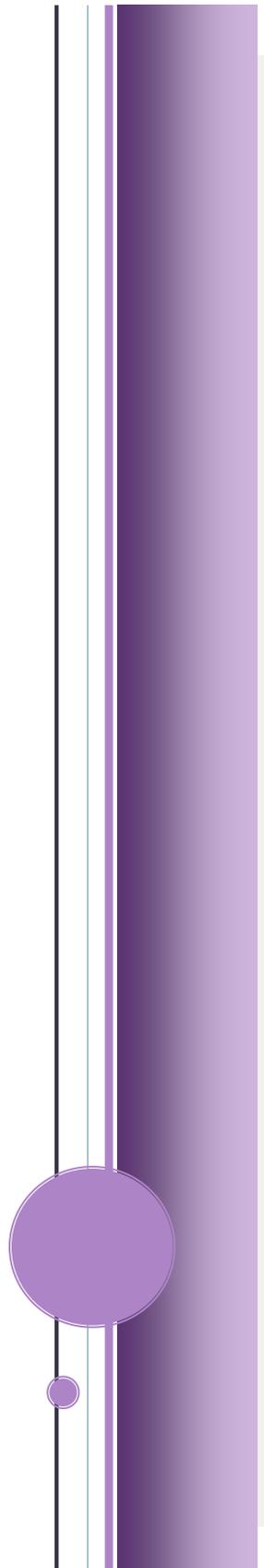


BRIDGE TO  
INDEPENDENCE ADVISORY  
COMMITTEE 2018  
ANNUAL REPORT

*Submitted pursuant to Neb. Rev. Stat. §43-4513*



## **Bridge to Independence Advisory Committee Annual Report**

2018

Statutory Charge: Make recommendations regarding the Bridge to Independence Program, extended guardianship assistance, and extended adoption assistance [[Neb. Rev. Stat. §43-4513\(1\)](#)]

### Strategic Goals

Priority 1: Monitor ongoing implementation of the current B2i Program.

Priority 2: Outcome evaluation of the current B2i Program.

Priority 3: Expanding to and improving outcomes for similar groups of at-risk young adults.

### Contact Information

For more information or to get involved, please visit [childrens.nebraska.gov](http://childrens.nebraska.gov), or email [necc.contact@nebraska.gov](mailto:necc.contact@nebraska.gov).

# BRIDGE TO INDEPENDENCE ADVISORY COMMITTEE

Nebraska thrives when young adults are able to reach their educational and career goals to enter the workforce and raise families here. When a youth cannot safely remain at home due to abuse, neglect, or other safety concerns and enters child welfare out-of-home placements, they need supports to transition to adulthood. The Bridge to Independence (B2I) Program was created to support young adults exiting the child welfare system without permanency to reach their goals.

The Bridge to Independence (B2i) Advisory Committee was created pursuant to [Neb. Rev. Stat. §43-4513](#) to make recommendations to DHHS and the Commission regarding the Bridge to Independence program, extended guardianship assistance, and extended adoption assistance. This Advisory Committee is chaired by Jeanne Brandner (Administrative Office of Probation) and Mary Jo Pankoke (Nebraska Children and Families Foundation) and has met once so far in 2018, and met four times in 2017- exceeding the statutory requirement of two meetings per year. The Advisory Committee has identified three priorities to guide its work. This report will provide strategic action recommendations to promote these three priorities, and a matrix of the information in the Appendix.

1. Monitor ongoing implementation of the current B2i Program;
2. Outcome evaluation of the current B2i Program;
3. Expanding to or improving outcomes for similar groups of at-risk young adults

## BRIDGE TO INDEPENDENCE PROGRAM BACKGROUND

The Bridge to Independence Program is administered by the Department of Health and Human Services – Division of Children and Family Services (DHHS-CFS) to help young adults exiting child welfare out-of-home placements achieve their goals and reach their full potential. The Program was implemented in October of 2014, and is now in its fourth year of operation. [More in depth data](#) can be reviewed in the Appendix of this document.

Young adults are eligible for the B2i Program if they are between the ages of 19 and 21 years old, and aged out of an out of home placement to independent living. To remain in the program, the youth must be working towards a productive adulthood in one of these ways: completing a high school diploma or attaining a GED, taking classes at least part time at a college or vocational education program, work at least 80 hours a month, be engaged in an activity designed to allow the young adult to address barriers to workforce participation, or be medically incapable of the above activities. Young adults must also meet with the B2i Program worker, called the Independence Coordinator on a monthly basis.

