

State TANF Policy and Services to People with Disabilities

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Background

On August 22, 1996, the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, known as the federal welfare reform bill or PRWORA, was signed by President Clinton. This legislation created the Temporary Assistance for Needy Families (TANF) program to replace the Aid to Families with Dependent Children (AFDC) and JOBS programs.¹ Unlike the previous open-ended federal financial participation system, TANF is funded through a block grant.

The new TANF program advocates a “work first” philosophy to public assistance, placing a time limit on benefits and requiring that TANF recipients engage in work or work-related activities to participate in the program. Under federal law, TANF-funded assistance to families is limited to sixty months unless the family is exempt under the hardship exception that applies to up to twenty percent of the caseload. States can choose to place more restrictive time limits on TANF recipients, and they can choose to use state funds to help families after five years. Under the JOBS program, people with disabilities (those “ill or incapacitated”) were categorically exempt from working. Under TANF, many states are taking a narrower view of who should be exempt from work requirements.

Federal law prevents states from using federal dollars to help families who have received federal TANF assistance for more than sixty months in their lifetime. The intent is to move as many people off the welfare rolls and into gainful employment as possible. However, many TANF recipients, including people with disabilities, face barriers to employment that make the transition from welfare to work difficult.

According to the Department of Labor (DOL), people who are disabled are more likely to live below the poverty line than those who are not disabled. In 1995, thirty percent of working age people with disabilities had incomes below the poverty line, three times higher than people without disabilities.² In addition, people with disabilities that do work earn less than their non-disabled peers, and are more likely to have jobs that pay below minimum wage and lack opportunities for training and advancement.³ In an economy that increasingly requires technical skills and life-long learning, many people with disabilities are entering the workforce at a disadvantage. Particularly for TANF recipients with disabilities, the challenge of finding and keeping a good job can be considerable.

Purpose of This Study

The intent of this study is to identify state policies and procedures that are designed to ensure that people with disabilities and/or parents with children with disabilities are provided the opportunity to participate in state TANF programs. The intent is not to present “best practices,” with quantifiable and measurable outcomes. Many state TANF programs are still in their early stages, with new programs being developed and outcomes still uncertain. The intent is to present an in-depth “snapshot” of what is occurring right now at the state level in terms of services and programs designed to assist TANF recipients with disabilities. Are states developing programs and policies specifically targeted toward people with disabilities? Are people with disabilities being served on an individual basis as part of the overall TANF population? Are states

developing innovative strategies that particularly benefit TANF recipients with disabilities and, if so, what are they? By identifying these strategies, this report may assist other states in their policy development process in support of people with disabilities and parents with children of disabilities.

Methodology

Five states were selected for study: Illinois, Maine, Minnesota, Vermont, and Washington. Three selection criteria were applied to each state. The first selection criterion is the level of work participation each state requires of TANF recipients. A study conducted by the Urban Institute, titled *State Welfare to Work Policies for People with Disabilities*, examined how states have addressed the work participation and time limit requirements mandated by the welfare reform law, and the degree of state flexibility to exempt recipients of TANF, including people with disabilities. The Urban Institute surveyed all fifty states and, based on the policy responses, grouped states into three categories: states whose work participation requirements are the same as under the former JOBS program (18); states that have adopted different, broader participation requirements (17); and states that have adopted different “universal” participation requirements (13).⁴ Based on these categorizations, we selected three states (IL, ME, WA) that require “universal” participation. To determine if this level of participation influences the way in which states address the needs of recipients with disabilities, we selected two states (MN, VT) whose work participation requirements are the same as under the former JOBS program. The intent is to compare and contrast the policies and programs of the two groups of states.

The second selection criterion is the level of innovation displayed by each state in devising policies and programs that address the needs of recipients with disabilities. We wanted to ensure that each case study state had at least some disability-specific policies to review, and then balance those policies with states that have developed innovative practices regarding people with disabilities. The intent is to highlight what is being done—and not being done—to serve TANF recipients with disabilities.

The third selection criterion is the demographic characteristics of each state, including size, population, and geographic location. The intent was to achieve a reasonably diverse mix of states that met our first two selection criteria.

In addition to the selection criteria, states were selected based on consultation with a group of disability policy experts. These experts were drawn from the Urban Institute, which has conducted considerable research on TANF and disability policy, and the American Public Human Services Association (APHSA), a recognized expert in the field of disability policy.

Three to five individuals from each state were interviewed. Those interviewed include a senior level TANF program official (the program director or other high level staff), a senior level Vocational Rehabilitation (VR) program official, a member of an advocacy group that works on behalf of people with disabilities, and additional state employment and job training personnel, as needed. It was determined that these individuals would be the most knowledgeable regarding key state TANF and VR policies and programs that serve people with disabilities. Additional state personnel were interviewed when senior level TANF and VR officials were unable to

provide the requested information. Advocacy organizations were included to determine how those individuals working outside state government view the efforts of the state to serve TANF recipients with disabilities.

Interview questions covered six main topics, including:

Definitions. The first set of questions address how each state’s TANF and VR program defines “disability” and how that definition is used to determine eligibility, work participation and/or extension of benefits.

Identification. The second set of questions asked about the number of TANF recipients who are people with disabilities, and how each state assesses TANF recipients for disability.

Americans with Disabilities Act Procedures. The third set of questions address how each state has crafted state policy and programs to meet accessibility requirements mandated under ADA, including accessibility to state facilities and the ability to resolve complaints involving allegations of discrimination under ADA.

State Policies. The fourth set of questions attempt to determine how each state’s TANF policies and guidelines specifically address the needs of people with disabilities. In particular, these questions examine the relationship between each state’s TANF and Vocational Rehabilitation program.

Special Strategies and Services. The fifth set of questions address how each state does, or does not, modify work and other TANF program requirements for individuals with disabilities, and what services each state provides to individuals with disabilities to assist them in finding and keeping a job.

Employment Outcomes. The sixth set of questions address how each state assesses the employment outcomes of TANF recipients with disabilities.

At the conclusion of each interview, interviewees were asked to identify state or federal policies they believe serve as current or potential barriers to assisting TANF recipients with disabilities. In addition, interviewees were given the opportunity to provide any additional information regarding their state’s programs that may not have been discussed (See Appendix B for a complete list of interview questions).

I. Introduction

After examining the policies and practices of each state, certain trends emerged. For the most part, these states have been slow to distinguish people with disabilities from the general TANF population. In general, states have few policies that specifically target people with disabilities. At the same time, each state reports that it meets its responsibility to people with disabilities by approaching clients on a customized, one-to-one basis. In some instances, this individualized case management may meet the needs of people with disabilities, but these claims must be

evaluated carefully. The number of clients each caseworker is assigned and how well caseworkers are trained to assess and serve people with disabilities will affect their ability to meet the needs of each client.

States not only have trouble distinguishing between people with disabilities from the general TANF population, they also lack a clear idea how many TANF recipients are, in fact, disabled. Some states estimate that less than ten percent are people with disabilities, while other states claim as many as eighty percent may have some sort of disability. The difficulty in identifying and assessing some disabilities, particularly learning disabilities and mental health problems, has prevented states from accurately estimating the number of TANF recipients who are disabled. However, all states are aware that as the most job-ready clients leave TANF, the percentage of harder to serve clients, including people with disabilities, is likely to increase.

Although each of the case study states is working to assess and serve clients with disabilities, inadequate caseworker training and a lack of coordination between TANF agencies and other service providers is keeping many people with disabilities from receiving the support they need to find and maintain employment. Among the case study states, Minnesota appears to be doing the most to develop programs and strategies that specifically target people with disabilities.

Of even greater concern is the fact that some states have not really addressed the issue of time limits and how they will serve people who continue to require support after their benefits run out. No state provides a categorical exemption from TANF program work requirements to people with disabilities, but some states seem to be taking a more aggressive “work first” approach to clients with multiple barriers to employment. For states such as Illinois, a question remains of whether the state will extend the safety net to TANF recipients who reach the limits of their benefits.

The changes in welfare as a result of PRWORA and TANF may be a contributing factor in many states’ lack of disability-specific strategies. Welfare reform has forced states to change the way they serve welfare recipients, including people with disabilities. For many states, the initial focus has been on complying with federal law and reducing caseloads, perhaps to the neglect of other issues. The lack of policies and practices targeting recipients with disabilities may be indicative of this. Because the TANF program is so new, it may be that states have not had time to determine which approaches are effective and how well they serve TANF recipients with disabilities. However, now that most states are adjusting to the new system, it is time for states to step back and reassess their programs and focus on how well they are serving all TANF recipients.

Overall, each state asserts that it is doing a fairly good job of serving clients with disabilities. However, this view, in general, is not shared by the advocates of people with disabilities. In each state, advocates expressed concern that states were not doing enough to meet the needs of TANF recipients with disabilities. These advocates expressed concern that when federal time limits on benefits run out, many TANF recipients could suffer. Now that states have succeeded in the initial effort to reduce caseloads and move the most job ready individuals off welfare, they must focus their efforts on doing the same for harder to serve clients, including people with disabilities.

II. Cross Case Analysis

In its report *State Welfare-to-Work Policies for People with Disabilities: Changes Since Welfare Reform*, the Urban Institute identifies two key challenges that welfare reform presents to states:

1. States must consider the diverse needs of individuals with disabilities while meeting the work participation and other requirements established in federal law;
2. The imposition of state and federal time limits increases the immediacy of welfare recipients' need for help in overcoming their barriers to work and self-sufficiency.

By examining these five case studies, we can begin to determine how states are meeting these challenges (see Appendix C for more information on each state). The case study analysis is broken down into several topics: definitions, work participation/time limits, identification, ADA procedures, state policies, special strategies, and employment outcomes. State policies and programs will be compared and contrasted within the context of each section. States that require “universal” participation will be compared to states that do not, to determine if the level of participation required influences how states serve recipients with disabilities.

A. Definitions

Experts estimate that between ten and thirty percent of TANF recipients have work-related disabilities, mental health issues, and substance abuse problems; another twenty five to forty percent of welfare recipients suffer from learning disabilities.⁵ Across the country, TANF caseloads are dropping as states implement new TANF programs and a strong economy forces unemployment to record lows. As the most job-ready TANF recipients leave welfare, the percentage of harder-to-serve clients, including people with disabilities, will increase.⁶

State TANF programs have developed different definitions of the term “disability.” In the case of Maine and Vermont, “incapacity” is based primarily on a parent’s ability to care for a child. Minnesota and Washington define disability more in terms of an illness or injury that limits the individual’s ability to engage in work and/or life activities. Illinois takes another tact, and does not define “disability.” Instead, disability is looked upon as just one of many possible barriers to employment that have to be addressed. In Illinois, only those individuals determined to be disabled under the more rigorous SSI/SSDI definition—generally the very severely disabled—are defined as “disabled” by the state and exempt from work requirements (individuals who choose to collect SSI/SSDI are ineligible for TANF). The remainder of people with disabilities in Illinois must participate in TANF requirements.

Failure to define disability does not necessarily indicate that the disabled TANF population is not being served; nor can one definition be said to be more accurate or inclusive than another definition. However, how a state defines disability (i.e., the emphasis on being able to care for a child in the Vermont and Maine definitions) may provide clues as to each state’s goals and priorities in managing TANF programs (i.e., protecting families and children, emphasizing work

first, etc.). There does not appear to be a relationship between how a state defines disability with the level of participation the state requires of disabled TANF recipients.

B. Work Participation/Time Limits

One of the most contentious issues surrounding TANF is the imposition of time limits on benefits. TANF recipients have five years or less to find employment before their benefits are ended. States such as Vermont do not place a time limit on benefits for clients who cannot secure employment. Illinois, Maine, and Washington require all TANF recipients to participate in work requirements and subject benefits to time limits. Maine has committed to using state funds to support TANF recipients beyond the sixty month time limit. Minnesota exempts the severely disabled from work requirements, but still subjects them to time limits.

None of the case study states categorically modifies work requirements for people with disabilities. Each state allows counselor discretion in what constitutes work requirements for people with disabilities, including education, training, and treatment. In Minnesota, so long as each TANF recipient meets the minimum number of work hours required, the consumer (as Minnesota calls TANF recipients) is considered to be “engaging in work.” Time spent participating in assessment, therapy, medical appointments, structured job search and training usually count towards work hours. Illinois, Washington, Maine, and Vermont follow a similar policy. Washington expects each TANF client to either preparing for work, looking for work, or working, but interprets “preparing to work” broadly.

