴⁰ This means that individuals with disabilities and their families can save funds over the countable limits without losing SSI (or Medicaid).²⁴¹



For Further Consideration

- Students with disabilities and their families should be provided with comprehensive, regular benefits counseling at the age of 14 when transition planning starts. Benefits counseling programs for all adults with I/DD should be expanded.
- Benefits counselors and transition specialists should share information about ABLE accounts.



Performance Management and Data Management Systems

The importance of collecting, using, reporting data featured prominently in Nevada's Integrated Employment Strategic Plan 2015-2025. In particular, (limited) coordination and collaboration around the collection, use, and exchange of data was identified as a barrier.

Strategic Goal 10: Information is gathered and reported annually on key indicators for competitive, integrated employment across education, employment, and other related systems.²⁴²

Additionally, the plan's architects identified the following strategies to address the data-centered challenges:

- (1) "Use the WIOA mandated Combined State Plan [now Unified State Plan], Performance and Accountability team's recommendation to establish outcomes tied to length of time to achieve employment, longevity of employment, wages, benefits and satisfaction in the workplace.
- (2) Develop and adopt statewide universal data elements to capture data related to key indicators across the lifespan.
- (3) Collect data beginning in school to track, follow and measure key data elements including assessment, placement, retention, wages and satisfaction.
- (4) Monitor, track and share performance measurements, trends and other data at the individual and program/system level. Utilize the data annually to review and refine statewide strategies, and
- (5) Use longitudinal studies to measure qualitative as well as quantitative person-centered parameters such as: a) satisfaction with their job as structured and as appropriate to their skills and desires; b) actual interaction with co-workers; c) actual support from agencies, providers and employers; and, d) ability to change jobs as skill levels and interests change."

An assessment of annual reports, data requests, and publicly available information suggests that Nevada has not implemented many (if any) of these strategies. Despite the publication of the strategic plan and completed reports, the disability community has yet to identify a strategic goal – i.e., *'Nevada will achieve 30 percent integrated employment services by 2030.'* In other words, there is a lack of data collection and monitoring of outcomes, and a lack of clarity (and definition) around success.

To illustrate, in the 2019 February meeting of the Nevada State Rehabilitation Council (NSRC), it was reported, "There was no current model to lend to a quantifiable success. VR staff is trying to figure out how to measure what success looks like. The [NSRC] council asked VR staff to bring forward tracking data for the council to review and have a discussion and ask questions to give everyone an opportunity to understand what is being tracked and look for trends of what success may look like in the State Plan going forward."²⁴³ While BVR reports quarterly on data outcomes (as required the federal Rehabilitation Services Agency), the data reported and outcomes are not informed by an alignment with programs or with an overall state strategic goal.

Data collection remains extremely limited. For example, our team could not determine how many students participate in each of CCSD's special education transition programs (i.e., Job Discovery, Pathways to Work, Job Exploration and Expectation Program) and what outcomes were realized for each student (e.g., eventual employment, post-secondary education, community-based non-work, etc.). Nor could we find data on the number of students who participate in CCSD's Job Discovery and Pathways to Work programs (a partnership between BVR, Desert Regional Center, CCSD, and Opportunity Village) and eventually find employment (at Opportunity Village or elsewhere). In September 2019, the Nevada State Rehabilitation Council Vice Chair Bob Brown "asked VR to keep a list of the percentage of IEP meetings being attended."²⁴⁴ In 2020, the Guinn Center research team submitted a similar request to BVR for identical data (i.e., "IEP meeting attendance data for VR counselors (and data by school district, if possible, or rural/urban))." BVR's response to the Guinn Center's request was "We do not have data responsive to this request."