**Commented [JC1]:** DHHS & FCRO data was included in last year's report. It is the intent to share updated B2i CQI data as attachments in 2018's report to highlight the program priorities.

## 105<sup>TH</sup> LEGISLATURE, 2<sup>ND</sup> SESSION HIGHLIGHTS

### LB 732

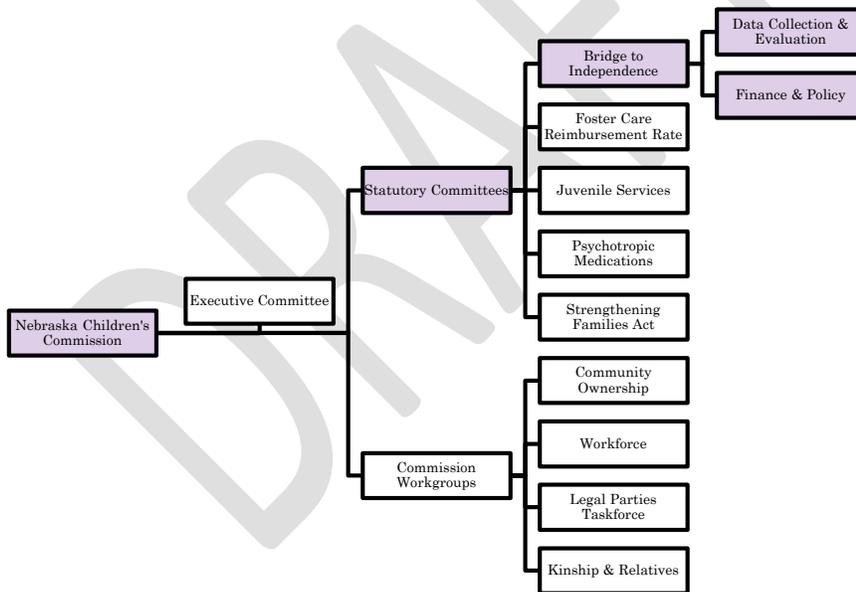
Legislative Bill 732 (Riepe) changed the annual reporting requirements related to the Nebraska Children’s Commission and the Bridge to Independence Advisory Committee. The annual report to the Legislature deadline has been changed from December 1<sup>st</sup> annually to September 1<sup>st</sup> annually. This abbreviated report will cover the shortened period of December 2017 to June 30, 2018. For subsequent years, the Bridge to Independence Advisory Committee will report on state fiscal year, July 1<sup>st</sup> to June 30<sup>th</sup> for each September 1<sup>st</sup> annual report.

**Commented [FA2]:** This date reporting cycle is pending approval of the larger Children’s Commission.

### LR 451

Legislative Resolution 451 (Bolz) was introduced on March 27, 2018. The interim study is to examine the work of the Nebraska Children’s Commission and to evaluate the need for the commission’s continuation and any revisions to its structure and purpose.

Under Neb. Rev. Stat. §43-4513 the Nebraska Children’s Commission appointed the Bridge to Independence Advisory Committee. The Committee is to report annually to the Nebraska Children’s Commission, the Health and Human Services Committee of the Legislature, and the Governor.



The Advisory Committee was appointed in July 2013. Attendance records have been reviewed and indicate participation is active and a quorum is consistently met. The Committee exceeded minimum required annual meeting last year. The need for the Advisory Committee to remain in a statutorily required body has been reviewed. The Bridge to Independence Advisory Committee recommends...

**Commented [JC3]:** Should the Committee remain a statutory body? Are there necessary changes to the language of the statute?

## **STRATEGIC GOAL 1: MONITOR THE ONGOING IMPLEMENTATION OF THE BRIDGE TO INDEPENDENCE PROGRAM**

The Legislature has charged this group with monitoring the Bridge to Independence Program and the group has made the task its first priority. The DHHS-CFS, service providers, youth advocates, system stakeholders and current and former foster youth provide regular feedback and updates. The Advisory Committee serves as a forum for stakeholders to exchange information, provide support, and create innovative solutions to the challenges facing youth aging out of child welfare out-of-home placements.