For TANF recipients in Minnesota, the required participation in work activities can be modified, and the time limits extended, if the person is “suffering from a certified illness, injury, or incapacity which is expected to continue for more than 30 days and which prevents the person from obtaining or retaining employment.” In addition, people with severe disabilities are currently exempt from mandatory participation in TANF work requirements (if eligible, a severely disabled person can elect to pursue SSI benefits instead of seeking employment, thus removing her or him from TANF).⁷ However, this policy can create situations where an individual with a disability does not participate in employment and training programs, but is still subject to time limits. Minnesota’s Department of Human Services has established a workgroup to make recommendations to the Legislature and Governor to change this policy.⁸

Information on exemptions and time limits for all case study states can be seen in the following table:

Table 1.1: Participation Requirements for People with Disabilities⁹

| State | Participation/Exemptions | Time Limits for People with Disabilities |
|-------------------|--|--|
| Illinois | <ol style="list-style-type: none"> 1. Universal Participation. Must be SSI eligible to be exempt. 2. Participation is broadly defined and individualized. 3. Caregivers are not exempt from participating, although caring for an incapacitated child may qualify as participation. | <ol style="list-style-type: none"> 1. 60 months. 2. Subject to time limits. |
| Maine | <ol style="list-style-type: none"> 1. Universal participation. 2. Participation is broadly defined and individualized. | <ol style="list-style-type: none"> 1. 60 months. 2. Will use state money to support recipients who need it beyond 60 months, provided they are making a good faith effort to participate in program requirements. 3. Same applies to caregivers. |
| Minnesota | <ol style="list-style-type: none"> 1. Same participation requirements as under JOBS.¹⁰ | <ol style="list-style-type: none"> 1. 60 months. 2. Subject to time limits. 3. Caregivers also subject to time limits. 4. Considering extending time limits for people with disabilities, if person is making progress on employment plan. |
| Vermont | <ol style="list-style-type: none"> 1. Same participation required under JOBS/demonstration program. 2. Exemptions for people with disabilities. | <ol style="list-style-type: none"> 1. 60 months. 2. Exempt from time limits. |
| Washington | <ol style="list-style-type: none"> 1. Universal Participation 2. Participation is broadly defined and individualized 3. Caregivers not exempt, but participation is broadly defined and individualized. | <ol style="list-style-type: none"> 1. 60 months. 2. Subject to time limits. 3. Caregivers also subject to time limits. |

Time limits, and what will happen to TANF recipients who reach their limit but still require assistance, is the hot button issue of TANF and welfare reform. At the end of five years, the federal safety net for recipients of TANF is removed. It remains to be seen which states will continue to provide a safety net for people who still require services. Among the case study states, only Maine has made a firm commitment to use state funds to support people beyond time

limits, if they are making a good faith effort to participate. Minnesota is considering adopting a similar policy, as well. Illinois and Washington are still debating the issue of time limits, and Vermont is as yet uncertain how time limits will be affected by the end of their demonstration project.¹¹

C. Identification

Clearly, states expect TANF recipients with disabilities to participate in work requirements and to eventually leave TANF. However, many people with disabilities will require specialized assistance to participate successfully. To best serve the needs of these clients, it is important that TANF caseworkers have the ability to determine who is disabled and what services will best meet their needs.

Most of the case study states have established policies to determine whether a TANF recipient has a disability. These policies range from formal medical reviews (Maine, Vermont) to more informal, counselor-based assessment (Illinois). Minnesota's TANF program is currently developing a formal assessment policy. Assessment is either done by state employment counselors (IL, WA, MN), or, as in the case of Maine and Vermont, licensed medical personnel. In general, employment counselors do not have specialized training to assess disability. Some states, such as Washington, have developed screening tools for case workers to aid them in their assessment of clients.

Assessments are used to assist counselors and clients in developing an individual work plan, modifying work requirements, and screening for referral to Vocational Rehabilitation. Assessments in each state are voluntary, inasmuch as a person can choose to not be assessed. However, a TANF recipient who wants to have a disability taken into account must be assessed for that disability. Again, all five case study states emphasize the individual service of their TANF program; that is, counselors work on a case-by-case basis to assist clients in fulfilling the requirements of the program and finding employment, regardless of disability.

Estimates regarding the percentage of TANF recipients who are disabled vary from state to state. Illinois does not track this type of information (particularly in light of the fact that they do not employ a formal definition of disability). Vermont has fairly precise figures, estimating that out of a total caseload of 6,594 families, nine percent are families in which at least one parent is considered incapacitated. Similarly, Maine estimates that seven percent of its TANF recipients have a disability.

On the other end of the spectrum, Washington estimates that as much as to 60% to 70% of the TANF population may have a disability, and Minnesota estimates that up to 80% of their remaining TANF caseload are individuals with some type of physical, mental, or learning disability. These percentages are influenced by how broadly each state defines (or does not define) disability, and reflects the difficulty states have in identifying certain disabilities. It is likely that a much larger percentage of those on TANF have a disability than is recognized by some state TANF programs, either because recipients do not know or do not disclose their disability, or because a range of disabilities fall beneath the assessment radar. Many state TANF programs have yet to develop the sophistication to assess and recognize many emotional or

mental health disorders, such as depression, learning disabilities, and the like. As caseloads continue to drop, the percentage of recipients with these disabilities will increase.

D. ADA Procedures

Signed into law on July 26, 1990, the Americans with Disabilities Act (ADA) is a wide-ranging legislation intended to make society more accessible to people with disabilities. This includes improving access to employment opportunities, public services, public buildings and facilities, and telecommunications.

ADA requires that public entities undertake a self-evaluation to ascertain whether policies, practices, and procedures used by the state (in this case, the state TANF agency) conform to ADA requirements. The TANF agency in each case study state completed such a self-evaluation. Each state is currently or has completed its changes to facilities where TANF programs are located to meet ADA accessibility requirements. Some states are further ahead in this effort than others. Minnesota passed the Minnesota Human Rights Act ten years prior to ADA, so most structural changes had already been made. In addition, most of Minnesota's VR offices recently moved into state WorkForce Centers and remodeled the new space before moving in. The Minnesota Department of Economic Security reviews all blue prints and designs before signing the lease to ensure that the building and all WorkForce Center services are in compliance with ADA. The Department is also developing remote interpreter services (ASL interpretation via video conferencing) so that deaf consumers living in remote rural areas can access all WorkForce Center services.

With the exception of Vermont, each state has assigned a staff member to coordinate its efforts to implement TANF in accordance with ADA. ADA coordinators oversee requests for reasonable and special accommodations, grievances, and issues of accessibility. Illinois, Washington, Minnesota, and Maine have ADA coordinators in their TANF agency. In addition, each state, including Vermont, has assigned an ADA coordinator to the VR agency.

Each state informs applicants, recipients, and other interested persons regarding the protections offered to them under ADA. This generally consists of posting notices in TANF and other state agency offices, and providing contact information for the state ADA coordinator, either posted on a notice or brochure/information packet or printed on application materials. Illinois, Washington, and Minnesota have developed official procedures for resolving complaints involving allegations of discrimination under ADA. Vermont and Maine do not have an official policy, but resolve complaints on a case by case basis. Official procedure or no, states report few, if any, complaints brought under ADA. States such as Minnesota and Vermont attribute this to good case management, whereby clients can resolve complaints simply by talking to and working with their case manager. Requests for reasonable accommodation can then be considered and factored into the client's employment plan, if necessary. The lack of complaints could also be partly attributed to the complaint procedure being so new that most clients are not aware of it, or do not understand that they have a right to redress under ADA. More in-depth study of ADA compliance at the state level is required to determine how client complaints are actually being resolved.

E. State Policies

It is evident that states are working to make TANF services more accessible to people with disabilities and to identify and assess TANF clients for disability. States are aware that as the more job-ready TANF clients leave their programs, the number of harder-to-serve clients, including people with disabilities, will increase. States are lagging in developing policies and programs that specifically target TANF recipients with disabilities and provide specialized services and supports.

Each of the case study states has policies—formal or informal—to assess and serve TANF recipients, including TANF recipients with disabilities. Of these states, Minnesota appears to be doing the most to develop programs that specifically target people with disabilities. For instance, Minnesota is using DOL Formula Grant 15% Set-Aside funds, TANF Reserve funds and state funds to fund Special Projects for people with disabilities on TANF. The Vocational Rehabilitation (VR) program administers these funds through two programs: a VR direct service unit in Hennepin County; and a contract with Minnesota Association of Community Rehabilitation Organizations (MACRO) to provide welfare-to-work (WtW) services statewide through a network of twenty-eight accredited community rehabilitation programs.¹² TANF and WtW funds are utilized first, since they have the larger pot of money. Vocational Rehabilitation dollars are used when WtW regulations prohibit a specific service (i.e., WtW funds cannot be used for training beyond initial skill development, with a two year limit on training. Funding is shifted to VR at that point if the person needs more education to move up the career ladder). These services rely on one-to-one counseling, and focus is on developing career ladder employment plans that help the consumer get a job and move out of poverty.¹³

Minnesota has also modified some of its practices to accommodate the needs of TANF/VR recipients with disabilities. VR/TANF caseloads are kept at forty, instead of the traditional 120 for a VR counselor. The VR counselors hired for the Special Project have strong placement backgrounds, and they do more direct placement than other VR counselors. Intake is usually done on the day of the application, instead of the typical week to two week delay. Counselors have up to three contacts with each consumer per week. This is much more support and counseling than typically provided by the program. Mentors (job coaches) are available through the WorkForce Center if additional support is needed.

In addition to these programs already in place, Minnesota is initiating new policies that would benefit people with disabilities. For instance, the VR program is assisting in the development of screening tools to be used by the Minnesota Family Independence Program (MFIP) employment counselors to pre-screen for disability and possible referral to VR. The screening tool will look for evidence of learning disabilities, mental illness, and chemical dependency. The state has formed a workgroup to determine who, if anyone, should be extended beyond the sixty month limit for TANF benefits. Explained Allan Lunz, Welfare to Work State Coordinator, “Most people on the workgroup feel people with disabilities should be granted an extension if the person is making adequate progress toward achievement of the Employment Plan.”¹⁴

Maine has also made targeted efforts to serve people with disabilities. The state has hired three specialized service contractors to serve hard-to-serve TANF recipients, including people with

disabilities. Counselors are trained to identify and refer people with disabilities and other recipients who need special services. Goodwill, Maine Medical Center, and BDL Rehabilitation, Inc. will provide training and job search assistance, helping TANF recipients with disabilities to find and keep jobs (this is somewhat different than Illinois, Washington, and Minnesota, which require each client to prepare an individual participation plan). The contractors have helped train TANF staff to do basic screening, and provide clients with more one-on-one attention. This coordination of services is intended to provide more focused and accessible assistance to harder to serve TANF clients.

Minnesota, Vermont and Washington each have a formal agreement with state Vocational Rehabilitation services to refer clients with disabilities to VR, if needed. Washington's agreement with VR also stipulates that for any TANF client who is also a VR client, TANF will accept that client's VR activities as participation in WorkFirst. In terms of what are acceptable work activities, TANF will defer to VR in these cases. To better serve TANF recipients with learning disabilities, Washington also has a statewide contract with the Learning Disability Association of Washington. TANF caseworkers can refer clients with learning disabilities to this non-profit, who will then work with the client to resolve issues of accommodation and build job-related skills. Washington is also instituting a new program that targets caregivers of children with special needs. The Washington Department of Social and Health Services has contracted with a public health agency to send nurses into the homes of clients who are caring for children with disabilities, in order to evaluate how the child's needs impact the parent's ability to participate in WorkFirst. Case managers will then work with the client to see how the parent can still participate in work activities.

Each case study state emphasized the individual attention case managers provide TANF recipients in their state, negating the need to consider people with disabilities as a group. However, a lack of targeted programs does suggest that some states are not focusing on the needs of people with disabilities. Of the five states studied, Minnesota appears to be taking the most innovative and targeted steps to ensure that the needs of disabled TANF recipients are met; Illinois appears to be doing the least. Vermont, Maine, and Washington have begun to take steps to address the particular needs of disabled TANF clients, but each admits that more needs to be done. "It's a matter of finding the best way to serve them," said Sue Dustin of Maine.¹⁵ "We are trying to be as creative as possible in addressing people who are disabled," explained Allan Shanefelt of Washington.¹⁶

Although Minnesota is doing the most to target people with disabilities, the state worries that the pace of change in the welfare/TANF system is moving to fast. "We are implementing at the same time we are planning, allowing no margin for error," explained Allan Lunz, the state WtW Coordinator. "The training of staff and systems change is using up valuable time that is needed by consumers to meet the sixty month limit on benefits." This sense of urgency may explain the programs and policies Minnesota is implementing that target people with disabilities, an urgency that seems lacking in other states. Lunz expressed concern that people on TANF do not realize how short a time frame sixty month is, and may experience problems as they near the end of their limits. Other states expressed the opinion that their individual system of case management will be enough to meet the needs of all TANF clients. This claim requires some examination. How many clients is each caseworker responsible for? How often does the caseworker meet

with clients? If each caseworker is responsible for 140 clients, many of whom are people with disabilities or have other special needs, it is unlikely all clients will receive the services they need, regardless of how “individualized” case management is.

F. Special Strategies and Services

Even states without targeted policies and programs recognize that people with disabilities may not be able to engage in the same types of work activities as other TANF clients. In general, state TANF counselors have significant latitude in deciding what activities fulfill work requirements, and what types of accommodation can be made.

Minnesota discusses the availability of reasonable accommodations at orientation and again at the time the consumer is assessed. The counselor can count disability-related accommodations—i.e., tutoring, allowing extra time for special transportation— toward the minimum number of hours of work required. In Washington, clients can fill out a Needs Supplementary Accommodation Form at the time of the initial interview, to clarify any special accommodations they will require. Illinois, Vermont, and Maine do not have a specific policy on reasonable accommodation, but indicate that counselors can make accommodations on a case-by-case basis.