Data reporting also has its own sets of challenges. The Guinn Center research team had difficulty compiling longitudinal data on BVR outcomes. Quarterly outcomes were updated more than once. Outcome reporting language is inconsistent, and definitions are rarely or insufficiently included. The inconsistent reporting of data and the lack of clarity around the meaning of data and outcomes led one member of the Governors' Workforce Development Board to express a "lack of confidence" in any of the data that BVR reports out publicly.²⁴⁵

Accessing overall integrated employment data across the entire ecosystem is challenging. BVR tracks and monitors some outcome data, but it is only reported in its annual report or at quarterly meetings of the Nevada State Rehabilitation Council. School districts do not regularly report on outcomes and relevant data is not made publicly available. In short, Nevada's stakeholders have yet to design and implement a "statewide universal data platform" or 'data dashboard' to report key indicators (across agencies) and track progress. Moreover, the barriers to accessing relevant information and data are high, especially for families without access to technology, families who are under-resourced, and families who are not native English speakers.

Here, our team references the Council of the Great City Schools report to CCSD and one of the concluding recommendations in the final report:

"Monitoring and Accountability. Develop a process for ongoing monitoring of expected referrals, evaluations, eligibility practices, and data to determine if the district's strategies are effective. Rather than using a traditional record and review compliance model, initiate this review with schools so they are aware of problems and are better prepared to implement follow-up action. Enable staff to observe best practices and receive coaching that will improve their knowledge and skills."²⁴⁶

This recommendation is relevant to and should be adopted by all stakeholders who support and provide services to individuals with I/DD.



For Further Consideration

- Establish a uniform definition of integrated employment and use the definition to create a statewide baseline to measure performance progress.
- Strengthen data reporting, collection, and analysis of integrated employment.
- Develop a five-year, system-wide, employment policy priority and strategy that increases integrated employment by a set percent each year.
- Identify a specific integrated employment target goal (a "North Star").
- Consider additional strategies that promote employment services and outcomes, such as encouraging service systems to make use of community resources available in schools, institutions of higher education, employment networks, and federal and state work incentive programs already in place.
- Strengthen transition-related data collection and reporting requirements.
- Require school districts to report integrated employment outcomes to the board of trustees, Nevada Department of Education, and the Nevada legislature. Admittedly, this may require the collection of new data and/or improved information sharing practices across various agencies (e.g., school districts, BVR, Desert Regional Center, and DHHS).



Government as Leader

The Strategic Plan on Integrated Employment referenced the important role government at all levels – state, local, higher education – can play in promoting competitive, integrated employment. The Plan noted:

Government as a Leader and Model Employer: “Government can assume a leader’s role, act as a model employer for people with I/DD and set the path for the business community in competitive, integrated employment.”²⁴⁷

In 2010, the Nevada Governor’s Council on Developmental Disabilities (NGCDD) hosted a summit on Integrated Employment, which “jumpstarted” conversations about the issue. Later, NGCDD’s Employment First Ad-Hoc Committee created a Position Statement on Integrated Employment which led to Governor Sandoval standing up the Governor’s Task Force on Integrated Employment through Executive Order. The Executive Order created a Task Force to evaluate existing opportunities for individuals with different abilities and prepare a three-, five-, and ten-year strategic plan for “creating a more integrated workforce and expanding competitive employment opportunities for individuals with intellectual/developmental disabilities.”

Following the completion of the Strategic Plan on Integrated Employment, the Task Force dissolved. And, as noted by a DETR agency official, “There was not an action to designate a champion nor authorize a specific entity to take Ownership of the Plan.”²⁴⁸ Then-Governor Sandoval requested that the Commission on Services for Persons with Disabilities (CSPD) take responsibility for overseeing the implementation of the ten-year strategic plan, Nevada’s Strategic Plan on Integrated Employment 2015-2025, which included dozens of strategies and recommendations for the plan’s twelve goals. The Commission responded by creating a subcommittee to work on the implementation of the plan. In 2016, NGCDD provided funding to the DHHS Aging and Disability Services Division (ADSD) to assist the subcommittee with implementation efforts of the Strategic Plan on Integrated Employment. The CSPD submitted a final report to the Office of the Governor in 2017. Since that time, however, no further direction has been provided to CSPD or any other agency to monitor implementation or evaluate progress on the plan’s strategic goals. In short, no single agency was designated to oversee the implementation. And stakeholders never created specific integrated employment targets to guide their work.