Since the program's implementation, DHHS-CFS has committed Independence Coordinator FTEs, Supervisor FTEs, IV-E and General Funds, policy and program support, Continuous Quality Improvement, promulgated Rules and Regulations, among other resources in order to fully implement the Bridge to Independence Program. Through collaboration, various stakeholders, service providers, and private entities have formed to support the work of Bridge to Independence and the population it serves. The courts continue to be a vital role in the implementation and ongoing maintenance of the Bridge to Independence, enrollment and IV-E funding determinations.

### **Continuous Quality Improvement and Data Analysis**

Through the use of data made available through DHHS-CFS and the Foster Care Review Office (FCRO), there is routine review of programs accessed, and services provided through Bridge to Independence. The Bridge to Independence program is monitored and refined through the use of data analysis and case reviews.

### **DHHS Continuous Quality Improvement (CQI) Process**

DHHS has created a CQI process to examine point in time data collected through the B2i Program. This data is run on a monthly basis and reviewed by DHHS and stakeholders for program and process improvement.

DHHS-CFS has provided information from the B2i CQI process, which has been reviewed and discussed at length by the Evaluation and Data Collection Workgroup. The Workgroup will continue to review this data and support DHHS in its CQI process.

The Evaluation and Data Collection Workgroup will continue to review the CQI data information at each meeting to determine if additional data or trends are relevant to and should be forwarded onto the Advisory Committee. The following information is identified as key for the review of the Advisory Committee:

1. IV-E eligibility data;
2. Data related to the benefits and programs that young adults enrolled in the Bridge to Independence program are accessing;
3. Program participation including entries, exits and reasons for exit; and
4. Total number of young adult served in each fiscal year between 2014-2018.

### **Foster Care Review Office Data Collection**

The Foster Care Review Office (FCRO) has a statutory duty to review B2i cases, and has identified a need to focus on data from which conclusions about the program may be drawn. The review process will focus on broader outcome issues, including the progress the young adult has made on their goals, such as employment or education. The case file reviews will evaluate:

1. Young adult goals and the progress made on goals;
2. Independence Coordinator responsibilities; and

Commented [JC4]: Slides to be added in attachments

### 3. Young Adult responsibilities.

The new FCRO case file review process will begin on July 1, 2018. In creating the process, the FCRO had asked the Evaluation and Data Collection Workgroup to provide input on the three areas above to better refine the information collected from the young adults and their Independence Coordinators. The Workgroup will continue to provide comments and feedback on the new FCRO Bridge to Independence case review process as it is implemented.

#### **Independence Coordinator**

The Independence Coordinator plays a critical role in the B2i Program, and provides significant support and community connections to the young adult. While the Independence Coordinator does not provide any direct services, they are essential to allow the young adult to access the needed services.

The B2i Advisory Committee plans to work in connection with DHHS-CFS to make recommendations about the role of the Independence Coordinator, including by exploring innovative solutions to the challenges posed by this role. Considerations include caseload right-sizing, worker safety, and further collaboration and alignment through Connected Youth Initiative.

The Connected Youth Initiative (CYI) model is a systems approach that utilizes community collaboratives, public/private partnerships, and national best practices to create a locally based older youth support network. The CYI model includes strategies in four core components (youth leadership, central navigation, coaching, and economic opportunity) that lead to improved outcomes in seven key areas (permanence, education, employment, housing/transportation, physical/mental health, personal/community engagement, and economic stability). The B2i Advisory Committee recognizes that this program has supports and services that would be of benefit to young people in the B2i program and recommends that the Independence Coordinators collaborate with the CYI to eliminate duplication of services between these public and private partners.

#### **Coordinate and Eliminate Duplication of Services**

In Nebraska, young adults come into contact with a number of different eligibility, coordination, and management workers. The young adult will have a public services eligibility worker, Title IV-E eligibility worker, Child and Family Specialist worker, and Independence Coordinator. These individuals are highly knowledgeable about different eligibility requirements and the continuum of services for families and transitioning youth in the communities. As the B2i program has developed, it has become important to begin to monitor the services that young adults are accessing. Youth may be eligible for additional programs, and increased alignment in the eligibility process would allow for upfront coordination of the agency services that youth are accessing.