Some states also provide community work experience programs (a “workfare” program that requires TANF recipients to participate in unpaid community service jobs) and supported work, where the client is provided on-going support to assure the person will keep their job.

In Minnesota, all community work positions are paid at least minimum wage, although the state is considering unpaid positions if the economy takes a downward trend. The state is also considering using this approach for people who exceed the TANF time limitations. Vermont coordinates service provision with the Department of Employment and Training (DET).

Several states have programs tailored for different disabilities. Maine offers interpretive services for the deaf and hearing impaired. Minnesota has a specialized service unit for the hearing impaired and the mentally impaired. Visually impaired or blind clients are referred to the State Service for the Blind, and the state has specialized counselors for mental health, deaf/hearing impaired, traumatic brain injury, and HIV/AIDS. Washington has special services available for alcohol and substance abuse and mental health problems.

The following table outlines each state’s policies and strategies for serving TANF clients with disabilities:

Table 1.2: State Policies and Strategies for Serving TANF Clients with Disabilities

| State | Participation | State TANF Policies that Specifically Target People with Disabilities | Additional Strategies that Support People with Disabilities |
|-------|---------------|---|---|
| IL | Universal | None | <ul style="list-style-type: none"> • Counselor discretion regarding activities that fulfill work requirements. • Counselor discretion regarding reasonable accommodations. |
| ME | Universal | <ul style="list-style-type: none"> • Specialized service contractors to serve TANF recipients with disabilities | <ul style="list-style-type: none"> • Counselor discretion regarding activities that fulfill work requirements. • Counselor discretion regarding reasonable accommodations. • Offers interpretive services for the deaf and hearing impaired. |
| MN | JOBS | <ul style="list-style-type: none"> • Funding Special Projects for TANF recipients with disabilities • Specially trained VR counselors for TANF recipients with disabilities; lighter caseloads for counselors with TANF/VR clients • Developing screening tools for TANF counselors • Formal agreement with state VR agency to refer clients with disabilities. | <ul style="list-style-type: none"> • Counselor discretion regarding activities that fulfill work requirements. • Discussion of reasonable accommodations at TANF orientation. • Specialized service units for the hearing impaired and mentally impaired. Visually impaired are referred to the State Service for the Blind. |
| VT | JOBS | <ul style="list-style-type: none"> • Formal agreement with state VR agency to refer clients with disabilities. | <ul style="list-style-type: none"> • Counselor discretion regarding activities that fulfill work requirements. • Counselor discretion regarding reasonable accommodations. |
| WA | Universal | <ul style="list-style-type: none"> • Formal agreement with state VR agency to refer clients with disabilities. • Statewide contract with the Learning Disability Association of Washington to build job-related skills. | <ul style="list-style-type: none"> • Counselor discretion regarding activities that fulfill work requirements. • Opportunity to fill out a Needs Supplementary Accommodation Form at initial TANF interview. |

Participation requirements do not seem to affect how aggressive a state is in developing programs and policies that target people with disabilities. Minnesota, for example, does not require “universal” participation of TANF clients with disabilities, but appears to be taking some of the most active steps to target this population. Conversely, Illinois requires all but the most severely disabled TANF clients to participate in program requirements, but appears to be doing

little to assist clients with disabilities. Both Maine and Washington require all TANF clients to participate in TANF requirements, and each is making some effort to provide specialized services to people with disabilities. In the states studied, state-required participation for TANF clients did not appear to directly affect the services available to clients with disabilities.

As discussed previously, each state emphasizes the individualized nature of the services provided to TANF recipients with disabilities. These services include assessment, case management, work/job search, education and training, supportive services, transportation, child care, job retention services, and other. None of the states studied officially track which services recipients with disabilities request most. Minnesota indicated that people with disabilities frequently request training and assistance obtaining a GED. Minnesota and Vermont indicate that supplying/securing adequate transportation can sometimes be difficult, for all TANF recipients. Child care is another area where all clients can experience difficulty.

G. Employment Outcomes

TANF recipients can also face difficulties when it comes to being hired. Employment issues can be particularly difficult for people with disabilities, who may have access and accommodation issues. To encourage the hiring of TANF recipients with disabilities, Illinois and Minnesota both conduct outreach to employers regarding hiring people with disabilities and accommodating special needs. In Minnesota, counselors and placement specialists, with the consumer's consent, help employers identify reasonable accommodations and the resources to pay for them. In Illinois, caseworkers communicate with the corporate community to encourage them to hire people with disabilities. In addition, the state hosted a conference in summer 1999 to address the issue of employer outreach. In Maine, service providers are contracted to conduct outreach. Washington's TANF program leaves employer outreach, for the most part, up to VR and other partner agencies.

None of the case study states track TANF recipients with disabilities to determine if they remain on TANF longer than people without disabilities do. Anecdotally, some states (MN, VT, WA) indicated that they thought people with disabilities probably stay on TANF longer. There was less agreement on whether states think TANF recipients with disabilities were actually harder to place in employment than people without disabilities. Maine does not think this is necessarily true, that state TANF agencies simply need to find the best way to serve and assist clients with disabilities. "There are a lot of different types of disabilities with different needs," explained Sue Dustin, Director of Maine's Division of Policy and Programs. "It's a mistake to stereotype the disabled. People with disabilities are working just as hard as everyone else to get off of TANF." Washington echoed this sentiment. "People with disabilities can be harder to place, but less because of the disability itself and more because we haven't found the right way to serve them," said Allan Shanefelt. Minnesota indicated that placement is not necessarily more difficult, although there are more barriers to employment that must be overcome. Each of the states indicated that the current strong economy has helped in the placement of people with disabilities. With a shortage of workers, employers are willing to look beyond those they would usually hire, and will more readily hire people with disabilities. How this bodes for people when the economy eventually takes a downturn is uncertain.

Neither Maine, Vermont, or Minnesota have data regarding the employment outcomes of people with disabilities placed in jobs. Illinois indicates that a few studies have tried to track this information, with eighty five percent of clients with disabilities placed in jobs still employed twelve months later, and seventy four percent still working twenty four months later.

Overall, there was no consensus on the types of federal or state policies that most impede service delivery to TANF recipients with disability. More than one person interviewed indicated that federal rules regarding Medicaid prevent some recipients from getting a job, and limitations on the number of people (twenty percent) who can be supported with federal funds past time limits was also cited. Minnesota maintains that the most significant barriers to serving and supporting TANF recipients with disabilities are federal restrictions on Special Projects funds. Very little money is available for statewide systems change since federal statute requires that eighty-five percent of the funds be passed through the state to local governments. Most states, however, seem to feel that they are doing a fairly good job of serving people with disabilities, that what was required was a refinement of current TANF policies and program, not a major overhaul.

III. The Advocates Weigh In

Advocates do not always support their state's contention that people with disabilities are well served by TANF. In general, advocates expressed concern that many people with disabilities are not being properly identified (particularly people with learning disabilities) and provided with the necessary support. Advocates worry that the "work first" mentality of state TANF agencies may result in people with disabilities being forced into jobs that are not appropriate. Finally, what will happen to TANF recipients who cannot find a job when their benefits run out is of paramount concern to advocates. In many instances, states have yet to decide how they are going to address this issue.

A. Illinois

A disability advocate claimed that Illinois officials do not recognize specific issues facing people with learning disabilities. The state VR program is geared more towards people with physical disabilities, and they serve people with learning and other mental disabilities less effectively. State TANF officials espouse the "work-first" policy, that people with disabilities just have to want to work. This suggests that the real problem with people with disabilities is that they do not want to work. "People with disabilities may not be able to work first," the advocate explained. "Many need extensive training and support services before they can enter employment, but the state only pays lip service to the idea of targeting people with disabilities. The whole federal policy of Work First is a problem for people with disabilities. A lot of disabled need extensive, serious training in ways that are not accessible to them through TANF."

The Illinois advocate concedes that the state has made some move toward recognizing the problem in the last year or two, but has made little move towards modifying the stance that people just need to get a job as fast as possible and get off TANF. "Right now, everyone is really just being sent to find a job."

Her fear is that people are being weeded out of the welfare program. “It’s not simply a matter of people being sanctioned or removed from welfare. It’s more a matter of an individual, perhaps someone with a learning disability, doing something like missing a meeting and getting a very complicated letter and complicated instructions about how to reinstate themselves.” This type of communication is not really suited for people with learning disabilities, or problems with visual and oral communications. As a result, they do not do what they are suppose to do, they do not go back; they just drop off the caseload and disappear. “I really have no idea what will happen to a lot of people when the time limits hit,” she said.

B. Maine

Maine, like many states, maintains that the individualized level of service it provides TANF recipients benefits people with disabilities very well. However, advocates feel more can be done. Russ Striker of the Disability Rights Center of Maine believes that case managers “are not notably sympathetic” regarding the barriers that people with disabilities face. The quality of case management and how they approach disability issues varies from county to county, and can have an effect on how well people with disabilities are served.

The Maine Equal Justice Partners (MEJP) identifies several problems with the TANF program. The first is the way the state accommodates people with disabilities and others with barriers to participation. The TANF program has a “good cause” provision that permits participants to work a reduced number of hours if they have a good reason for doing so. In many instances, MEJP notes, good cause is promptly and appropriately applied. However, in other instances, caseworkers do not make participants aware of the good cause rule. Many caseworkers are not adequately trained to identify and evaluate good cause conditions. In addition, the multiple barrier service providers (Goodwill, BDL, Maine Medical Center) do not have the authority to grant good cause, so even if they spot a situation where it may apply, they still tell clients they have to participate full time. There is a great deal of inconsistency in the way caseworkers refer clients to multiple barrier service providers, and inconsistency in the way caseworkers apply good cause. Some people, Mary Henderson of MEJP explained, “are getting referred to SSI, and that is good. But the lack of training on part of caseworkers, and the inconsistent way the program is run, is a huge problem.”¹⁷

Advocates also identified the orientation process as a huge problem. Clients are told that they have to attend orientation before their application for benefits can be processed. If they do not show up for orientation, they may be sanctioned. The rule under the previous welfare program required that applications be processed within thirty days. “The current rule about orientation seems to violate this,” said Henderson. “The state said it would not be a problem, that they would get everyone orientated and process their benefits in thirty days. But this does not always happen, and people get sanctioned. There is a lot of unnecessary sanctioning going on. It’s a terrible problem.”

Lack of caseworker training and inconsistency in the way they apply program requirements to clients with barriers to work are the biggest problems. “We find that caseworkers are really pushing the work first idea,” stated Henderson. “They just want to find things for people to do, regardless of what their situation is. The message in the field is time limits, even though there

are no time limits in Maine.” (Maine has committed to extending benefits for people beyond the sixty month time limit if they are making a good faith effort to meet program requirements).

C. Minnesota

Even in Minnesota, advocates feel the state could be doing more. Aviva Breen of the Council on the Economic Status of Women feels the state has adopted a “work first” design and is taking a fairly “hard nosed” approach. “The state needs to re-examine the way it does education and training, and how these programs meet the needs of people with disabilities” explained Breen.¹⁸ In addition, the state has not looked at the issue of time limits. “The state has not identified who will be exempt,” said Breen. “And it may be that people with disabilities will not be exempt from time limits.”

D. Vermont

Vermont's Welfare Restructuring Project (WRP) became the nation's first statewide demonstration of time-limited welfare. It began on July 1, 1994, following receipt of federal waivers in April 1993 and the General Assembly's enactment of Act 106 in January 1994. This means that some rules and programs under federal TANF law do not apply to the Vermont TANF Program. Vermont operates its program to serve the “broad purposes” of Title IV-A of the Social Security Act-Block Grants to States for Temporary Assistance to Needy Families. This seven year welfare restructuring demonstration project provides transitional assistance through Vermont's TANF program, Aid to Needy Families with Children (ANFC) and its welfare-to-work component Reach Up.

Vermont's demonstration project will soon end and the advocacy community is taking a look at what can be done when it is over. According to Peter Young Bear of the Vermont Coalition on Disability Rights, “Vermont is ahead of the welfare reform curve.”¹⁹ However, it is uncertain whether the federal government will allow Vermont to continue the demonstration project, which has no cut-off of benefits, and use federal dollars to support people beyond the time limit. In the interim, a preliminary group has been convened to deal with this issue. “If folks are not allowed to continue with benefits, replacing those funds will ripple through the rest of the public benefits system,” stated Bear. “This will force a major rethinking of eligibility of benefits in other programs.”

“Compared to other states, people with disabilities in Vermont are fairly well off,” he continued. “But benefits are only sixty percent of what is needed for folks to live on. The state is doing a lot to get people work, but the percentage of folks with disabilities remaining on TANF will keep increasing.”

Young identifies barriers at both the state and federal level that impede service provision to people with disabilities. At the federal level, not allowing people with disabilities to maintain Medicaid is a huge problem. “The disability population has been left out of federal welfare reform.”