At the same time, Nevada has allowed its membership in national organizations focused on improving integrated employment outcomes to lapse. Specifically, Nevada was a member of the State Employment Leadership Network (SELN), a multistate technical assistance collaborative established to improve employment outcomes, during 2014-2017. When a senior member of DHHS retired, Nevada’s membership in SELN lapsed.

In short, efforts to improve integrated employment outcomes for individuals with I/DD, monitor progress, address challenges, and organize the work are currently without institutional or organizational leaders. Information about transition services and benefits counseling is not reaching all students with I/DD and their families. Fiscal resources are not being leveraged to maximize outcomes (e.g., Nevada annually fails to provide the match to draw down the entire

pool of Section 110 federal funds available; over the period SFY 2012 to 2015, Nevada relinquished almost \$20 million in federal funds because it could not provide the funding match.) Employer outreach, training and development remains limited. Performance measurement and data management systems have yet to be developed in any meaningful way. And the overall effort to expand integrated employment remains leaderless – without an organizational or institutional home and without a leader. Given these challenges, it is not surprising that integrated employment service outcomes have fallen over the past decade.



For Further Consideration

- Designate a specific agency to implement and monitor the integrated employment strategic plan and oversee regular evaluation of performance (progress).
- Renew membership with SELN, which would enable it access technical assistance and the latest research in best practices.
- Develop a statewide, cross-sector Employment First Task Force to collaborate, coordinate and improve competitive and integrated employment outcomes for individuals with disabilities. Task Force membership should be broad and include employers, advocacy groups, service providers, agency representatives, state and local education agency representatives, workforce development stakeholders, policy leaders, training and human resource specialists, elected officials, etc.
- Consider moving the Bureau of Vocational Rehabilitation into the Nevada Department of Education or the Department of Health and Human Services or make the bureau a stand-alone agency (as other states have done).



Section 3

Recommendations

Our analysis and the development of recommendations have been organized using the systems-level Employment Framework as designed by State Employment Leadership Network (SELN) to outline a strategy for system improvements. (This framework was also referenced in Nevada's Integrated Plan Research Report, published by the Governor's Task for on Integrated Employment.)²⁴⁹ The principles of the Employment Framework, summarized below, represent evidence-based "practices and outcomes known to be effective at enabling states to develop and sustain high-performing integrated employment systems" that serve individuals with I/DD.²⁵⁰

Figure 20. Employment Framework for Developing High-Performing Integrated Employment Systems²⁵¹



Leadership: Clear commitment to employment in individual community jobs, from top leadership through all levels in the system. Local and state-level administrators are champions for employment.

Strategic goals and operating policies: Employment is identified as the preferred outcome in state developmental disabilities policy and is supported by program goals and operating practices that are clearly designed to achieve that objective.

Financing and policies: The outcome of employment in individual integrated community jobs is supported through the state's resource allocation formulas, reimbursement methods, and rate setting practices.

Training and technical assistance: High-performing employment systems invest in the development and maintenance of a strong, competent workforce, building the skills of job coaches and developers, supervisors, and key personnel.

Interagency collaboration and partnership: Building relationships with key state and local agency partners, such as vocational rehabilitation, education, mental health, and the state Medicaid agency, removes barriers to employment supports as people transition from one funding stream to another.

Services and service definitions: Service definitions and support strategies are structured and aligned to facilitate the delivery of employment supports to all individuals with developmental disabilities, regardless of the intensity of their needs.

Performance measurement and data management: Comprehensive data systems are used to measure progress, benchmark performance, and document outcomes. Information is gathered on key indicators across employment and other related systems and is used to evaluate and track results, inform policy, and improve provider contracts and service agreements. Data are shared with other state agencies to report results and improve quality.

1. Conduct an external evaluation of DHHS ASD and DETR BVR and assess against the SELN framework for developing high performing integrated employment systems.