The Bridge to independence Advisory Committee will explore ways to align the eligibility determination process, including through eligibility determinations for other programs at time of B2i eligibility determination so that informed decisions can be made on how to coordinate services.

The purpose of B2i case management is to connect young adults to the services and supports in their communities. This means that young adults will access multiple community supports at one time to address a wide variety of needs, such a medical and mental health, housing, employment and education services. This requires youth to have case managers who are familiar with the community and needs of the youth. The B2i Advisory Committee, in partnership with DHHS will examine the potential for service duplication for specific populations and ensure that youth receive the best possible case management and community resources. Key populations identified include:

1. Young Adults with Developmental Disabilities
2. Young Adults with Mental or Behavioral Health Needs, and
3. Pregnant and/or Parenting Young Adults

**Young Adults Receiving Home and Community Based Services (HCBS) Waiver Funding and Services**

All young adults deserve necessary support to transition to a healthy and successful adulthood. Some of these young adults also have developmental disability needs and are eligible for both the B2i program and the Developmental Disability Home and Community Based Services (HCBS) Waiver. In order to ensure that these young adults are able to reach their full potential and participate in their communities, a careful analysis was undertaken of the services and funding sources of each program.

**Impact of B2i Payments for Former Wards with Developmental Disabilities**

Legislative Fiscal Analyst Liz Hruska prepared the following information:

*Persons residing in a licensed center for the developmentally disabled are only allowed to retain \$60 a month. The balance of their income offsets the cost of their care. Bridge to Independence payments are either General funds or a combination of General funds and IV-E. For former wards with developmental disabilities covered by Medicaid, the amount above \$60 would offset costs at approximately 47% General and 53% federal. If the Bridge payment is from General Funds only, 53% offsets the federal Medicaid payment. If the payment is from General and IV-E funds, there is a net zero impact, i.e. the fund source for the B2i payment is the same as the Medicaid. Additionally, the young adult should qualify for Social Security benefits which is also applied to offset Medicaid General and federal costs. [Neb. Rev. Stat. §68-1006.01]*

**Recommendation 1a: Young Adults enrolled in the Bridge to Independence program and whose residence is paid for by Medicaid under a HCBS Wavier will not receive a Bridge to Independence stipend. A statutory change would be required to implement this recommendation.**

**Service Coordination for Former Wards receiving HCBS Waiver services**

The B2i and Comprehensive Developmental Disability Waiver Walk Through in appendix \_\_\_ compares the services and case management provided by each program. Although there may be overlapping services between the two programs, each has different purposes and goals for the young adult enrolled. Services under each program are highly individualized; so many young adults need the unique services and benefits that are available from both programs. Each individual will have different needs, and the below recommendation allows for responsible and coordinated support.

**Recommendation 1b: Young adults in the Bridge to Independence Program who are receiving services paid for by Medicaid under a HCBS waiver will receive case management that is coordinated across the two programs. A structured process will be developed to ensure these young adults access the needed services. An assessment will be undertaken to understand the needs of the young adult. A plan will be created based on this assessment to ensure access to needed services and case management without any duplicative services. This recommendation is dependent on the statutory change proposed in Recommendation 1a above.**

**Young Adults with Mental Health or Behavioral Health Needs**

Young Adults in the B2i Program may also have mental or behavioral health needs that require access to community supports and services. DHHS Division of Behavioral Health and the Behavioral Health Regions. The Advisory Committee will explore the services that young adults with mental health need are eligible for when transitioning out of child welfare out-of-home placements, and create recommendations for service provision without duplication of services.

**Young Adults Receiving the Minor Dependent Stipend**

Commented [FA5]: Attached below

The [2017 Annual report](#) of the B2i Advisory Committee identified the need to coordinate services and eliminate the duplication of services for young adults who are pregnant and parenting. The B2i Advisory Committee set a goal to explore the structure of B2i stipends for pregnant and parenting young adults to best support Nebraska’s families and reduce the “cliff effect” when young adults leave the B2i Program.

As of January 2018, the B2i stipend and dependent child stipend were based on Nebraska’s foster care maintenance payments and are set by DHHS. This stipend amount had been under the consideration of DHHS to recognize the current General Funds shortfall, remain in line with other Nebraska support programs, and reflect best practices identified by other states. DHHS has since adjusted the amount of the Minor Dependent Stipend to the former Nebraska Foster Care Pay “FC Pay” minimum rate effective May 24, 2018.