Barriers at the federal level are structural and legal. Barriers at the state level tend to be more cultural. “The TANF program is not use to working with people with disabilities,” said Bear. “They have the twenty percent set aside that allows them to waive work requirements for people with disabilities, and they are being granted the waiver.” In addition, the VR program is not generally been involved in the mental health system. According to Bear, the state has not couched the selling of the TANF program to people with disabilities separate from the regular TANF population. If anything, the program is targeted towards supporting children. “There is nothing special about TANF for people with disabilities.”

E. Washington

The advocacy community believes that the state wants to assist people with disabilities, but efforts do so have not been sufficient. The Learning Disabilities Association of Washington (LDAWA) has a contract with the state to provide “soft skills” training to people with disabilities, including TANF recipients. This training consists of 27-72 hours of class on job readiness skills, problem solving, decision making, social skills, interviewing, and resume writing. But getting caseworkers to refer disabled welfare clients to LDAWA has been tough. Caseworkers are extremely busy and overworked, and many are not trained well enough to deal with people with disabilities, particularly people with learning disabilities.

“People with learning disabilities are not doing so great,” explained Mindy Blanchard of LDAWA.²⁰ “All the caseworkers say we have a great program, but then they don’t take the necessary steps to get people to us. Even if caseworkers do not know how to identify people with learning disabilities, they should just send them to us. We will assess them and see what sort of soft skill training they need.”

LDAWA is now going to caseworkers in other agencies, in addition to TANF, that serve people with learning disabilities (VR, multi-service contractors, etc.) to talk to that staff about identifying people who could benefit from LDAWA services.

The lack of referrals from TANF is not a simple problem, and Blanchard believes there are many factors at play. “If we knew what the problem was, it would be easier to solve,” she explained. “Caseworkers are terribly overworked. It’s not that they are not concerned about their clients. They are, and are worried about getting them the right services. But caseloads turn over every few months, and clients move from one caseworker to another. Learning disabled clients need consistency, and that was the whole idea of the WorkFirst program originally. But it hasn’t worked out that way. Caseworkers do not have clients long enough to get to know what they need.”

The state bears responsibility for the less than seamless service that clients with disabilities receive. Despite the fact that the state has a statewide contract with LDAWA, the Association has been to TANF offices that do not even know the state has the contract. “It’s a systems problem,” stated Blanchard. “This piecemeal approach does not work. The system needs to be simplified. The process of referral and service provision needs to be simplified.”

IV. Implications

What are the implications of current state policies and programs for TANF recipients with disabilities? As the number of people with disabilities on TANF increases, states will find it increasingly difficult to meet their needs without programs and policies in place that specifically target people with disabilities, especially people with learning disabilities and mental health issues. If states do not start planning how they will meet the needs of an increasing number clients with multiple barriers to work, they could find themselves with a large number of people who cannot find or keep a job.

The fact that states have been slow to address the needs of harder to serve welfare recipients should be considered in the context of TANF implementation. Welfare reform has forced states to change the way they serve welfare recipients, including people with disabilities. Many states focused initially on complying with federal law and reducing caseloads, perhaps to the neglect of other issues. Because the TANF program is so new, it may be that states have not had time to determine which approaches are effective and how well they serve TANF recipients with disabilities. However, now that most states are adjusting to the new system, it is time for states to step back and reassess their programs and focus on how well they are serving all TANF recipients.

To meet the needs of people with disabilities, states must do more to prepare and train TANF caseworkers that work with clients with disabilities. Overworked, under-trained caseworkers cannot meet the sometimes complex needs of clients with disabilities. Many people with disabilities require relatively simple accommodations or services to succeed in the workplace. Others require extensive training and education before they can begin to look for work. If caseworkers are not willing or able to provide these services, many TANF recipients with disabilities will be unable to find work and leave the program.

This situation becomes critical when time limits are reached and benefits are no longer available. States can continue to use federal funds to support twenty percent of TANF clients beyond time limits, but what will happen if more than twenty percent of the TANF population requires additional support? States have the option to expend state funds in support of TANF clients, but it is by no means guaranteed that they will do so. If states do not begin to implement more aggressive and targeted strategies to move TANF clients with disabilities into gainful employment, the implications for people with disabilities could be severe.

Overall, each state asserts that it is doing a fairly good job of serving clients with disabilities. But now is not the time to be complacent, especially in light of the fact that many advocates for people with disabilities do not support this contention. In each state, advocates expressed concern that states were not doing enough to meet the needs of TANF recipients with disabilities, and worried that clients would not be able to find gainful employment and exit TANF. Now that states have begun to reduce caseloads and move the more job ready clients off welfare, they must now turn their attention to helping clients with disabilities do the same.

V. Conclusion

Welfare reform is still a relatively recent phenomenon and states are still grappling with issues related to work requirements, time limits, and exemptions, particularly with regards to harder to serve TANF recipients, including people with disabilities. It is clear that in many states, people with disabilities are not receiving the support and services that they need to fully participate in TANF programs. The issue of time limits and what will happen to people once the clock runs out on their benefits is an urgent one, and it is still unknown how many states will handle this situation. Will there be more cases of people who, as one Illinois advocate phrased it, just “disappear” from TANF without finding jobs or receiving benefits? Who will qualify for the twenty percent exemption allowed under federal law? And will states be willing to support people beyond this twenty percent with state funds? As states continue to implement welfare reform, and time limits draw near, these questions will be more definitively answered.

Appendix A Glossary of Terms

| | |
|----------|---|
| ADA | Americans with Disabilities Act |
| AFDC | Aid to Families with Dependent Children |
| ANFC | Aid to Needy Families with Children |
| APHSA | American Public Human Services Association |
| ASL | American Sign Language |
| BFI | Maine Bureau of Family Independence |
| DHS | Illinois Department of Human Services |
| DOL | Department of Labor |
| DSHS | Washington Department of Social and Health Services |
| DSW | Vermont Department of Social Welfare |
| GED | General Educational Development test |
| MACRO | Minnesota Association of Community Rehabilitation Organizations |
| MDES | Minnesota Department of Economic Security |
| MFIP | Minnesota Family Independence Program |
| MFIP | Minnesota Family Investment Program |
| PIC | Private Industry Council |
| PRWORA | Personal Responsibility and Work Opportunity Reconciliation Act of 1996 |
| SSA | Social Security Administration |
| SSI/SSDI | Social Security Insurance/Social Security Disability Insurance |
| TANF | Temporary Assistance for Needy Families |
| TWI | Targeted Work Initiative |
| VR | Vocational Rehabilitation |
| WIA | Workforce Investment Act |
| WIB | Workforce Investment Board |
| WPLEX | WorkFirst Post Employment Labor Exchange |
| WRP | Welfare Restructuring Project |
| WtW | Welfare-to-Work |

APPENDIX B
INTERVIEW QUESTIONNAIRE

Structured Interview Format
**State Policy Makers on Implementation of the
Personal Responsibility and Work Opportunity
Reconciliation Act (PRWORA)**

Introduction

The Heldrich Center at Rutgers University is a partner in a U.S. Department of Education funded Rehabilitation Research and Training Center on employment policy for individuals with disabilities, which seeks to offer new and revised approaches to workforce development and employment policy for individuals with disabilities. One of our research projects involves analyzing state policies and procedures that pertain to individuals with disabilities on Temporary Assistance for Needy Families program (TANF).

In particular, we are interested in identifying state policies and procedures that are designed to ensure that persons with disabilities and/or parents with children with disabilities are provided the opportunity to participate in the state's welfare-to-work program funded with federal and state funds. We would like to learn more about the specific policies and procedures of the TANF program in your state, particularly how it impacts individuals with disabilities.

The intent of this study is to identify policies and procedures that can assist other states in their policy development process in support of persons with disabilities and parents with children with disabilities. Our ability to better understand your state's policy approach would greatly benefit from a short discussion with someone familiar with the issues.

- Is this a good time for a short discussion?
- When would be a better time for us to spend 30 minutes discussing your state's approach?
- Is there someone else you can recommend that might be able to answer my questions?

Background Information:

A. Name of Interviewer _____

B. Job and Key Responsibilities _____

C. Date of Interview _____

I. Definitions

Q.1

What definition of disability is used by your state TANF program?

Q.2

Does the state use different definitions for different purposes?

- a. Determination of eligibility
- b. Required participation in work activities
- c. Time limit exemption or extension

II. Identification

Q.1

Does the state have a policy for conducting an assessment to determine whether a person has a disability?

Prompts:

- a. If so, who conducts the assessment and do they have special training?
- b. For what purposes are the assessments used (e.g., developing the individualized responsibility plan?)
- c. Providing exemptions, extensions to work participation, and time limits?
- d. Is completion of the assessment voluntary?

Can I get a copy of this policy?

Q.2

Approximately what percentage of your agency's current TANF caseload are considered people with disabilities, according to your definition?

III. ADA Procedures

Q.1

Are you aware of what ADA/Section 504 states about self-evaluation?

The American with Disabilities Act (ADA) requires that public entities undertake a self-evaluation in order to ascertain whether policies, practices, and procedures used by the state (in this case, the State TANF agency) to conform with ADA requirements.

Has your agency completed an ADA/Section 504 self-evaluation?

Does it reflect changes made to your welfare-to-work program as a result of TANF?

(If yes, can you provide a copy of the findings and a contact name and number for the individual who has ongoing responsibility for oversight?)

Q.2

Does the state have a plan for making structural changes to facilities where TANF programs are located to meet ADA accessibility requirements?

Q.3

Has the state assigned someone to coordinate its efforts to implement the TANF program in accordance with ADA requirements? Are people designated in local TANF offices?

Q.4

Has the state developed a policy for making notices available to applicants, recipients, and other interested persons regarding the protections offered to them under ADA?

If yes, then may we have a copy of this policy?

Q.5

Has the state developed procedures for resolving complaints involving allegations of discrimination under the ADA?

- Prompt:
- a) Have any such complaints been brought?
 - b) If so, how many?
 - c) What were the outcomes?

IV. State Policies

Q.1

Other than the ones we may have already discussed, are there state TANF policies or guidelines in place that specifically discuss individuals with disabilities on TANF?

What areas do these policies/guidelines cover?

- Prompt:
- a) Service coordination
 - b) Who has responsibility for case management
 - c) What services are available
 - d) Shared funding of services (based on what decision-making process)
 - e) Assessment procedures

Have you modified any policies or practices to accommodate the needs of TANF recipients with disabilities?

If Yes to either question, can we get a copy of this policy?

Q.2

Are there any formal agreements in place between state or local TANF agencies and Vocational Rehabilitation or other disability specific service agencies?

Are there any formal agreements or contracts in place between state TANF agencies and disability specific organizations?

- Prompt:
- a) If so, which agencies
 - b) What is the primary purpose?
 - c) Assessment?
 - d) Transfer of responsibility?
 - e) Specific services/
 - f) Case management?
 - g) Can you provide formal memorandums of understanding?

Q.3

In your opinion, are there any legislative, regulatory, or policy in place that impede service delivery or improve outcomes for persons with disabilities in TANF?

Q.4

Is your organization initiating or participating in the planning of any new policies that would benefit people with disabilities on TANF?

Q.5

Do you waive any policies or program requirements for people with disabilities?

If yes, list how such determinations are made:

V. Special Strategies, Services, Etc.

Q.1

Does the state have a policy or procedure for modifying work requirements for individuals with disabilities?

Q.2

What definition of “engaging in work” has the state adopted?

Has the state developed policies or procedures to make reasonable modifications for persons with disabilities, as appropriate?

Q.3

Could you briefly describe the services provided by or outsourced by state or local TANF agencies for people with disabilities?

- Prompts:
- a) Assessment/case planning
 - b) Case management
 - c) Work/job search
 - d) Education/training
 - e) Supportive services
 - f) Transportation

- g) Child care
- h) Job retention services
- i) Community work experience program (CWEP) (A “a workfare” program that requires TANF recipients to participate in unpaid community service jobs)
- j) Supported work? (job placement and on-the-job training and on-going support, as needed, to assure the person will keep their job).
- k) Other

Are any of these services provided only to people with disabilities? If so, what are the eligibility requirements?

Q.4

How do the services for people with disabilities or single parents with children with disabilities differ from your typical welfare-to-work services, if at all?

- Prompts:
- a) Are there different work/training options?
 - b) Do you provide additional supportive services?
 - c) Do you provide more case-management/individualized services?
 - d) Do different agencies or subcontractors provide services?
 - e) Do you offer specialized childcare services?

Q.5

Which services are provided through an outside vendor?

Q.6

What process has your state developed to refer people with disabilities to service providers?

Q.7

Of the services provided, what are the most requested by people with disabilities?

Q.8

Are there additional services not currently available that are requested by individuals with disabilities on TANF?

Q.9

Are any programs or services tailored for different disabilities?

- Prompts:
- a) Physical mobility
 - b) Hearing impaired
 - c) Visually impaired
 - d) Mental impairment
 - e) Other types of disabilities

VI. Employment Outcomes

Q.1

Do you conduct outreach to employers regarding hiring people with disabilities and accommodating special needs?

If yes, what are the services/outreach?

- Prompts: a) Information about physical accommodations
 b) Accommodating special schedules

Q.2

Do people with disabilities stay on TANF longer than people without disabilities?

Q.3

Are people with disabilities harder to place in jobs than people without disabilities?

Q.4

How does the recidivism rate returning to the TANF caseload of people with disabilities compare with TANF recipients without disabilities?