Regardless of the reasons, the current ecosystem dedicated to improving integrated employment outcomes as a state goal is not functioning and is not adequately serving individuals with intellectual disabilities. As noted previously, facility-based services – both work and non-work – accounted for the lion’s share (81 percent) of all individuals with intellectual and/or developmental disabilities served by DHHS ASD in 2018. Facility-based services – both work and non-work – accounted for 85 percent of all funding provided by DHHS ASD in 2018.

Integrated employment services accounted for a small percentage (almost 17 percent) of all services rendered in 2018. This percentage was lower than the national average of 21 percent. Furthermore, integrated employment services have declined over the period 2008-2018 – from 20 percent in 2008 to 17 percent in 2018. These outcomes are troubling given that a recent report found that 62 percent of individuals with disabilities surveyed said they “do not have paid community job and would like a job in the community.” Only 28 percent of the individuals surveyed had “community employment as a goal in their service plan.”

The transition process from high school to employment or post-secondary educational opportunities is characterized by information and service gaps, minimal cross-agency collaboration, and poor outcomes. Self-advocates and families report that they never connected with transition services offered by BVR prior to graduating. Agency and community provider representatives acknowledge that the Pre-ETS system is not functioning well. Annually, Nevada is unable to draw down the total amount of federal funds available, regularly leaving ‘money on the table’ when resources are scarce.

Given the decade of anemic performance under the current structure, decision makers should conduct an external assessment of DETR BVR and DHHS ASD to evaluate practices and policies against the SELN framework for developing high performing integrated employment systems. Nevada’s decision makers should consider moving BVR to NDE or DHHS. Placing BVR within NDE could strengthen the transition process between high school and post-secondary opportunities, reduce information gaps between state and local agencies, and improve service delivery. Stakeholders have acknowledged that inter-agency collaboration was complicated by the distinction between state and local education agencies and BVR. Moving BVR to NDE could help strengthen the alignment not only across agencies, but across state and local actors.

Short of organizationally relocating BVR, Nevada decision makers should explore legislation (and funding mechanisms) that would require school districts to work with BVR. Advocates, service providers, agency officials, and others (including program evaluators) have reported on the lack of collaboration between Nevada’s large school districts and BVR. In some cases, school districts (and school building principals) have “refused to allow BVR’s Pre-ETS providers onto campuses.” Nevada’s decision-makers should mandate collaboration and require school districts and school building leaders to annually report on outcomes among individuals with intellectual disabilities to the Legislature and the Nevada State Board of Education.

Alternatively, given the role and importance of benefits in the case management of individuals with I/DD, Nevada may want to consider moving BVR to DHHS ADSD. DHHS ADSD and DETR BVR already have an interlocal agreement in place, underscoring the need for sharing information about benefits, eligibility, service provision, etc. Several former senior government leaders shared that Nevada's leaders have previously discussed moving BVR into DHHS.

Short of moving BVR to DHHS ADSD, stakeholders should conduct an external process evaluation of DHHS ADSD as the developmental disability agency of record to determine whether it can be a more proactive partner in improving integrated employment outcomes. The evaluation should determine if and where there is attrition in participation by individuals with I/DD. A review of peer states (e.g., Iowa, New Mexico, Utah, etc.) finds that their disability agencies have made clear and explicit statements about the value they place on employment for individuals with I/DD.²⁵²

Of the top 20 states with high levels of integrated employment service outcomes, seven states have located their equivalent vocational rehabilitation services agency within the department of health and human services. Another five states have made their vocational rehabilitation services agency a standalone agency, which is an option Nevada's decision makers may also want to consider. As shown in Table 9, among Nevada's network of peer states, states with higher integrated employment service outcomes have located their vocational rehabilitation services within their education departments or have established it as a standalone agency.

Admittedly, national experts with whom our research team members spoke cautioned that the placement of Nevada's vocational rehabilitation agency was less important than leadership. "At the end of the day, it doesn't matter where the agency sits as much as leadership. Only strong leadership can drive and lead the systems change needed," said one senior nonprofit leader.