### **Mitigating the “Cliff Effect” and Eliminating Duplication in Public Benefits**

It is essential that young adults build a strong and stable foundation for adulthood. The B2i program exists to provide this foundation for young adults who are without families or a support network. The [2017 Annual Report](#) of the B2i Advisory Committee noted concerns regarding the “cliff effect” that may occur when the youth exits the B2i Program at age 21. The cliff effect can be especially destabilizing when a young adult is receiving other necessary benefits and services that may be impacted by the B2i stipend or asset limitations if the young adult has tried to begin building a safety net by investing or saving their B2i stipend money. This can be mitigated through case management, thoughtful use of existing programs, and providing information to young adults about available benefits and services. Individual Development Accounts (IDAs) are an existing program that can establish economic self-sufficiency in young adults. IDAs are special bank accounts that encourage savings, investment, and asset accumulation for low-income individuals and families by matching savings for first homes, education, or small businesses.

Independence Coordinators provide assistance in navigating existing public benefits programs to meet the needs of Young Adults and prevent duplication of services, including information about the impact of Bridge to Independence stipends on program eligibility, assistance in budgeting and finance management, as well as provide resources to Young Adults regarding the availability of CYI, IDAs and other community initiatives.

The evaluation of public assistance benefits accessed by Young Adults enrolled in Bridge to Independence is monitored in the DHHS Bridge to Independence CQI monthly slide deck. [See appendix \\_\\_ for more information.](#)

Commented [FA6]: To be attached

### **Title IV-E Funding**

The B2i Program is funded with a combination of State and Federal funding. One significant source Federal funding is Title IV-E funding, the largest source of federal funding available for child welfare. Nebraska’s utilization of Title IV-E has been declining as a proportion of its overall child welfare spending, which is in line with national trends. Nebraska faces several challenges in maximizing its use of Title IV-E funds for the B2i Program. Barriers noted in 2017 included Title IV-E income requirement of \$411/month or less, youth who reside or travel out of state making monthly IC visits difficult, timely and specific court order language, and a complex eligibility determination.

The B2i Advisory Committee is dedicated to working with DHHS-CFS to explore legal and policy changes to support utilization of Title IV-E funds.

### **Update on Title IV-E Data**

DHHS-CFS has already engaged in significant work to increase eligibility by changing the Title IV-E State Plan to allow the eligibility determination after the B2i eligible young adult has left the child welfare system, allowing the determination to be made based on the youth’s income and not the youth’s parental income.

Income Maintenance Foster care staff and DHHS-Division of Children and Family Services staff improved communication about Title IV-E eligibility by creating a spreadsheet of young adults who are pending eligibility determination or have been denied eligibility. This sheet communicates the next steps for staff on each young adult related to eligibility. This communication is expected to increase Title IV-E funding by allowing staff to take follow up steps to establish eligibility and identify common reasons for denial.

The current CQI process will collect data on the number of young adults who are currently employed, which has a significant impact on Title IV-E eligibility. The income limit for Title IV-E eligibility is \$411 a month, which is easily reached by a young adult working at a minimum wage job. Knowing this information will provide a more accurate idea of the number of young adults who can be expected to receive Title IV-E funding. DHHS-DCFS Bridge to Independence data indicates a steady progression of improved IV-E penetration as seen on page \_ of appendix \_.

The Workgroup will continue to work closely with DHHS to examine data related to Title IV-E penetration, and support program and process changes necessary to increase the number of young adults who are eligible for and receiving Title IV-E funding.

Commented [FA7]: To be attached

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## Participation and Enrollment

### Youth who Leave the B2i Program Early

Some youth do not remain in the B2i Program as long as the program is available which is until the age of 21. According to data collected through the DHHS CQI and the FCRO, the primary reason for early discharge was termination due to lack of cooperation with program requirements. In 2018, there have been seven young adults discharged due to lack of cooperation as of April 13, 2018. For the first quarter of 2018, this is slightly less than reported in 2017. The FCRO reported 38 young adults who were terminated for non-compliance during state fiscal year 2017.