Q.5

Do you have information regarding the employment outcomes of disabled people you have placed in jobs?

VII. Conclusions

Q.1

Are there specific federal or state policies you would identify as current or potential barriers to services, support, and improved outcomes for TANF recipients with disabilities or TANF recipients with children with disabilities?

Q.2

Is there anything else you would like us to know about your program? Would you be willing to send us copies of regulations, laws or manuals that govern your program?

Thank you for your time. If after reviewing this information, we should have any additional questions, would it be all right if we called you back?

Yes No (verify number)

Appendix C State Case Studies

Minnesota

1. Allan Lunz, Welfare to Work State Coordinator
2. Gus Avenido, TANF Policy Manager
3. Pam Reinstatler, TANF Policy Manager
4. Aviva Breen, Council on the Economic Status of Women.

Additional Resources:

1. Minnesota Department of Economic Security, Vocational Rehabilitation Services, at <http://www.des.state.mn.us/bugundy/vorehab.htm>
2. Minnesota Department of Economic Security, Services for People with Disabilities, at <http://www.des.state.mn.us/disab.htm>
3. Minnesota Department of Economic Security, Welfare to Work Program, at <http://www.des.state.mn.us/bugundy/welfare.htm>

Minnesota’s Department of Economic Security (MDES), the agency that administers both the Vocational Rehabilitation and the Welfare-to-Work program, defines disability as a “physical or mental impairment that constitutes a substantial impediment to employment, where the person requires Vocational Rehabilitation services to prepare for, secure, retain, or regain employment consistent with the strengths, resources, priorities, concerns, and informed choice of the individual.” For the purpose of determining who is required to participate in work activities, and when time limit extensions can be granted, MDES considers other definitions. For TANF recipients, the required participation in work activities can be modified, and the time limits extended, if the person is “suffering from a certified illness, injury or incapacity which is expected to continue for more than thirty days and which prevents the person from obtaining or retaining employment.”

Currently, MDES does not have a policy in place for conducting an assessment to determine whether a person has a disability. The Vocational Rehabilitation (VR) program relies on the counselor and consumer (recipients of TANF and VR services are called consumers by MDES) to mutually decide if an assessment is needed, and VR has no plans to institute a more formal approach. The TANF program is in the process of developing an assessment policy, and the state is proposing three levels of assessment:

1. Counselor feels issues may be present; assessment is voluntary with the major focus on information and referral (assisting the consumer make an informed decision about pursuing and assessment);
2. Counselor feels issues are interfering with the consumer’s Employment Plan. Counselor may require that consumer participate in an assessment;

3. Mandatory assessment if evidence indicates issues are interfering with the consumer's Employment Plan, i.e., consumer has alcohol on breath and is frequently late for appointments.

This policy is scheduled to be completed by January 2000.

Employment counselors with in-service training do pre-screening for assessment. Assessments are done by qualified and licensed professionals who are "culturally competent" to assess the individual (either their own physician or a referral). Screening is used for referral to Vocational Rehabilitation Services, the development of an Employment Plan, determining if employment goals are realistic, and issue resolution (i.e., determining if lack of progress is disability-related, and if so, what accommodations are needed). Assessment is also conducted for the purpose of providing exemptions, extensions to work participation, and time limits. The completion of the assessment is usually voluntary, although a consumer may not be provided with certain services if his or her disability remains unassessed.

Each TANF recipient is assigned a Minnesota Family Investment Program (MFIP) employment counselor at the time of orientation to TANF benefits. It is the MFIP counselor who refers people with disabilities to the VR program. Other referrals come from the WorkForce Centers (One Stop Career Centers mandated under WIA) and community rehabilitation programs. In the past few years, VR has become more integrated with the One Stop Centers, to better serve VR consumers.

Statewide, up to eighty percent of the TANF population may be people with disabilities. In addition, MDES estimates that, statewide, about twelve percent of VR clients are TANF recipients with disabilities, and the state is making efforts to specifically serve this population. For example, in Hennepin County (which includes the Minneapolis metropolitan area), three counselors specialize in serving only people who meet dual eligibility for VR and WtW. This special project is funded by Department of Labor Welfare to Work formula grant dollars that were set aside by the state for Special Projects.

Minnesota is also working to ensure that programs and facilities are accessible for people with disabilities. The Americans with Disabilities Act requires that public entities undertake a self-evaluation to ascertain whether policies, practices, and procedures used by the state conform to ADA requirements. MDES completed a self-evaluation of their TANF office locations statewide, and required major vendors to provide the Department with a copy of their self-evaluation. The state assigned an ADA coordinator to both the Department of Economic Security and the Rehabilitation Services program. At the local level, the Rehabilitation Area Managers are designated as ADA coordinators. To keep consumers informed of the protections offered to them under ADA, ADA information and rights are printed on most department brochures and included in information packets.

In addition, the Minnesota Human Rights Act (the state version of ADA) was passed about ten years prior to ADA, so most structural changes to improve accessibility have already been made. Most of the VR offices recently moved into WorkForce Centers, which required remodeling of the new space before VR could move in. The Department reviews all blue prints

and designs before signing the lease to ensure that the building and all WorkForce Center services are in compliance. MDES is also developing remote interpreter services (ASL interpretation via video conferencing) so that deaf consumers living in remote rural areas can access all WorkForce Center services within a reasonable time frame.

The state has developed procedures for resolving complaints involving allegations of discrimination under ADA, although no formal complaints have been brought. Frequently, according to state officials, the informal complaints are actually the person's first request for reasonable accommodation. The accommodation is then built into the consumers Employment Plan.

Additional state policies are in place that specifically discuss TANF recipients with disabilities. The state is using DOL Formula Grant 15% Set-Aside funds, TANF Reserve funds, and state funds to fund special projects for people with disabilities on TANF. VR administers these funds through two programs:

- 1.) a VR direct service unit in Hennepin County (60% of the people statewide on TANF live in Minneapolis), and;
- 2.) a contract with Minnesota Association of Community Rehabilitation Organizations (MACRO) to provide WtW services statewide through a network of 28 accredited community rehabilitation programs (the TANF/WtW dollars flow to VR, which then sub-contract with MACRO to provide services).

These policies provide for a very individualized level of service. The MFIP employment counselor has primary responsibility for serving the needs of each consumer, and works with each consumer to prepare an Employment Plan. The focus is on moving the consumer off of TANF rapidly, and then moving the consumer out of poverty and out of risk of returning to TANF. To accomplish this, TANF and WtW funds are utilized. In addition, VR dollars are used when WtW regulations prohibit a specific service. For example, WtW funds can not be used for training beyond initial skill development, with a two year limit on training. Funding is shifted to VR at that point if the person needs more education to move up the career ladder.

To accommodate the needs of TANF/VR recipients with disabilities, MDES completed a review of DOL and RSA policies. MDES did not find any conflicts between the two sets of regulations that necessitated policy changes at the state level. Several practices have been modified, such as keeping VR/TANF caseloads at forty, instead of the traditional 120 for a VR counselor. The VR counselors hired for the special project have strong placement backgrounds, and they do more direct placement than other VR counselors. Intake is usually done on the day of application, instead of the typical week or two week delay. Counselors have up to three contacts with each consumer per week. This is much more support and counseling than typically provided by the program. Mentors (job coaches) are available through the WorkForce Center if additional support is needed. For instance, the mentor may work on parenting skills while the counselor focuses on employment issues. In addition to the Special Project, several community rehabilitation programs are accessing local WtW dollars to provide services.

Despite this high level of service to TANF recipients with disabilities, state VR officials still believe more could be done to serve this population. Explained Allan Lunz, state Welfare to Work Coordinator, “The pace is moving too fast. We are implementing at the same time that we are planning, allowing no margin for error. Training of staff and systems change is using up valuable time that is needed by consumers to meet the sixty month limit on benefits.” Minnesota is considering allowing non-SSI eligible TANF recipients with disabilities be allowed to remain on TANF indefinitely, but this decision has not yet been made.

The VR program is assisting in the development of screening tools to be used by the MFIP employment counselors to pre-screen for disability and possible referral to VR. The screening tools will look for evidence of learning disabilities, mental illness, and chemical dependency. The Department of Economic Security is also participating in a workgroup to determine whom, if anyone, should be extended beyond the sixty month time limit for TANF benefits. According to Lunz, most people in the workgroup feel people with disabilities should be granted an extension if the person is making adequate progress toward achievement of the Employment Plan. Currently, the state does not have a policy for categorically modifying work requirements for people with disabilities. The policy is flexible and allows for counselor discretion. For example, tutoring can be counted as work hours if the person has a learning disability and is working toward their GED. Time spent participating in assessment, therapy, medical appointments, structured job search, and training usually count toward required minimum hours of work.

Required Minimum Hours of Work Per Week

| FFY | Single parent family, no children under age 6 | Single parent family, children under age 6 | Two parent family (combined working hours) using state child care | Two parent family not using state child care |
|------|---|--|---|--|
| 1999 | 25 | 20 | 55 | 35 |
| 2000 | 30 | 20 | 55 | 35 |

The state has developed policies to make reasonable modifications for TANF recipients with disabilities. The availability of reasonable accommodations is discussed at orientation and again at the time of assessment. Counselors can count disability related accommodations toward the minimum number of hours of work required (i.e., tutoring, allowing extra time for special transportation).

VR agencies in Minnesota provide a wide range of services to job seekers with disabilities, including case management, work search assistance, education and training, supportive services, transportation, child care (provided through the MFIP Child Care Fund), job retention services, community work experience programs, and supported work. In addition, the WorkForce Centers have mentors on staff that can provide assistance with independent living skills, parenting skills, job keeping skills, and crisis resolution. Currently, all community work positions are paid at least

minimum wage, and the Department is considering unpaid positions if the economy takes a downward trend. This approach is also being considered for people who exceed the TANF time limitations.

TANF recipients with disabilities most frequently request assistance with obtaining their GED and accessing job training. Some services available to TANF recipients with disabilities in Minnesota are difficult to access because of waiting lists or other delays. For example, many VR customers have difficulty using the public bus system, but finding alternative transportation is difficult. Certain programs are tailored to different disabilities, including the State Service for the Blind, specialized service units for the hearing and mentally impaired, and specialized counselors for mental health, deaf/hard of hearing, traumatic brain injury, and HIV/AIDS.

To encourage employers to consider people with disabilities as potential employees, VR placement specialist and counselors do frequent outreach. With the consumer's consent, they assist in identifying appropriate reasonable accommodations and help the employer identify resources to pay for them. VR officials have found, however, that less outreach is needed during the strong economy. A tight labor market makes a big difference in employers' willingness to hire people with disabilities.

The state of Minnesota does not track how long people with disabilities stay on TANF. The assumption is that they stay on TANF longer than people without disabilities. Currently, the Department of Economic Security estimates that up to eighty percent of the people remaining on TANF have a disability of some kind, suggesting that people without disabilities were the first to leave the system. "It is not that job placement for people with disabilities itself is more difficult," explained Lunz, "But there are more barriers to employment that need to be addressed prior to or as part of the placement process. There is also a need to spend more time on follow-up to make sure the barriers have been resolved."

Although it is too early to look at employment outcomes of many TANF recipients with disabilities, the MDES does have some initial MACRO contract outcomes. The average earned income for the 264 participants has increased from \$10.72 per month to \$487.61 per month. For people who achieved competitive employment (including supported employment) the average monthly earned income was \$822.40 (note that 166 people are in work experience programs). MDES anticipates that the averages will increase as more people graduate from the program. The average cost per rehabilitation is \$1490.

MDES maintains that the most significant barriers to serving and supporting TANF recipients with disabilities are federal restrictions on Special Projects funds. Very little money is available for statewide systems change since federal statute requires that eighty-five percent of the funds be passed through the state to local governments.

"Although we have always served people on AFDC/TANF, the work first philosophy is new to us," explained Lunz. "We are learning as we are doing. Once we refine our processes, I think this system will work well for people with disabilities."

Minnesota has taken a number of significant steps to serve TANF recipients with disabilities. First, the Department of Economic Security recognizes that job seekers with disabilities may require special assistance in finding and keeping a job. To that end, the state has been willing to spend Special Project funds on initiatives that benefit people with disabilities, hire specialized counselors, provide an individualized level of service to all TANF recipients, and adopt a flexible attitude regarding what qualifies under work requirements. The TANF/WtW program and the VR program appear well integrated and provide a wide range of services to consumers with disabilities. Early employment outcome figures suggest that these policies and programs have the potential to assist a large number of TANF recipients with disabilities make the transition from welfare to work. However, the state still must decide how it will address those TANF recipients who are still unable to find work when they reach their time limit on benefits.