2. Designate a responsible agency to implement and monitor Nevada's Integrated Employment Strategic Plan.

Short of agency restructuring, Nevada's decision makers should identify and task an agency or office to serve as the responsible party to manage the implementation of the state's Integrated Employment Strategic Plan and oversee annual performance and data management tasks.

Following the publication of the Integrated Employment Strategic Plan, the Task Force dissolved and "there was not an action to designate a champion nor authorize a specific entity to take ownership of the Plan."²⁵³ Several stakeholders shared that integrated employment outcomes have not dramatically improved because different agencies were tasked with ownership of various goals and strategies, but no single agency was given responsibility for managing the ongoing implementation across all stakeholders. According to one state agency official, "Implementation of the strategic plan would be enhanced with an Executive designation of a dedicated authority as currently no single entity has the authority to ensure the plan is executed by all stakeholders."²⁵⁴ Each primary agency should identify an organizational champion to lead the work within and across agencies.

Additionally, the lead office or agency should develop a statewide, cross-sector Employment First Task Force to collaborate, coordinate and improve competitive and integrated employment

outcomes for individuals with disabilities. Task Force membership should be broad and include employers, advocacy groups, service providers, agency representatives, state and local education agency representatives, workforce development stakeholders, policy leaders, training and human resource specialists, elected officials, etc.

3. Codify Employment First principles through legislation.

Nevada has previously embraced Employment First principles. Several stakeholders confirm that Nevada is, in fact, an Employment First state. Despite its embrace of Employment First principles, integrated employment outcomes have remained declined over the past decade. As stated by the NCGDD, “An ongoing need to support a cultural shift to employment first and person-centered care still needs to be a focus throughout state and public systems serving people with I/DD.”²⁵⁵ In several states, lawsuits and consent decrees have prompted decision makers to take significant action to address the disparities in outcomes between individuals with disabilities and their non-disabled peers. Nevada’s lawmakers may want to consider enacting legislation that codifies the core Employment First principles. Legislation could outline formal performance reporting requirements, data-sharing agreements, and inter-agency collaboration.

4. Strengthen performance management and data management systems.

Stakeholders should build a system-wide data dashboard to track data, performance, and outcomes. Data and information on key indicators for competitive, integrated employment across education, employment, and related systems should be gathered and reported on annually (and made publicly available). Additionally, stakeholders should develop a five-year, system-wide, integrated employment strategy with specific targets to increase integrated employment (by an established percentage each year). Having robust data management systems in place will allow stakeholders to measure progress and monitor implementation of Nevada’s Integrated Employment Strategic Plan moving forward. As part of this effort, local education agencies should present annually information on outcomes for students with IEPs to the Nevada Board of Education and the Nevada State Legislature.

5. Modernize Nevada’s financing and funding systems to prioritize competitive employment.

In response to the fact that states will have to comply with the Centers for Medicare and Medicaid Services rule (by March 2023) requiring that Medicaid Home and Community Based Services (HCBS)—including employment-related services—are delivered in settings that promote and support community integration for the individuals they serve, states are now exploring ways to modernize day services. As noted by SELN, states must take up these new goals while addressing “legacy service structures, the current direct support workforce crisis, and a lack of resources for provider transformation.”²⁵⁶

SELN recommends that states should use the opportunity presented above to “prioritize integrated employment services and establish specific procedures for moving individuals” to

competitive, integrated employment.²⁵⁷ As laid out by SELN, this could include adoption of a ‘tiered standards’ approach, which “allows states to incorporate new services and decrease dependency on legacy service and settings in existing Medicaid waiver authorities in a more planful way.”²⁵⁸ For example, under a Tiered Standard framework, one configuration might enable Nevada to “establish that certain settings currently in use in a home and community-based services waiver may continue within the waiver, as long as they will be able to meet the minimum standard set in the rule on or before the end of the transition period, but the state may suspend admission to the setting or suspend new provider approval or authorizations for those settings.”²⁵⁹

