







## The Role of School in Transition

Transition planning under the Individuals with Disabilities Education Act (IDEA) must start before a student turns 16. The student is the creator of the transition plan, in collaboration with the Individualized Education Program (IEP) team which includes:

- The student
- The parents of the student
- At least one regular education teacher <u>if</u> the student is, or may be, participating in the regular education environment
- Not less than one special education teacher of the child, or where appropriate, not less than one special education provider of the child;
- A representative of the district who ✓ Is qualified to provide/supervise special education

✓ Is knowledgeable about the general education curriculum; and the resources of the district

- An individual who can interpret the instructional implications of evaluation results.
- At the discretion of the parent or the district, other individuals who have knowledge or special expertise regarding the child, including related services personnel as appropriate
- Representative(s) of any agency likely to be responsible for or paying for transition services, with the consent of the parents or the student who has reached the age of majority



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## **Transition Services**

Transition services means a coordinated set of activities for a child with a disability that-'is designed to be within a results-oriented process 's focused on improving academic and functional achievement to facilitate movement from school to post-school activities including ' postsecondary education

- ✓ vocational education
- ✓ integrated employment (including supported employment)
  ✓ continuing and adult education
- ✓ adult services
- ✓ independent living
- ✓ community participation

Services are based on *individual needs*, taking into account strengths, preferences, and interests and include opportunities to develop functional skills for work and community life. Before the student leaves school, the IEP must also contain, if appropriate, a statement of each public agency and each participating agency's responsibilities (including financial) for the Transition activities.

Individuals with Disabilities Education Act (IDEA) 34 CFR §300.43

## **Transition Planning Resources**

Individuals with Disabilities Education Act (IDEA) 34 CFR §300.43 https://sites.ed.gov/idea/regs/b/a/300

Transition Planning: A Guidebook for Young Adults and Family

A Transition Guide to Postsecondary Education and Employment for Students and Youth with Disabilities https://siles.ed.gov/idea/files/postsecondary-transition-guide-august-2020.pdf

Michigan Department of Education - Family Matters Fact Sheet-Special Education Transition Planning: Considerations for Students with Disabilities and Families MDE Family Matters Fact Sheet Special Education Transition Planning: Considerations for Students with D

ins for Students with Disabilities and Families

Think College is a national organization dedicated improving to improving inclusive higher education options for students with intellectual disabilities. Think College



## Age of Majority in Michigan - Students' Rights

When individuals reach the age of majority, they have the right to make decisions about their special education services, including the right to:

- Attend their IEP meetings.
- Invite anyone they choose to their IEP meeting.
- · Consent to any special education evaluations.
- o Provide input during the development of their IEP.
- Give signed permission for any personal records being sent to any outside agency under the Family Educational Rights and Privacy Act (FERPA).

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- Disagree with any school records.
- Access dispute resolution options such as IEP facilitation, mediation, state complaints, and due process.



## What to think about when approaching age eighteen

<u>18</u>

A Free Appropriate Public Education (FAPE) is an *entitlement* required by IDEA.

Most post-school agencies and support services are *eligibility-based*.

Archigan Alliance for Families - Rights and Responsibilities

Obtaining a Michigan ID card (if individual does not have one) Registering to vote Registering with Selective Service – males between 18-25

Legal Decision Making

Benefits (Supportiental Sections in Hourset, Neutrator, Home Help Services, Food Assistance) Adult Services (short term or lifelong assistance with finding/keeping employment, independent living, participating in community life, college/university or trade school.

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Person Centered Planning and Self-Determination

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# **Supported Decision-Making**

- Safeguards to Support Decision-Making Authority and Civil Rights Protections • Guardinabip restricts a person's freedom to make decisions. It should be considered only as a last resort when no alternatives are available.
  - Guardianship should be reviewed regularly to confirm its continued necessity.
     Family members should receive information about atternatives to guardianship to support people with disabilities to make decisions about health care, money, education, housing, relationships, or other areas.
  - health care, money, education, housing, relationships, or other areas. • A court should only grant a guardianship after a fuil and fair court hearing that includes the person with a disability.
  - Everyone's decision-making ability should be supported to the maximum extent possible.