Illinois

1. Mary Ann Langston, Associate Director of Financial Support Services, Department of Human Services
2. Carla Shephard, Policy Analyst, Department of Human Services
3. David Peterson, Attorney, Department of Human Services
4. Carl Souter, Director, Office of Rehabilitation Services/ADA Coordinator
5. Disability Advocate

Additional Resources:

1. Americans with Disabilities Act Grievance Procedure, at <http://www.state.il.us/agency/dhs/Rules/admintro.htm>
2. Illinois Department of Human Services, TANF Program, at <http://www.state.il.us/agency/dhs/TANF.HTM>
3. Illinois Department of Human Services, VR Program, at <http://www.state.il.us/agency/dhs/Vr.htm>

The Illinois Department of Human Services (DHS), the agency that runs the state TANF program, does not define disability for the purposes of serving TANF recipients. Instead, DHS identifies a client's barriers to employment, including disability, that prevent a client from participating in a work activity. According to DHS, "the focus is on transitional services, so TANF requires most clients to work or participate in work-related activities and will limit the time that clients can receive benefits."²¹

To determine if a TANF recipient has a disability, counselors identify barriers that prevent the client from being employed or participating in job programs. Counselors conduct this assessment and also work with other agencies to assess client needs (for instance, a client might be referred to a substance abuse counselor). To qualify for TANF benefits, clients must address their barriers to employment and form a plan of action

DHS has completed an ADA/Section 504 evaluation, and assigned an ADA coordinator to oversee efforts to implement the TANF program in accordance with ADA requirements. Notices regarding ADA are posted in local TANF offices, and a brochure is also available. In addition,

the state has developed an ADA Grievance Procedure for resolving complaints involving allegations of discrimination under ADA.

Illinois, according to DHS, does not have TANF policies or guidelines in place that specifically discuss individuals with disabilities on TANF, nor has the state modified any policies or practices to accommodate the needs of TANF recipients with disabilities. Disability is considered one of many potential barriers to employment that must be addressed in each individual's work plan.

DHS anticipates that as welfare rolls continue to drop, a larger percentage of the caseload will be people with disabilities. People with disabilities and parents caring for children with disabilities are not exempt from either work requirements or time limits, but DHS has begun to look at these issues more carefully. "We don't want to write anyone off," explained Mary Ann Langston of DHS. "Each individual is different and we don't look at people with disabilities as a group."

Each TANF client, with the assistance of his or her caseworker, develops an individual employment plan. Caseworkers can decide what activities satisfy the work requirement (employment, education and training, treatment, etc). The state considers clients to be "engaging in work" so long as they are participating appropriately in the requirements laid out in their plan. DHS does not have a specific policy to make reasonable modifications for people with disabilities; caseworkers work with each client to determine appropriate work activities.

DHS provides several services to all TANF clients, in addition to assessment and case planning. The department has four main initiatives, including:

Targeted Work Initiative (TWI) - Families with no child under 13 are assigned to TWI and are limited to twenty four months of cash assistance without a job. Clients also participate in Job Search/Job Readiness programs. The first job offer must be accepted, and child care, medical, employment expenses, and possibly a partial TANF grant will continue to help the client stay on the job. If a client doesn't have a job within twelve months, the client will be assigned to a pay-after-performance job and must perform the required work to receive assistance.

Work Pays - For clients who find a job, Work Pays offers financial incentives, including a reduction in assistance of only \$1 for every \$3 earned, continued medical coverage, child care payments and food stamps. This program allows clients to see the increased benefits of working, and helps the client adjust to employment.

Electronic Benefit Transfer - Cash and food stamp benefits are being delivered via the Illinois Link card. This "debit" card is a more secure and modern way to distribute benefits and to assure food benefits are used for food purchases. Statewide conversion was completed in November 1997.

Employment and Training - Provides job training, job placement, and education services, as well as transportation, child care, physical exams, books supplies and employment expenses, to help clients make the move from welfare to work. Teen parents must finish high school or earn a GED to remain eligible.

In Illinois, there are no formal agreements in place between the TANF and VR programs. Nor does the VR program have any policies or guidelines in place that specifically discuss individuals with disabilities on TANF. The TANF program makes referrals to VR as needed, with additional referrals by other agencies, schools, hospitals, and self referrals. The Illinois VR program serves only those clients with the most significant disabilities. VR maintains a list of five life functions, and serves those clients who experience limitations in three. Because of this eligibility requirement, the VR program does not serve as many TANF recipients as in other states. VR and TANF are in the early stages of developing a program that would fit between TANF and VR and serve people with less severe disabilities than those currently served by VR. “We need to serve more people with disabilities who are on TANF,” stated Carl Souter of VR. “We need to target those people in the middle.”

Both the TANF program and VR conduct outreach to employers regarding hiring people with disabilities and accommodating special needs. The VR program also looks to place people in state jobs (for example, TANF counselors). At the Office of Rehabilitation Services, fifteen percent of employees are people with disabilities. In addition, the VR program has marketing employment specialists who conduct outreach to local communities and businesses on why it is a good idea to hire people with disabilities. “Employers are frequently reluctant to hire people with disabilities,” explained Souter. “They are concerned about insurance rates, making accommodations, and accessibility.”

Souter believes that that federal policy regarding Medicaid keeps many people with disabilities from entering the workforce. “The lack of Medicaid coverage for people who leave SSI/SSDI serves as a real disincentive.”

DHS does not track the employment outcomes of TANF recipients who are disabled, the recidivism rate returning to the TANF caseload of people with disabilities, or whether people with disabilities remain on TANF longer than people without disabilities. However, DHS does not believe that there are specific state or federal policies that prevent service to people with disabilities. As for when the clock runs out on benefits in a few years, DHS does not really know how TANF recipients with disabilities will fare. “The disabled might fall into the twenty percent category, but we don’t want to characterize anyone just yet,” stated Langston. “Even when the clock runs out, I believe we will be able to serve everyone on TANF.”

In general, Illinois provides few services specifically targeted to TANF recipients with disabilities. Disability is regarded as just one of many potential barriers to employment to be overcome, and is not necessarily grounds for exemption from work requirements or extension of time limits on benefits. Because of the rather strict eligibility requirements for VR services, many TANF recipients with disabilities do not benefit from the employment, training, and support services offered by VR.

Although there appears to be some recognition on the part of DHS that TANF recipients with disabilities may require specific programs and policies, for the most part people with disabilities are not targeted for special services. People with disabilities may not be receiving the supports they need to find and keep a job.

Vermont

1. Diane Delmos, Division Director of Vocational Rehabilitation
2. Jackie Levine, Human Services Staff Assistance, Department of Social Welfare
3. Peter Young Bear, Director, Vermont Coalition on Disability Rights
4. Skip Lemer, Rehabilitation Services Coordinator

Additional Resources:

1. Vocation Rehabilitation Work Duration 1995 Study
2. Division of Vocation Rehabilitation, Policies and Procedures Manual
3. Vermont Department of Social Welfare, Policy Bulletins No. 86-24F and 98-1
4. Cooperative Agreement between Department of Social Welfare and Division of Vocational Rehabilitation
5. State of Vermont TANF State Renewal Plan, at http://www.dsw.state.vt.us/wrp/tanf_stp.htm
6. Vermont's Welfare Restructuring Project, at <http://www.dsw.state.vt.us/wrp/wrpsum19.htm>

Vermont's Welfare Restructuring Project (WRP), the nation's first statewide demonstration of time-limited welfare, began on July 1, 1994, following receipt of federal waivers in April 1993 and the General Assembly's enactment of Act 106 in January 1994. This means that some rules and programs under federal TANF law do not apply to the Vermont TANF Program. Vermont operates its program to serve the "broad purposes" of Title IV-A of the Social Security Act-Block Grants to States for Temporary Assistance to Needy Families. This seven year welfare restructuring demonstration project provides transitional assistance through Vermont's TANF program, Aid to Needy Families with Children (ANFC) and its welfare-to-work component Reach Up. The Department of Social Welfare (DSW) is the state agency responsible for administering these two programs.

Services provided under Vermont's state TANF plan are integrated with services provided under the Reach Up program. The target recipients of WtW are those that face the greatest barriers to employment, including limited educational skills, substance abuse treatment needs, or poor work history. The Department of Employment and Training is the state agency responsible for WtW. Participants in the Reach Up program are generally referred by the Department of Social Welfare to the Department of Employment and Training for job placement services.

Reach Up is a work-assistance program that provides eligible parents with employment related services and supports, including child care and transportation. According to the state TANF plan, participation in Reach Up is mandatory for minor parents, who must complete their education as part of their Reach Up participation, and 16 or 17 year old out-of-school youth. It is also mandatory for principal earners in two-parent families, who have a fifteen month time limit before being required to satisfy WRP work requirements. When ANFC ends due to employment, Reach Up services may be extended for three months. After three months, WtW

will provide long-term casework with an emphasis on helping the least skilled clients overcome employment barriers.

DSW also collaborates with several other state and nonprofit organizations on an ongoing basis to work on employment, education and training issues affecting welfare recipients and other constituencies with special needs, including Vocational Rehabilitation, Corrections, and Developmental and Mental Health Services.

DSW does not consider disability so much as it considers incapacity. DSW policy defines physical or mental incapacity when “a child is deprived of “parental support” when a parent is unable, due to his or her physical or mental condition, to maintain his or her earning capacity for a period of not less than thirty days from the date of application. If an applicant for ANFC Incapacity works thirty-five hours or more per week her or she is not eligible on the basis of incapacity.”²² As with most states, applicants who have been determined to be “disabled” by the Social Security Disability Determination Unit will meet the incapacity criteria for ANFC.

To determine if a person has a disability or incapacity, the policy requires “professional medical determination based on a physician’s report or other adequate written medical information which includes a diagnosis of physical or mental disability which may reasonably be expected to container for thirty days or longer...the reasonable charge for medical examinations required to render a decision on incapacity shall be paid from administrative funds.”²³

Vermont does grant exemptions from WRP work requirements in some cases. Parents who have received at least thirteen or twenty-eight months of ANFC can be exempt from Reach Up participation, including the WRP work requirements, if they fall into one of several categories, including

A parent incapable of working due to a documented physical, emotional, or mental condition that can be reasonably presumed to present a substantial barrier to employment. To meet this definition, the parent must have an impairment that makes him or her unable to do his or her previous work and all other work that exists within a two-hour commute to his or her home. To determine whether the client is able to do any work, the client’s residual functional capacity, age, education, and work experience are reviewed based on information supplied by the client and by reports obtained from the treating physician(s) and other health care professionals who have examined the client. In the case of a parent who receives medical care through a managed care program, the determination will be made on the basis of information provided by the parent’s primary care provider (PCP) or by a medical professional to whom the parent was referred by the PCP. Functional capacity included mobility, communication, self-care, self-direction, interpersonal skills, work tolerance, and work skills.²⁴

The department can choose to review and reject the treating physician’s opinion if it feels there is evidence to refute it. Medical exemptions can be granted on a one to twelve month basis, with periodic reviews to see if the exemption is still warranted. A person incapable if working for a period expected to last longer than three months, but less than twelve months, must engage in appropriate rehabilitation, training, and education activities. Only those individuals with a

severe impairment will be granted an indefinite medical exemption. “A parent who is disabled, as determined by the Social Security Administration (SSA), shall be considered incapable of working without further review by the department since the criteria used by SSA are more rigorous than the criteria used by the department.”²⁵

Of a total TANF caseload of 6594 cases, DSW estimates that nine percent (575) are families with at least one incapacitated parent. The department estimates that the number of TANF cases who have received work exemptions is higher, possibly up to twenty percent. One rehabilitation services coordinator estimates that up to fifty percent of harder to server TANF clients are people with disabilities, particularly hidden disabilities such as learning disabilities.

Although Vermont’s welfare program did not change as a result of TANF (due to WRP), the Department of Social Welfare did complete an ADA self-evaluation and assign an ADA coordinator. The state does not have a policy for making notices available to recipients and applicants regarding the protections offered them under ADA, but information is contained on TANF application forms, along with contact information for the ADA coordinator. The state will resolve complaints involving allegations of discrimination under ADA on a case by case basis; no cases have been brought to date.

To better serve clients with disabilities, the Department of Social Welfare and the Division of Vocational Rehabilitation have entered into a cooperative agreement that specifies procedures for referring ANFC clients to VR. Referrals are not made based on an extensive medical review. Instead, caseworkers question their clients regarding the condition, how it impacts their ability to work, and how long it has existed. If the client is eligible and is willing to use VR services, he or she is referred. There are no formal agreements or contracts in place between DSW and disability specific organizations; at the local level, district offices may have informal arrangements to provide services.

The Vocational Rehabilitation program uses the federal definition of disability as defined in the Rehabilitation Act of 1973 (“a physical or mental impairment that constitutes or results in a substantial impediment to employment; or a physical or mental impairment that substantially limits one or more major life activities”). Previous to 1992, the VR program had a lengthy process for determining eligibility, based on a review of medical records and information. Since 1992, VR has taken a more counselor-oriented approach. Now, the counselor works with the client to assess the information provided by the client, observing and speaking with the client to determine the extent and nature of the disability and how to develop the client’s individual work plan. “There is a reduced focus on the medical examination,” explained Diane Delmos, Division Director of Vocational Rehabilitation. “Most work is done one to one.” Such assessments are voluntary. The VR program, like DSW, has completed an ADA self-evaluation and assigned a statewide ADA coordinator. The state has a transition plan for making structural changes to all state facilities so that they are accessible to people with disabilities (starting with correctional facilities). In addition, the state Division of Personnel formed a Reasonable Accommodation Committee, which distributes money for people who need reasonable accommodation services and equipment. The VR program does not target TANF recipients in any way, and has not modified any policies or practices to accommodate the needs of TANF recipients with disabilities.