Nevada should establish and “implement a statewide plan to rebalance funding resources towards integrated employment.”²⁶⁰ In 2015, Nevada’s Integrated Employment Strategic Plan stated: “Nevada doesn’t have sufficient resources to implement competitive, integrated employment, and many are concerned that state and federal funds are not being utilized to their fullest potential.”²⁶¹ To improve integrated employment outcomes, Nevada decision makers must first evaluate and then adjust revenue (funding) streams to ensure that integrated employment is supported through the state’s resource allocation formulas, reimbursement methods, and rate-setting practices.²⁶²

Rates – whether it be reimbursement rates or fee for service rates – should be evaluated regularly to ensure that they incentivize competitive, integrated employment.^m Nevada may want to consider, as other states have done, exploring performance or outcome-based models of paying service providers who help increase integrated employment outcomes. Nevada’s stakeholders should research, explore, and pilot new, innovative, evidence-based models of support (with provider payments) to help individuals obtain and maintain integrated and competitive employment in the community.

Additionally, given pending national legislation – following months of increasing attention and scrutiny – some providers in Nevada may be required to phase out the use of 14(c) certificates that enable employers to pay subminimum wages to individuals with disabilities. The recent version of the proposed Transformation to Competitive Employment Act legislation includes provisions that would provide states, service providers, subminimum wage certificate holders, and other agencies with the resources to help workers with disabilities transition into competitive, integrated employment. Regardless of whether this legislation passes, state decision makers must recognize that achieving significant integrated employment outcomes for individuals with intellectual disabilities may require additional and significant resources, as well as an overhaul and modernization of financing and funding systems. Ultimately, funding will have to shift to support the move to integrated employment.

^m It should be noted that [Assembly Bill 108](#) of the 79th (2017) Legislative Session requires a rate review for every Medicaid provider type every four years. It does not guarantee that the rate will be revised but does ensure that it will be taken under consideration. Nevada’s Medicaid waiver for Individuals with Intellectual Disabilities and Related Conditions (ID) is undergoing its Quadrennial Rate Review in 2021.

6. Improve education and outreach around services and benefits.

Stakeholders must strengthen education and outreach efforts to inform individuals with intellectual disabilities and their families about services available to them and to provide benefits counseling that address the impact of employment on benefits. Moreover, this information should be shared earlier (e.g., as part of transition planning that should start at age 14).

Stakeholders urged greater outreach and awareness around ABLE accounts, “which are tax-advantaged savings accounts for individuals with disabilities and their families.”²⁶³ ABLE accounts allow individuals to have tax-free savings accounts to cover qualified disability expenses, such as education, housing, transportation, employment training/support, and more.²⁶⁴ General knowledge of ABLE accounts was low. Recent data from the Nevada State Treasurer’s Office suggest that focused outreach and marketing efforts can help increase awareness about these options. For example, in Nevada, the number of ABLE accounts grew from over 200 accounts in 2019 to more than 1,000 accounts over the course of one year following efforts to increase awareness by the Nevada State Treasurer’s Office.²⁶⁵

7. Leverage the learnings of the pandemic to reimagine a more inclusive workforce.

The coronavirus pandemic turned the state’s understanding of and ideas about employment and inclusive work environments on its head. The public health crisis provided an opportunity to reimagine our workplace. Remote working and flexible workdays (schedules) may be permanent organizational practices. Arguably, shift to remote work may expand the number of opportunities available to individuals with disabilities. For example, transportation is repeatedly identified as one of the greatest barriers that prevent or hinder an individual’s ability to seek employment. With the increased acceptance of remote learning options, individuals may encounter more opportunities to secure integrated employment. Nevada’s workforce ecosystem stakeholders may need to reimagine how they provide supports (e.g., job coaching, transportation passes vs. access to technology, internet subscriptions, etc.) to individuals with intellectual disabilities in this new world of work. With renewed interest and purpose, there is no time like the present to reimagine the world of work for individuals with intellectual disabilities here in Nevada.



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Appendix

Appendix. Pre-Employment Training Services (Pre-ETS) Regulations, Excerpts from 34 Code of Federal Regulations (CFR) § 361.48

§ 361.48 Scope of vocational rehabilitation services for individuals with disabilities.