The Arc Michigan: Rethinking Guardianship/Supported Decision-Making https://accmi.ocg/msource-center/documents/

- Families / Friends and Allies for Citcle of Support to provide monotomic for separation that guardianthe can provide through their guidance counnel and expertise a negate the need for evaluation of an individual's competence e enable multiple people to help a serior rather than a single guardian **Formal Systems of support** o Young adults in school, and their families, can use the IEP planning process to support autoormy, decision-making, and aeF-determination
- and self-determination Support and education are provided by a variety of advocacy organizations
- Community Mental Health programs must support and implement the principles and practices of Self-Determination



# Supplemental Security Income (SSI) Basics

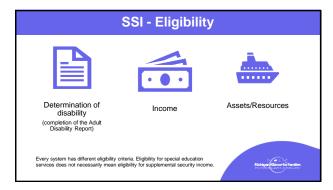
SSI makes monthly payments to meet basic needs for food, clothing, and shefter (rent, utilities, etc.). Base monthly rate depends on your living arrangement and countable income. If individuals need assistance managing their SSI benefits, a representative payee (usually a parent), can be assigned to help the individual

Social Security Administration (SSA) https://www.ssa.gov/ssi/text-understanding-ssi.htm SSI is a federal program funded by general tax revenues (not Social Security taxes), run by the Social Security Administration (SSA).

SSI makes monthly payments to people who have low income and few resources and are • Age 65 or older

 Disabled (based on Disability Determination Services criteria) individuals do not need to have worked in the past to get SSI.

eligible for SSI, also eligible for Medicaid Middan Viene to Femilie





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	SSI –	Eligibility DDS	
P	Disability De	termination Services (DDS)	
	Social Security Administration	Severe	_
	definition of disability	Long term	
		Limits the ability to work*	
	*If you don't work, Social Security	will look at how your disability limits your daily activities.	
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	SSI I	Eligibility – Income	
		individual receives that can be used to ed for food or shelter	
	Income	Cash	
	Examples	Wages	
		Income not earned (other Social Security benefits)	
		In-kind support (food or shelter that you receive for free or less than its value)	
2023 Income limit to rece	ive SSI is \$914/month (in	dividual) or \$1371/month (married couple)	
If a child under age 18 re using the disability, incon		a redetermination when the individual turns 18 adults.	100
Social Security Administrati What You Need To Know Abor (https://www.ssa.gov/pubs/EN	at Your Supplemental Security	Income (SSI) When You Turn 18 (ssa.gov)	igan Aliance for Families

SSI Eligibility – Resources/Assets					
Countable re	esource limit of \$2000 for an individual, \$3000 if married				
Resources counted for SSI	Bank accounts				
	401K				
	Trusts that ARE NOT Special Needs Trusts				
	Stocks				
	Bonds				
Resources not counted for SSI	The home you live in				
	One vehicle				
	Personal effects and household goods				
	Life insurance policies (<\$1500)				
	Burial spaces and burial funds (<\$1500)				
	Up to \$100,000 of funds in an Achieving a Better Life Experience (ABLE) Account				
Social Security Admini What You Need To Know (https://www.ssa.gov/put	About Your Supplemental Security Income (SSI) When You Turn 18 (ssa.gov)				



## **Medicaid: Last Payer**

Medicaid is always the last payer. If you have other insurance that will cover the equipment or service, it will be billed before Medicaid is billed.

If you are eligible for services through another entity, like school, Medicaid will require you to access services through them first.

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# Medicaid - Disabled Adult Children (DAC)

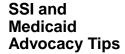
Also called Childhood Disability Beneficiaries-CDB's

Medicaid is available to a person receiving Disabled Adult Child (DAC) Retirement Survivor Disability Insurance (RSDI) benefits if the individual

- $\circ~$  Is 18 years or older AND has a disability or blindness that began before age 22
- Received SSI and became ineligible due to a change in parents' status (parent retired, parent became disabled, or parent passed away) AND
- Is receiving RSDI AND
- Would be eligible for SSI without such SSDI benefits

An individual might receive DAC RSDI, but not DAC Medicaid, but will not receive DAC Medicaid without receiving DAC RSDI.

ADHHS Bridges Eligibility Manual, Policy 158 https://dhhs.michigan.gov/OLMWEB/EX/BP/Public/BEM/158.pdf



Work Incentives Planning Assistance (WIPA) Information for people with disabilities about how earnings from work affect their Social Security and other public benefits

SSI appeal https://www.ssa.gov/ssi/text-appeals-ussi.hr WIPA https://arcmi.org/miwipa/wipa-contact-us/ idividuals should apply for SSI and Medicaid as soon s they turn 18. The process takes a while and the urpose of applying early is to be prepared for the uture.

Be honest when providing disability information for the disability determination. The amount of SSI that an individual receives depends

on whose income/resources in the household are bein considered. Individuals 18 and older are considered a household of 1 if they are paying their fair share of expenses (flood, shelter), even if they live with family o other people.

Each system has their own eligibility criteria. Understand the differences.

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# Food Assistance – Supplemental Nutrition Assistance Program (SNAP)

Food Assistance Program benefits are not considered income or assets for Medicaid or other lederal, state, local programs.