In order to understand the experience and needs of young adults, this population should be carefully examined to understand what program changes or improvements can be made to improve outcomes for this group of young adults. The B2i Advisory Committee will partner with DHHS-CFS to examine and support this population.

### Living Arrangement Data

Safe and stable housing is essential to a successful transition to adulthood. The data collection workgroup identified that current N-FOCUS options do not reflect that young adults may be experiencing homelessness or be at risk of becoming homeless. The Workgroup agrees that this information must be tracked in order to ensure that young adults have their basic needs met, and can be referred to appropriate services. More information about this population can be reviewed in the Chapin Hall Brief [\*Missed Opportunities: Youth Homelessness in America\*](#).

Efforts have been made to include data regarding transient and/or homeless youth, including streamlining definitions for field Independence Coordinators to make categorical selections in the N-FOCUS documentation system. Progress has been made by the DHHS-CQI team as well as the FCRO in identifying living arrangements and the location of youth. See appendix \_\_\_ for more detailed information.

Commented [FA8]: To be attached

## **CHANGES TO ELIGIBILITY AND ELIGIBILITY CATEGORIES**

### Young Adults who are Incapable of Participating in either the employment or education Eligibility Programs

This eligibility category is defined as a young adult who is incapable of completing secondary education or an equivalency program, enrolled in a postsecondary or vocational education institution, employed for at least 80 hours a month, or participating in a program designed to promote employment or remove barriers to employment, due to a medical condition. Many may receive services through HCBS Waiver or may be eligible to receive case management services through a care coordinator employed by a Managed Care Organization (MCO).

The Bridge to Independence Advisory Committee's Finance and Policy Workgroup undertook a thorough analysis of the young adults who are served through the eligibility category of being "incapable of participating in either the employment or eligibility programs." Workgroup members examined the population currently enrolled in this eligibility category. As of March 2018, only 12 of the 266 current B2i participants were enrolled in or had at some point been enrolled in the Incapable of School or Employment eligibility category. Members agreed that no recommendation or revisions were needed for the incapable category at this time.

### Young Adults Who are Participating in a Program Activity Designed to Promote Employment or Remove Barriers to Employment

Understanding the young adults in this population is especially important, as they have been identified as needing additional support to enter the workforce. These young adults may have unmet needs, and more in depth examination is needed to understand why young adults enter on this eligibility category, how long they stay in this category, and what is needed to help move them to employment.

The Finance and Policy Workgroup discussed the best ways to both support young adult participants while still implementing strategies to promote responsibility. The group agreed that strategic coordination between the program and community resources was essential in cultivating success for B2i participants. Input from both the program field staff and workgroup members indicated that an increase in the required hours to remain enrolled in the Barriers program should be reflective of the requirements within the Employment category. The availability of qualifying activities and opportunities should also be taken into consideration when determining required hours for eligibility.

As a result, DHHS DCFS introduced draft changes to the language in [395 NAC 10-003.03C2](#) to reflect that “a young adult must participate in a program or activity or a combination of programs or activities described in item 1, above, for a minimum of 80 hours a month. Reasonable exceptions may be determined at the discretion of the Department based on the opportunities available in the geographical area of participant residence.” The workgroup and Bridge to Independence Advisory Committee will continue to monitor and support the progress of the proposed regulatory change.

**Commented [FA9]:** This is the language used by the workgroup in their recommendation. Actual language in the draft regulations will need to be verified.

### Young Adults Residing Outside of Nebraska

Young adults in the B2i program have accessed many exciting opportunities for travel, including study abroad, military stations, and supportive family members who live outside the state of Nebraska. This poses a challenge for the B2i program, as Independence Coordinators need to meet with the young adults for compliance with Title IV-E. Additionally, Independence Coordinators may be unfamiliar with the services and community resources available in that state, and have difficulty connecting the youth to needed resources. The Finance and Policy Workgroup will continue to explore options for this population, including courtesy supervision through the Interstate Compact on the placement of Children (ICPC) or Chafee services.

As of January 2018, 22 young adults in the B2i program reside outside of the state. While the B2i program serves as a valuable resource to its participants, it becomes more difficult when an Independence Coordinator is not familiar with the area the young adult resides. Efforts by DHHS are ongoing in attempting to utilize Interstate Compacts on the Placement of Children (ICPC) to support these young adults. The workgroup felt that if a residency requirement were to be implemented, then the definition would need to be very clear. There was agreement that residency should be defined as physical presence with an intent to remain, not to exclude students attending school outside of Nebraska who still claimed Nebraska residency.