(a) Pre-employment transition services. Each State must ensure that the designated State unit, in collaboration with the local educational agencies involved, provide, or arrange for the provision of, pre-employment transition services for all students with disabilities, as defined in § 361.5(c)(51), in need of such services, without regard to the type of disability, from Federal funds reserved in accordance with § 361.65, and any funds made available from State, local, or private funding sources. Funds reserved and made available may be used for the required, authorized, and pre-employment transition coordination activities under paragraphs (2), (3) and (4) of this section.

(1) Availability of services. Pre-employment transition services must be made available Statewide to all students with disabilities, regardless of whether the student has applied or been determined eligible for vocational rehabilitation services.

(2) Required activities. The designated State unit must provide the following pre-employment transition services:

- (i) Job exploration counseling;
- (ii) Work-based learning experiences, which may include in-school or after school opportunities, or experience outside the traditional school setting (including internships), that is provided in an integrated environment in the community to the maximum extent possible;
- (iii) Counseling on opportunities for enrollment in comprehensive transition or postsecondary educational programs at institutions of higher education;
- (iv) Workplace readiness training to develop social skills and independent living; and
- (v) Instruction in self-advocacy (including instruction in person-centered planning), which may include peer mentoring (including peer mentoring from individuals with disabilities working in competitive integrated employment).

(3) Authorized activities. Funds available and remaining after the provision of the required activities described in paragraph (a)(2) of this section may be used to improve the transition of students with disabilities from school to postsecondary education or an employment outcome by -

- (i) Implementing effective strategies to increase the likelihood of independent living and inclusion in communities and competitive integrated workplaces;
- (ii) Developing and improving strategies for individuals with intellectual disabilities and individuals with significant disabilities to live independently; participate in postsecondary education experiences; and obtain, advance in and retain competitive integrated employment;
- (iii) Providing instruction to vocational rehabilitation counselors, school transition personnel, and other persons supporting students with disabilities;
- (iv) Disseminating information about innovative, effective, and efficient approaches to achieve the goals of this section;
- (v) Coordinating activities with transition services provided by local educational agencies under the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.);

- (vi) Applying evidence-based findings to improve policy, procedure, practice, and the preparation of personnel, in order to better achieve the goals of this section;
- (vii) Developing model transition demonstration projects;
- (viii) Establishing or supporting multistate or regional partnerships involving States, local educational agencies, designated State units, developmental disability agencies, private businesses, or other participants to achieve the goals of this section; and
- (ix) Disseminating information and strategies to improve the transition to postsecondary activities of individuals who are members of traditionally unserved and underserved populations.

(4) Pre-employment transition coordination. Each local office of a designated State unit must carry out responsibilities consisting of -

- (i) Attending individualized education program meetings for students with disabilities, when invited;
- (ii) Working with the local workforce development boards, one-stop centers, and employers to develop work opportunities for students with disabilities, including internships, summer employment and other employment opportunities available throughout the school year, and apprenticeships;
- (iii) Working with schools, including those carrying out activities under section 614(d) of the IDEA, to coordinate and ensure the provision of pre-employment transition services under this section;
- (iv) When invited, attending person-centered planning meetings for individuals receiving services under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.); and

(b) Services for individuals who have applied for or been determined eligible for vocational rehabilitation services. As appropriate to the vocational rehabilitation needs of each individual and consistent with each individual's individualized plan for employment, the designated State unit must ensure that the following vocational rehabilitation services are available to assist the individual with a disability in preparing for, securing, retaining, advancing in or regaining an employment outcome that is consistent with the individual's unique strengths, resources, priorities, concerns, abilities, capabilities, and informed choice:

- (1) Assessment for determining eligibility and priority for services by qualified personnel, including, if appropriate, an assessment by personnel skilled in rehabilitation technology, in accordance with § 361.42.
- (2) Assessment for determining vocational rehabilitation needs by qualified personnel, including, if appropriate, an assessment by personnel skilled in rehabilitation technology, in accordance with § 361.45.
- (3) Vocational rehabilitation counseling and guidance, including information and support services to assist an individual in exercising informed choice in accordance with § 361.52.
- (4) Referral and other services necessary to assist applicants and eligible individuals to secure needed services from other agencies, including other components of the statewide workforce development system, in accordance with §§ 361.23, 361.24, and 361.37, and to advise those individuals about client assistance programs established under 34 CFR part 370.
- (5) In accordance with the definition in § 361.5(c)(39), physical and mental restoration services, to the extent that financial support is not readily available from a source other than the designated State unit (such as through health insurance or a comparable service or benefit)

(6) Vocational and other training services, including personal and vocational adjustment training, advanced training in, but not limited to, a field of STEM, medicine, law, or business); books, tools, and other training materials, except that no training or training services in an institution of higher education (universities, colleges, community colleges, vocational schools, or hospital schools of nursing or any other postsecondary education institution) may be paid for with funds under this part unless maximum efforts have been made by the State unit and the individual to secure grant assistance in whole or in part from other sources to pay for that training.

(7) Maintenance, in accordance with the definition of that term in § 361.5(c)(34).

(8) Transportation in connection with the provision of any vocational rehabilitation service and in accordance with the definition of that term in § 361.5(c)(57).

(9) Vocational rehabilitation services to family members, as defined in § 361.5(c)(23), of an applicant or eligible individual if necessary to enable the applicant or eligible individual to achieve an employment outcome.

(10) Interpreter services, including sign language and oral interpreter services, for individuals who are deaf or hard of hearing and tactile interpreting services for individuals who are deaf-blind provided by qualified personnel.

(11) Reader services, rehabilitation teaching services, and orientation and mobility services for individuals who are blind.

(12) Job-related services, including job search and placement assistance, job retention services, follow-up services, and follow-along services.

(13) Supported employment services in accordance with the definition of that term in § 361.5(c)(54).

(14) Personal assistance services in accordance with the definition of that term in § 361.5(c)(39).

(15) Post-employment services in accordance with the definition of that term in § 361.5(c)(42).

(16) Occupational licenses, tools, equipment, initial stocks, and supplies.

(17) Rehabilitation technology in accordance with the definition of that term in § 361.5(c)(45), including vehicular modification, telecommunications, sensory, and other technological aids.

(18) Transition services for students and youth with disabilities, that facilitate the transition from school to postsecondary life, such as achievement of an employment outcome in competitive integrated employment, or pre-employment transition services for students.

(19) Technical assistance and other consultation services to conduct market analyses, develop business plans, and otherwise provide resources, to the extent those resources are authorized to be provided through the statewide workforce development system, to eligible individuals who are pursuing self-employment or telecommuting or establishing a small business operation as an employment outcome.

(20) Customized employment in accordance with the definition of that term in § 361.5(c)(11).

(21) Other goods and services determined necessary for the individual with a disability to achieve an employment outcome.

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- ²⁶² U.S. Government Accountability Office. March 2021. Subminimum Wage Program: Factors Influencing the Transition of Individuals with Disabilities to Competitive Integrated Employment. The report discusses the ways in which current Medicaid payment rates may or may not incentivize integrated employment: “Six interviewees said that Medicaid HCBS payment rates may not encourage [competitive integrated employment] CIE in certain situations. For example, officials from one state explained that 14(c) certificate holders may receive a lower reimbursement rate for supporting individuals in CIE employment compared with rates for other employment or HCBS services. This, in turn, may make offering CIE services a lower priority when the certificate holder is making choices about which disability services to offer. Officials from another state said that their state’s current HCBS program allows Medicaid payments for one service per day. As a result, an individual working part time may receive job coaching for CIE employment or additional day services, but not both, because the state will not pay for both in the same day. Officials said that their state plans to move to an hourly structure, which they say will provide flexibility for individuals to receive services in the frequency and duration needed to be successful. One expert illustrated how financial concerns—in conjunction with relatively low Medicaid payments for CIE versus other disability services—can create disincentives for 14(c) certificate holders to offer CIE services.”
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