That said, VR provides an extensive array of services, either through service providers or in-house, to people with disabilities, including case management, work/job search assistance, education and training, supportive services, employee assistance, and almost any service clients need to successfully work. Clients frequently request education and training, job placement assistance, and assistive technology. The VR program also has counselors specially trained to work with the blind and hearing impaired. After placing clients in employment, VR tracks them for a minimum of ninety days, to monitor their post employment status.

The VR program conducts outreach to employers regarding people with disabilities, but finds it can be difficult. “Most employers are nervous about hiring people with disabilities,” explained Skip Lemer, Rehabilitation Services Coordinator. “Most employers don’t know that they probably already employ people with disabilities.” Fortunately, the strong economy has had a positive impact on the attitude of employers towards hiring people with disabilities. “In this labor market, employers are calling us,” said Delmos. The on-going employer outreach is also emphasizing working with local Workforce Investment Boards (WIBs) to develop a strategic plan. “The One-Stop system still needs to see people with disabilities as employable,” stated Delmos. “But working with the local WIBs, I anticipate a much more seamless service delivery through the One-Stops in the future.”

In the opinion of VR, there are some policies in place that impede service delivery to people with disabilities on TANF. “There are philosophical differences between VR and TANF,” explained Delmos. “Work First versus being more on a career path. Some program requirements get in the way of appropriate planning for TANF recipients who are disabled. The time frames do not always allow for appropriate planning.” And both Delmos and Lemer identified the restrictive eligibility requirements of the TANF program with regards to education. The law currently states that those without a high school diploma or GED and read below the 9th grade level are eligible for services. However, many people with high school diplomas may still be functionally illiterate. “If they would just change that “and” to “or” it would make a big difference,” stated Lemer. “The criteria needs to be broadened,” agreed Delmos.

Disability advocates in Vermont are looking beyond the end of the demonstration project, which so far has kept the state ahead of the welfare reform curve. It is unknown whether the federal government will allow Vermont to continue to use federal funds to maintain the no cut-off of benefits. “If folks are not allowed to continue with benefits, replacing those funds will ripple through the rest of the public benefits system,” explained Peter Young Bear of the Vermont Coalition on Disability Rights. “It will require a major rethinking of eligibility of benefits in other programs.” Discussions are ongoing as to how the state will deal with these issues.

Advocates also identify barriers at the federal level, particularly those generated through the Social Security Act. Recipients of SSI/SSDI are in danger of losing benefits and access to Medicaid if they find employment. “We are still waiting for a federal law to pass that will allow people to maintain Medicaid after getting a job,” said Bear. While barriers at the federal level are structural and legal, barriers at the state level tend to be cultural. “TANF is not use to working with people with disabilities, and they are more likely to just grant them a waiver,” explained Bear.

“Compared to other states, people with disabilities are fairly well served by the state,” stated Bear. “ But the state has not couched the selling of the TANF program to people with disabilities separate from the overall TANF population. If anything, kids come first in Vermont. There is nothing really special about TANF for people with disabilities in Vermont.”

Overall, although the state does not target people with disabilities per se, Vermont has a very individual system of case management that allows DSW to serve people with disabilities.

“Individual case management is the best thing that Vermont does,” explained Levine. “It serves people with disabilities very well.” The state does not cut off benefits for those who remain on TANF after sixty months, an advantage to people with disabilities who may require more time before they are work ready. It remains to be seen whether Vermont can maintain this level of service after the demonstration project ends.

Maine

1. Sue Dustin, Director, Division of Policy and Programs, Bureau of Family Independence
2. John Shattuck, Director, Bureau of Rehabilitation Services
3. Russ Striker, Disability Rights Center of Maine
4. Mary Henderson, Maine Equal Justice Partners

Resources:

1. Maine Bureau of Family Independence, at <http://janus.state.me.us/dhs/bfi/msmg2.htm>
2. Maine Public Assistance Manual, at http://janus.state.me.us/dhs/bfi/tanf/tanf_toc.htm
3. Maine’s TANF and Related Programs Report, April 1999, at <http://janus.state.me.us/dhs/bfi/prog.htm>
4. Bureau of Family Independence, Disability Application For Medicaid and/or TANF
5. Division of Vocational Rehabilitation Policy Manual

The Maine Department of Human Services has two financial assistance programs—Temporary Assistance for Needy Families (TANF) and Parents as Scholars (PaS). The state-funded PaS program is not subject to the sixty month time limit, as is TANF. The jobs preparation program is called ASPIRE-TANF. ASPIRE-TANF/PaS provides case management and support services to help families prepare for, find, and keep employment; while the Division of Child Support Enforcement and Recovery helps families establish paternity and secure financial and medical support.

Families subject to the sixty month limit in which an individual has received benefits as an adult for sixty months will continue to receive TANF assistance provided that they are complying in all respects with TANF program rules. There is no policy that specifically addresses people with disabilities with regards to time limits, but the state intends to use state money to provide support for people who cannot work.

Maine’s TANF program, as administered by the Bureau of Family Independence (BFI), defines disability as an ‘incapacity that substantially reduces the ability of a parent to care for a child.’”

According to the Maine Public Assistance Manual, “medical or social information must show that incapacity substantially reduces or eliminates the ability of a parent to support or care for a child. Receipt of SSI, Social Security Disability, Railroad Retirement Disability, or Medicaid based on a Medical Review Team decision is proof of incapacity.” According to this definition, approximately seven percent of the of the TANF caseload are people with disabilities. In 1994, an economist at the Margaret Chase Smith Center surveyed 3,000 Maine AFDC families and found that 11.1% were not able to work because of an illness or disability, and 5.8% reported that their child's disability prevented them from working. That same economist surveyed this group again in 1998 and found that of those still receiving TANF benefits, 17.5% could not work because of a disability, and 17% were also prevented from working because of the need to care for a disabled child. These numbers suggest that healthier families have been able to find work, leaving a larger percent of families coping with chronic illness or disability on the TANF caseload.²⁶ People with disabilities are exempt from participating in the ASPIRE-TANF program only if they are a “parent or caretaker relative whose TANF or PaS eligibility is based on incapacity because the second parent or caretaker relative is an SSI recipient.” All other TANF recipients with disabilities are required to participate in ASPIRE-TANF program requirements.

The state’s policy for conducting an assessment to determine whether a person has a disability requires that clients fill out a Disability Application for Medicaid and/or TANF. The information (description of health problems, education and employment history, etc.) provided by the client is then reviewed by a Medical Review Team. The Medical Review Team may contact the applicant’s doctor, or require that the applicant see a doctor or other health care provider for a medical exam to get current information related to the disability (this exam is paid for by the state). The Medical Review Team is assisted by an Eligibility Worker in determining the status of the applicant. The completion of the assessment is voluntary, but without it, a person will not be considered disabled.

BFI has completed an ADA self-evaluation and assigned an ADA coordinator to ensure that efforts to implement the TANF program are in accordance with ADA requirements. The state has developed a policy for making notices available regarding ADA.

BFI has contracted with three private agencies who work with people with multiple barriers to employment (Goodwill, Maine Medical Center, and BDL Rehabilitation, Inc.). The intent is to provide more specialized and coherent service delivery to TANF recipients with multiple barriers to participation and employment, including people with disabilities. Caseworkers refer people with multiple barriers (two or more specified barriers) to these agencies, although there does not appear to be a clear procedure for doing so. Clients can also be referred to VR, although BFI has no formal agreement in place with VR to provide services.

Vocational Rehabilitation closely follows the federal definition of disability. To assess a person with a disability, VR counselors make the assessment based medical information supplied by the client. Previously, eligibility relied heavily on medical assessment. Now the VR program is looking more at the functional aspect of disability as it relates to work. The majority of referrals to VR come from the school system and other state agencies.

The Bureau of Rehabilitation Services has also completed an ADA self-evaluation and assigned a state ADA coordinator. VR also conducts extensive employer outreach regarding hiring people with disabilities. VR is working closely with state Career Centers to meet with employers as a group to encourage them to hire people with disabilities. “Many employment specialists do a lot of work for VR to develop employer contacts,” explained John Shattuck of the Bureau of Rehabilitation Services. “Employers are willing to hire now because the job market is so tight, so right now it is easier. In other times, it is not so easy. Over the last twenty years, the reason people hire people with disabilities has changed. Twenty years ago you relied on the social impulse that it is the right thing to do. Now the disabled are looked at as a resource that people are missing out on.”

“People with disabilities are pretty well served in Maine,” said Shattuck. “We could always do better, but our rehabilitation counselors are great and do a remarkable job.”

“It’s a mistake to stereotype people with disabilities. There are different types of disabilities with different needs. It’s a matter of finding the best way to serve them,” explained Sue Dustin of BFI. “People with disabilities are often willing to go out and do things that mainstream them. They are working just as hard as everyone else to get off TANF.”

Advocates in Maine do not always share the state’s enthusiasm. The Maine Equal Justice Partners (MEJP) identifies several problems with the TANF program. The first is the way the state accommodates people with disabilities and others with barriers to participation. The TANF program has a “good cause” provision that permits participants to work a reduced number of hours if they have a good reason for doing so. In many instances, MEJP notes, good cause is promptly and appropriately applied. However, in other instances, caseworkers do not make participants aware of the good cause rule. Many caseworkers are not adequately trained to identify and evaluate good cause conditions. In addition, the multiple barrier service providers (Goodwill, BDL, Maine Medical Center) do not have the authority to grant good cause, so even if they spot a situation where it may apply, they still tell clients they have to participate full time. There is a great deal of inconsistency in the way caseworkers refer clients to multiple barrier service providers, and inconsistency in the way caseworkers apply good cause. Some people, Mary Henderson of MEJP explained, “are getting referred to SSI, and that is good. But the lack of training on part of caseworkers, and the inconsistent way the program is run, is a huge problem.”

Advocates also identify the orientation process as a huge problem. Clients are told that they have to attend orientation before their application for benefits can be processed. If they do not show up for orientation, they may be sanctioned. The rule under the previous welfare program required that applications be processed within thirty days. “The current rule about orientation seems to violate this,” said Henderson. “The state said it would not be a problem, that they would get everyone orientated and process their benefits in thirty days. But this does not always happen, and people get sanctioned. There is a lot of unnecessary sanctioning going on. It’s a terrible problem.”

Lack of caseworker training and inconsistency in the way they apply program requirements to clients with barriers to work are the biggest problems. “We find that caseworkers are really

pushing the Work First idea,” stated Henderson. “They want to just find things for people to do, regardless of what their situation is. The message in the field is time limits, even though there are no time limits in Maine” (Maine has committed to extending benefits for people beyond the sixty month time limit if they are making a good faith effort to meet program requirements).

Overall, people with disabilities in Maine are addressed as part of the larger TANF population. Casework is individualized, and employment plans and work requirements are on an individual basis, regardless of disability. However, the system for referring people with multiple barriers to service providers is still uncertain, with caseworkers needing much more training before they can serve and refer people with disabilities properly. As the caseload in Maine continues to drop, BFI is finding that the remaining recipients all have barriers to employment of one kind or another. There are few policies that specifically address the needs of TANF recipients with disabilities. As the service contract with Goodwill, Maine Medical Center, and BDL are relatively new (1998), it remains to be seen if this system of serving people with multiple barriers will be effective.

Washington

1. Allan Shanefelt, Program Manager-WorkFirst Division, Families with Special Needs
2. Abby Cooper-Division of Vocational Rehabilitation
3. Mindy Blanchard, Project Director-Learning Disabilities Association of Washington

Resources:

1. Washington WorkFirst Website, at <http://www.wa.gov/WORKFIRST/>
2. WorkFirst Administrative Code, at <http://www.wa.gov/WORKFIRST/statestaff/wacs.htm>

WorkFirst is Washington State's welfare reform program. Four state agencies jointly carry out the program: Department of Social and Health Services; the Employment Security Department; State Board for Community and Technical Colleges; and the Department of Community, Trade and Economic Development.

The Department of Social and Health Services (DSHS) is the entry point and ongoing contact point for WorkFirst participants. All WorkFirst clients are prescreened for Welfare to Work eligibility during the early weeks of job search. WorkFirst clients who are eligible for the program are able to access WtW resources as soon as those services are needed.

The Department of Social and Health Services defines disability as any impairment that prevents a participant from working. No one is exempt from program work requirements, except the parent of a child less than one year old, who may use a one-time-only exemption from work requirements for twelve months. The parent or caretaker of an incapacitated household member or child under six for whom care is not available is temporarily deferred from participating until care needs can be met. Temporary deferments are granted for people with disabilities, if work is not appropriate. The state has not yet defined who will qualify for the twenty percent exemption, although it is likely, say state officials, that people with disabilities will be a big part of that. No

decision has been made about time limits yet, and what will happen to people who run out of benefits but still require assistance.

The assessment of disabilities is based on medical information provided by the client, and screening performed by the caseworker (for example, DSHS has a learning disability screening tool). DSHS estimates that as much as forty percent of TANF recipients have some type of learning disability, and the total number of recipients with disabilities may be as high as sixty to seventy percent. As the state's welfare rolls continue to drop, it is likely that this percentage will rise even higher.