**Recommendation 2:** Eligibility for the Bridge to Independence Program includes the requirement of Nebraska residency, not to exclude students attending school outside of Nebraska who still claim Nebraska residency.

## STRATEGIC GOAL 2: OUTCOME EVALUATION OF THE BRIDGE TO INDEPENDENCE PROGRAM

DHHS-CFS, the Nebraska Children and Families Foundation (NCFF), and the Foster Care Review Office (FCRO) have begun the process of designing an external evaluation for the B2i Program. The B2i population participates in evaluations and data collection from several different entities. This independent evaluation will be carefully designed to ensure that the outcomes for this population are clearly identified and determine correctly which measure will demonstrate whether young adults are making progress towards these outcomes.

### Purpose of Evaluation

The evaluation proposal outlines the below six questions as those that should be answered by the evaluation:

1. Does participating in B2i enhance young adult outcomes (education, employment, financial, housing, parenting, well-being) during the transition to adulthood, during the program, and after the program?
2. How does B2i case management and the stipend influence young adult outcomes during the program and after graduating from the program?
3. What young adult personal or life characteristics influence success in B2i? Is the program targeting the right population, do length of time in foster care, number of placement changes, substance use, or mental health challenges, impact success?
4. Do young adults who participate in B2i perceive they have gained knowledge, skills, and relationships in preparing to transition to adulthood?
5. Does case management at younger ages (<19 years) prepare young adults for the B2i program?
6. How is the B2i program being implemented in different communities, and what are the successes and challenges to implementing each program component?

### Evaluation Coordination

The current evaluation proposal has identified three components and the group recommends that they be undertaken in the order described below. The descriptions of each task are taken from the ChildTrend's Evaluation of Nebraska Extended Foster Care – Bridge to Independence Program Proposal dated November 16, 2017.

1. Outcome Analysis and Data Consultation

Description: This task includes a preliminary analysis of existing survey data, including that from the Outpatient Payment System (OPPS), National Youth in Transition Database (NYTD), and the Connected Youth Initiative (CYI) to determine if the data sets are useful in examining the above research questions. This process will result in a memorandum detailing tasks to accomplish during the study period.

2. Youth Assessment of Bridge to Independence Program and Other Supports and Services

Description: Child Trends researchers will assess how the B2i program is serving young people in Nebraska by conducting focus groups with young people in four Nebraska communities (two rural and two urban). A mix of young people will be invited to participate—both those who are currently participating in the B2i program (or other extended care activities) as well as those youth no longer participating in extended care activities. The qualitative study will identify promising strategies and generate lessons for the broader child welfare field through input from young adults about their perceptions of the B2i program as well as other available services and supports (whether the programs and services provided them with new knowledge, skills, and relationships), and reasons for staying in care or leaving care.

3. Develop Framework for Nebraska and Other States to Assess Extended Care.

Description: Develop a framework for Nebraska to use to conduct ongoing assessment of their extension of care program. In developing the framework, the research team will document the process paying close attention to how the framework and learnings in Nebraska can reach other states.

The Workgroup and Advisory Committee will continue to work on this evaluation and look forward to providing the Legislature, Governor, and stakeholders with more information to guide the work of supporting improved outcomes for Nebraska's young adults.

### **STRATEGIC GOAL 3: EXPANDING TO AND IMPROVING OUTCOMES FOR SIMILAR POPULATIONS**

The Bridge to Independence Advisory Committee has been charged by statute to create recommendations to expand the program or improve outcomes for similar groups of at risk young adults. Two key populations have emerged through analysis and collaboration:

1. Youth exiting Juvenile Probation out of home placement at age 19, and
2. Youth who have experience disrupted or terminated adoptions or guardianships.

Each Annual report since 2015 has included recommendations to expand the program to at risk youth exiting the juvenile justice system after having been in juvenile justice out-of-home placements.

According to the Office of Probation Administration, up to 60% of youth served through Juvenile Probation have prior child welfare system involvement. Juvenile justice involved youth with clear and demonstrated needs for support to prevent adult involvement with the criminal justice system, homelessness, and increased need for support programs would benefit from the Bridge to Independence program.