- Eligibility Must be a resident of Michigan. Eligibility is based on household size, monthly income, and assets
  - Individuals under the age of 22 are groups despetier (pring parents, skilling, etc.) as a household income/resources for all household more than the consideration for elipiblity individuals may be eligible on their own the month after they turn 22.
    Countable income description of the starting and the s

  - isets considered o Cash on hand, savings/checking accounts, investments, some trusts (NOT Special Needs Trusts)
  - Lasti on rano, savingsi orneoving accounts, investments, some truss (n Expenses deducted from income when determining Food Assistance benefit
    Dialis support payments
    Dialis support payments
    Dependent care expenses, like daycare
    Certain medical expenses for household members who are disabled or are at least 00 years old.

## MDHHS Food Assistance Program Information

Appealing a DHHS decision (contact case specialist first to try to resolve the issue) thtps://www.michigan.gov/documents/FIA-Pub18\_14356\_7.pdf







## **Adult Services** Community **Mental Health Services**

CMH services are important because they can provide lifelong supports to individuals with disabilities. Supports allow individuals to: • live independently

• work

· be engaged in their communities

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## **Medicaid Provider Manual**

Medicaid pays for community mental health services (some emergency services can be paid for if a person doesn't have Medicaid).

The Medicaid Provider Manual is used to understand the eligibility criteria for services, what medical necessity means, the criteria for services to be determined medically necessary, and how Medicaid services can be used to support individuals with disabilities.

Medicaid Provider Manual (Don't print the manual) /iderManual.pdf

## **Community Mental Health Services Medical Necessity Criteria**

Medicaid Provider Manual Behavioral Health and Intellectual and Developmental Disabilities Supports and Services

- A. MEIOLA INCERSITY CONTENA
  Mental health, developmental disabilities, and substance use services are supports, services, and treatment:

   Necessary for screening and assessing the presence of a mental illness, developmental disability or substance use disorder; and/or
  - Required to identify and evaluate a mental illness, developmental disability or substance use disorder; and/or
  - Intended to treat, ameliorate, diminish or stabilize the symptoms of mental illness, developmental disability or substance use disorder; and/or

  - Expected to arrest or delay the progression of a mental illness, developmental disability, or substance use disorder; and/or
  - Designed to assist the beneficiary to attain or maintain a sufficient level of functioning in order to achieve his goals of community inclusion and participation, independence, recovery, or productivity.

## Community Mental Health Services Determination of Medical Necessity

### 2.5.B. DETERMINATION CRITERIA-The determination of a medically necessary support, service or treatment must be:

- Based on information provided by the beneficiary, beneficiary's family, and/or other individuals (e.g., friends, personal assistants/aides) who know the beneficiary;
- Based on clinical information from the beneficiary's primary care physician or health care professionals with relevant qualifications who have evaluated the beneficiary;
- For beneficiaries with mental illness or developmental disabilities, based on person centered planning, and for beneficiaries with substance use disorders, individualized treatment planning;



- Made within federal and state standards for timeliness;
- Sufficient in amount, scope and duration of the service(s) to reasonably achieve its/their purpose; and
- Documented in the individual plan of service.



## Community Mental Health Services Supports, Services, Treatment, Decisions

## 2.5.C. Supports, Services and Treatment

Provided in the least restrictive, most integrated setting, Inpatient, licensed residential or other segregated setting shall only be used when less restrictive levels of treatment, service or support have been, for that beneficiary, unsuccessful or cannot be safely provided.

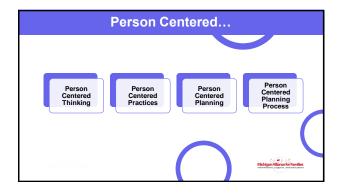
## 2.5.D. Decisions

Services may not be denied based solely on preset limits of the cost, amount, scope, and duration of services. Instead, determination of the need for services shall be conducted on an individualized basis.

Services are defined by the State and approved by Centers for Medicare and Medicaid Services (CMS).

Medicaid Provider Manual (Don't print the manual) https://www.mdch.state.mi.us/dch-medicaid/manuals/Medicaid/Provider/Manual.pdf







# Person Centered Planning (PCP)

Person-Centered Planning is required by state law-part of the Mental Health Code "Person-Centered Planning (PCP) means a process for planning and supporting an individual receiving services that builds on the individual's capacity to engage in activities that promote community life and that honors the person's preferences, choices and abilities".

Michigan Compiled Laws MCL 330.1700(g)

PCP is a way for people receiving supports and services from the mental health system to set goals that they want to achieve and develop a plan to accomplish them.

The PCP process leads to the development of an Individual Plan of Service (IPOS)

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## Values and principals That Guide the PCP Process

Person-Centered Planning is an individualized process designed to respond to the unique needs and desires of each person.