DSHS has completed an ADA self-evaluation. State facilities are accessible to people with disabilities (or are being made so) and an ADA coordinator has been assigned, both on an agency-wide level, and at the divisional level. The state posts notices regarding ADA and accessibility, and forms contain similar language and instructions regarding ADA. The Constituents Relations Division is responsible for complaints involving allegations of discrimination under the ADA, although few such complaints have been brought.

DSHS does not have a lot of policies in place that specifically discuss people with disabilities. "We are trying to develop these policies," explained Allan Shanefelt of DSHS. "It's going to be a big focus. We are beginning by rewriting the manual for caseworkers to include a chapter on disability issues." In general, people with disabilities fall under the same rules and practices as other TANF recipients, but the state leaves the onus of accommodations up to the client. People are served on a case by case basis, and if they require reasonable accommodation, they generally can receive it. At the initial interview, the client is given a Needs Supplementary Accommodation Form to request any special accommodation or assistance the client might need (sign language interpreters, documents in Braille, etc.) In addition, DSHS has a formal agreement in place with the Division of Vocational Rehabilitation to provide services to TANF recipients with disabilities. The agreement specifies that any TANF client who is receiving VR services can use their VR plan as participation in WorkFirst. Even if some VR activities may not be ones typically accepted by WorkFirst as work activities, WorkFirst will defer to VR and accept them. DSHS also has a statewide contract with the Learning Disabilities Association of Washington. The state will refer clients with learning disabilities to this non-profit group, who will then work with the clients on issues of accommodation and job skills.

DSHS is instituting a new program that targets the caregivers of children with disabilities. Under the "Children with Special Needs" program, DSHS has contracted with a public health agency, to send nurses into the home to evaluate how the child's care needs impact on the parent's ability to participate in WorkFirst. Case managers will then work with the parent to see if and how they can participate in the program. Although the state does not waive any policies or program requirements for people with disabilities, "we are trying to be as creative as possible when serving people with disabilities," said Shanefelt. Although the state does not modify work requirements for people with disabilities per se, they do take medical information into account when designing the individual's work plan. School, training, and therapy can count towards work, although each client is expected to do as close to forty hours, as possible. The state expects all TANF recipients to be either preparing for work, looking for work, or working. A host of activities can qualify as preparing for work, and the work requirement is satisfied so long

as clients are doing on of these three things. Participants who refuse to participate will have their benefits reduced. Participants earn more by working because one-half of their job earnings is not counted as income against cash assistance. They keep their wages and may still receive a partial cash grant, food stamps, the Earned Income Tax Credit, and medical benefits.

The services provided by or coordinated by DSHS include:

1. Orientation, Screening, & Eligibility: DSHS gives participants an overview of the program, screens them for next steps, and determines TANF/SFA eligibility.
2. Fast Track: For TANF applicants who have recent job history, DSHS makes a fast track referral to ESD for intensive job search services. The applicant can begin job search before TANF eligibility is determined.
3. Diversion: For applicants facing a temporary emergency, DSHS explores alternatives to TANF cash assistance (such as child support, re-employment, or a diversion grant).
4. Individual Responsibility Plan: DSHS develops (and regularly updates) a written plan to show the participants responsibilities, work requirements and approved services.
6. Alternative Services: DSHS may temporarily defer job search while a family deals with family violence, substance abuse, or homelessness or applies for SSI benefits.
7. Job Search/Pre-employment Training/LEP Pathway: ESD provides job search, job search workshops and helps participants access college-approved pre-employment training (for above average wage jobs from an employer or Industry that commits to hiring or giving hiring preference to graduates). DSHS may refer limited-English proficient participants to LEP Pathway contractors for up to one year of combined ESL and job search or another work activity.
8. Employment: The goal is full-time, unsubsidized, living-wage employment, CTED administers the Community Jobs wage subsidy program and coordinates business outreach for the four core state agencies.
9. Post-Employment Services: Services for those who work twenty hours or more a week, DSHS offers childcare assistance, support services and help with keeping a job. ESD offers job or college referrals to find a better job. The community and technical college system offers help with accessing training that can lead to higher wages and approves training plans.
10. Evaluation: For participants who finish job search without finding jobs, DSHS evaluates their job search efforts and the local labor market, then updates the participant's individual responsibility plan.
11. Work Preparation: DSHS refers participants who will finish job search without getting a job to one or more of these activities, delivered by other state agencies, community based organizations or Private Industry Councils (PICS).

12. Re-employment Services: ESD provides rapid re-employment services to WorkFirst or former WorkFirst participants who lose their jobs. Participants are connected to fast track job search services when they apply for Unemployment Insurance or TANF. WorkFirst or former WorkFirst participants may also be referred, if involved in a WorkFirst post-employment training plan when job loss occurs.

The state offers subsidies to help low-income families afford work-related childcare. WorkFirst also helps with childcare costs while a participant looks for a job, works, or is in approved training. Childcare co-payments are based on family income. Help with medical costs is available while families receive cash assistance and for up to one year after the assistance ends due to employment. Children in most low-income working families are eligible for medical assistance. The Washington Basic Health Plan is also a resource for low-income workers; premiums are based on family income.

An array of employment and training services help participants keep a job, get a better job, and develop a career. The WorkFirst Post Employment Labor Exchange (WPLEX) Call Center contacts participants after they start working to make sure they are aware of and connected to needed services. Some post-employment services may continue for up to two years after a participant leaves cash assistance.

These services are offered to all TANF recipients, including people with disabilities. The services for people with disabilities and caretakers of children with disabilities differ from typical services only in the sense that they are more intensive. There are programs tailored for different disabilities, including Alcohol and Substance Abuse and Mental Health Services.

“We can always do better at serving people with disabilities,” said Shanefelt. “Particularly for people with learning disabilities. We can screen them, but then so what? We need more case management for these people.”

VR does most of the outreach to employers in terms of hiring people with disabilities and accommodating special needs. VR has business relations consultants who work with the private sector on the issue of hiring people with disabilities. WorkFirst also works in partnership with community colleges and others, who do a lot more in terms of employer outreach.

Anecdotally, DSHS believes that people with disabilities probably stay on TANF longer and are harder to place in jobs than people without disabilities. But DSHS also maintains that this is not necessarily due to the person’s disability, but to DSHS’s inability to serve them properly. “We need to do more for people with disabilities, but we don’t have the sophistication yet to handle all the issues that disability can involve,” explained Shanefelt. “Overall, we are doing a good job, but we have a way to go. We have been concentrating on getting people off TANF. Now we recognize that the remaining clients have special needs. Serving people with disabilities is our next frontier.”

The advocacy community believes that the state wants to assist people with disabilities, but efforts do so have not been sufficient. The Learning Disabilities Association of Washington (LDAWA) has a contract with the state to provide “soft skills” training to people with

disabilities, including TANF recipients. This training consists of 27-72 hours of class on job readiness skills, problem solving, decision making, social skills, interviewing, and resume writing. But getting caseworkers to refer disabled welfare clients to LDAWA has been tough. Caseworkers are extremely busy and overworked, and many are not trained well enough to deal with people with disabilities, particularly people with learning disabilities. “People with learning disabilities are not doing so great,” explained Mindy Blanchard of LDAWA. “All the caseworkers say we have a great program, but then they don’t take the necessary steps to get people to us. Even if caseworkers do not know how to identify people with learning disabilities, they should just send them to us. We will assess them and see what sort of soft skill training they need.”

The lack of referrals from TANF is not a simple problem, and Blanchard believes there are many factors at play. “If we knew what the problem was, it would be easier to solve,” she explained. “Caseworkers are terribly overworked. It’s not that they are not concerned about their clients. They are, and are worried about getting them the right services. But caseloads turn over every few months, and clients move from one caseworker to another. Learning disabled clients need consistency, and that was the whole idea of the WorkFirst program originally. But it hasn’t worked out that way. Caseworkers do not have clients long enough to get to know what they need.”

The state bears responsibility for the less than seamless service that clients with disabilities receive. Despite the fact that the state has a statewide contract with LDAWA, the Association has been to TANF offices that do not even know the state has the contract. “It’s a systems problem,” stated Blanchard. “This piecemeal approach does not work. The system needs to be simplified. The process of referral and service provision need to be simplified.”

Washington appears to be making efforts to target people with disabilities, as evidenced by the contract they have entered into with LDAWA. Caseworkers are not insensitive to the needs of clients with disabilities, but appear too overworked and under-trained to assess, refer, and otherwise meet the needs of people with disabilities. A lack of consistency among regions and TANF offices is also contributing to uneven service delivery. As a result, many people with disabilities are being overlooked. Finally, Washington has not yet looked at the issue of time limits, who they will exempt, and how they will deal with families who are unable to find adequate employment at the end of their sixty months. Having successfully reduced its welfare rolls, the state now needs to work on serving those that remain.

¹ The objective of the federally sponsored Jobs, Opportunities and Basic Skills (JOBS) program is to help AFDC recipients with dependent children obtain the education, training and employment that will help them avoid long-term welfare dependence.

² *Employment and Training Reporter*, “Tech-driven Assist Expected to Open Labor Market to Impaired Job Seekers.” Vol. 31 No.3, September 20, 1999., p. 36.

³ *Ibid.*, p. 36.

⁴ The report defined “universal” participation states as those states that require all recipients to participate in some type of activity. The Urban Institute, “State Welfare-to-Work Policies for People with Disabilities: Changes Since Welfare Reform.” October 1998

⁵ *Employment and Training Reporter*, “States Face Disability Debate as Participation Requirements Broaden.” Vol. 30 No.21, January 27, 1999., p.353-354.

⁶ As will be seen by these case studies, many states do not make a distinction between people with disabilities and the larger TANF population. As explained by the Urban Institute in their report *State Welfare-to-Work Policies for People with Disabilities: Changes Since Welfare Reform*, “many states do not consider “persons with disabilities”

as a population that is separate and distinct from other types of welfare recipients that is collectively referred to as “hard to serve.” Just as there is neither a single definition of “persons with disabilities,” nor one set of characteristics that easily identifies this population, there is no single definition of the “hard-to-serve” or their characteristics.” (p. 8, Section 3).

⁷ In the Urban Institute's 1998 report *State Welfare to Work Policies for People with Disabilities*, it says that "in seven states, individuals with disabilities are subject to time limits but are currently not required to participate in the WtW program (that is, participation requirements are the same as under JOBS). This combination of policies is a potential source of concern because persons with disabilities may not receive the employment-related services provided to other welfare recipients but they will face a limited duration of benefit receipt. Minnesota is one of the states with this combination of policies that is working to develop a more consistent set of policies." (p. 25, section 4).

⁸ Explained Allan Lutz of DHS: “It should be noted that we are working with several people who are exempt. We are assisting the person obtain SSI benefits to supplement their earnings from supported employment. Although it was not the intent of Congress to move people from one public assistance program to another, we feel that a small number of people with severe disabilities will need long term supports and the SSI safety net in order to permanently exit TANF. The proposed new policy is to reward people for participating in WtW services by extending their eligibility period. When the 60 month time period has expired, the person would continue receiving benefits and services and long as the goals of the Employment Plan are being met. This policy would apply to all people with substantial barriers to employment, not just people with disabilities. The main concern of the Legislature appears to be 1) how do we get out the message that TANF is short term temporary assistance if we don't have strict time frames, and 2) how do we define substantial barrier to employment.

⁹ This chart was compiled based on information contained in *State Welfare-to-Work Policies for People with Disabilities: Changes Since Welfare Reform*, The Urban Institute, October 1998.

¹⁰ Under JOBS, people with disabilities (“ill or incapacitated”) were categorically exempt from participation in employment and training programs. Minnesota does not require people with severe disabilities to participate in employment and training programs, but still subjects clients to time limits.

¹¹ Vermont's Welfare Restructuring Project (WRP), the nation's first statewide demonstration of time-limited welfare, began on July 1, 1994, following receipt of federal waivers in April 1993 and the General Assembly's enactment of Act 106 in January 1994. This means that some rules and programs under federal TANF law do not apply to the Vermont TANF Program

¹² Sixty percent of the people statewide on TANF live in Minneapolis

¹³ Each TANF recipient is assigned a Minnesota Family Investment Program (MFIP) employment counselor at the time of orientation to TANF benefits.

¹⁴ Phone interview, 9.1.99.

¹⁵ Phone interview, 9.10.99

¹⁶ Phone interview, 10.7.99

¹⁷ Phone interview, 10.13.99

¹⁸ Phone interview, 9.27.99

¹⁹ Phone interview, 9.10.99

²⁰ Phone interview, 10.15.99

²¹ www.state.il.us/agency/dhs/TANF.htm.

²² Vermont Department of Social Welfare, Policy Bulletin No. 86-24F

²³ Vermont Department of Social Welfare, Policy Bulletin No. 86-24F.

²⁴ Vermont Department of Social Welfare, Policy Bulletin No. 98-1.

²⁵ Vermont Department of Social Welfare, Policy Bulletin No. 98-1.

²⁶ Maine Equal Justice Partners, at <http://www.bairnet.org/organizations/main/page50.html>.