Every person is presumed competent to direct the planning process, achieve goals and outcomes, and build a meaningful life in the community. PCP should not be constrained by any preconceived limits on the person's ability to make choices.

Every person has strengths, can express preferences, and can make choices. The person-centered planning approach identifies the person's strengths, goals, choices, medical and support needs and desired outcomes. The person's choices and preferences are honored.



## Values and Principals That Guide the PCP Process, Cont'd

The person's choices are implemented unless there is a documented health and safety reason that they cannot be implemented. In that situation, the PCP process should include strategies to support the person to mplement their choices or preferences over time.

Every person contributes to his or her community and has the right to choose how supports and services enable him or her to meaningfully participate and contribute to his or her community.

Through the PCP process, a person maximizes independence, creates connections, and works towards achieving his or her chosen outcomes.

A person's cultural background is recognized and valued in the PCP process. Cultural background may include language, religion, values, beliefs, customs, dietary choices and other things chosen by the person. Linguistic needs, including American Sign Language (ASL) interpretation, are also recognized, valued and accommodated.

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The Individual Plan of Service is developed through the personcentered planning process.

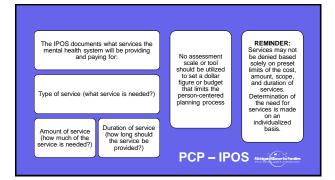
Life goals are identified by the individual and medically necessary services and supports are identified and documented in the IPOS to help work toward and reach goals.

PCP process is used at least annually to update the Individual Plan of Service. IPOS should be updated when needs or choices change.

Assessments may be used to inform the PCP process but is not a substitute for the process. Together, assessments and the PCP process are used to identify goals, risks, needs and authorize services.

РСР
Individual
Plan of
Service
(IPOS)

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# **Community Mental Health – Medicaid Covered Services**

These are some commonly used Medicaid covered services-

- Supports Coordination: Someone to help develop the Person-Centered Plan and IPOS and to link and coordinate services and supports.
- Respite Services: Intermittent, short-term staffing to provide a break to an unpaid caregiver. 0
- Community Living Supports (direct care workers/staff): Scheduled staff support to help individuals access and participate in their communities, work toward becoming more independent and assist them in being productive.
- Skill Building Services: Assistance to engage in meaningful activities such as recreation, work or volunteering.
- "Supported/Integrated Employment Services: Provides job development as well as initial and ongoing supports at work to maintain employment in an integrated setting. (Employment outside of school hours-after school, evenings, weekends, school breaks) o Medicaid will not pay for this service during school hours
- Assistive Technology: Adaptations to vehicles, communication devices, items necessary to live independently.
- Environmental Modifications: Physical adaptations to the home to make it accessible and safe.



## Self Determination – Policy

Michigan Department of Health and Human Services Behavioral Health and Developmental Disabilities Administration

- work or volunteer activities that are chosen by and meaningful to person,
  reciprocal relationships with other people in the community, and
  daily activities that are chosen by the individual and support the individual to connect with others and contribute to his or her community.

With arrangements that support self-determination, individuals have control over an individual budget for their mental health services and supports to live the lives they want in the community.

Self-Determination Policy and Practice Guideline

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## Self Determination - Policy, Cont'd

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Person-centered planning (PCP) is a central element of self-determination. PCP is the crucial medium for expressing and transmitting personal needs, wishes, goals and aspirations. As the PCP process unfolds, the appropriate mix of paid/non-paid services and supports to assist the individual in realizing/achieving these personally defined goals and aspirations are identified.

The principles of self-determination recognize the rights of people supported by the mental health system to have a life with freedom, and to access and direct needed supports that assist in the pursuit of their life, with responsible citizenship. These supports function best when they build upon natural community experiences and opportunities.

The person determines and manages needed supports in close association with chosen friends, family, neighbors, and co-workers as a part of an ordinary community life.

actice Guideline

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## Continue an open line of communication with the individual. Assume competence! where to live employment and daily activities continuing education support for daily & major life decisions build community connections Talk about the transfer of rights when an individual turns Explain the individual's rights and encourage their active role in decision-making at their IEP meetings.

Supporting an Individual Who is Turning 18

Discuss decision-making options and identify family, friends, and allies who can support the individual to make their own decisions, with support that is needed.

Continue open conversations with the individual about Continue open conversations with the management their wishes for the future: PACER's National Center on Transition and Employment-Prepare Your Child for Age of Majority and Transfer of Rights have flower dear orderparticity insource literary publications/NPC-19.pdf Wayne State Developmental Disabilities Institute Possibilities Video Series https://dd.wayne.edu/possibiliti

Help the individual apply for needed benefits to access services that will help the individual work toward and reach their desired goals.

Stay involved! Continue to attend planning meetings, at the invitation of the individual.

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