These recommendations informed last year's [LB179](#) (2017). LB179 did not get prioritized in 2018, and the Bridge to Independence Advisory Committee will continue to support expansion and work with the Legislature, Governor's Office, and stakeholders to ensure that all young adults are able to grow and thrive in Nebraska.

The B2i Advisory Committee has identified youth who achieved permanency in guardianships or adoptions, but have later experienced the breakdown of the permanency through disruption or termination as an at-risk population that should be served by the B2i Program. The B2i Advisory Committee will work to refine this recommendation, including understanding the fiscal impact and population of youth.

## SUMMARY AND RECOMMENDATIONS

The priorities of 2018 have been focused on duplicative services for young adults enrolled in the B2i program, enhancements to eligibility and eligibility categories, external evaluation and data analysis. Much work of the Bridge to Independence Advisory Committee occurs in two subgroups:

1. Evaluation and Data Collection Workgroup, and
2. Finance and Policy Workgroup.

The Bridge to Independence program has been implemented since 2014, and is in a state of ongoing evaluation and assessment to improve outcomes for young adults through collaboration and continuous quality improvement. Enrollment has steadily increased each year. Title IV-E penetration rates have increased in the last 12 months. Progress is being made towards acquiring an external evaluation to guide the program further. More work must be done to better serve youth with developmental disabilities through available resources, and to collaborate for at-risk juveniles who are in out of home placement at age 19.

The Bridge to Independence Advisory Committee will continue to explore what is working within the current program, how best to expand, using current data and analytics available. The Committee will continue meeting in 2018 and 2019 to continue exploring the areas identified in this report to monitor the B2i Program, support DHHS-CFS, and provide information and recommendations to the Nebraska Children's Commission, Governor, Legislature, and DHHS.

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### RECOMMENDATIONS

The Legislature has charged this group with mentoring the Bridge to Independence Program. DHHS-CFS, service providers, youth advocates, system stakeholders and current and former foster youth provide regular feedback and updates. The Advisory Committee strives to serve as a forum for stakeholders to exchange information, provide support, and create innovative solutions to the challenges facing youth aging out of child welfare out-of-home placements. As such, the following recommendations are as follows:

STATUTORY RECOMMENDATIONS	
Recommendations	
1.	Young Adults enrolled in the Bridge to Independence program and whose residence is paid for by Medicaid under a HCBS Wavier will not receive a Bridge to Independence stipend.
2.	Eligibility for the Bridge to Independence Program includes the requirement of Nebraska residency, not to exclude students attending school outside of Nebraska who still claim Nebraska residency.
3.	Bridge to Independence Statutory Committee amendments, if any.

PROGRAMMATIC RECOMMENDATIONS	
Strategies	Status
4. DHHS- DCFS regulatory change: Increase employment requirements from 40 hours per month to 80 hours per month. <a href="#">395 NAC 10-003.03C2</a>	In Progress
5. Young adults in the Bridge to Independence Program who are receiving services paid for by Medicaid, under a HCBS waiver, will receive case management that is coordinated across the two programs. A structured process will be developed to ensure these young adults access the needed services. An assessment will be undertaken to understand the needs of the young adult. A plan will be created based on this assessment to ensure access to needed services and case management without any duplicative services. <i>This recommendation is dependent on the statutory change proposed in Recommendation 1.</i>	Under Review

SYSTEMIC RECOMMENDATIONS	
Strategy	Status
6. The B2i population participates in evaluations from several different entities, along with data being collected by several entities. The independent evaluation will be carefully designed to ensure that the outcomes for this population are clearly identified and determine correctly which measure will demonstrate whether young adults are making progress towards these outcomes. The B2i Advisory Committee Evaluation and Data Collection Workgroup will focus on coordinating and providing feedback on the external evaluation. The workgroup will review and guide data that exists from other organizations that are provided to the B2i Committee.	In Progress

### Bridge to Independence and Comprehensive Developmental Disabilities Waiver Walk Through

	Bridge to Independence Program	Comprehensive Developmental Disabilities Waiver
<b>Federal Authorization</b>	<a href="#">Fostering Connections to Success and Increasing Adoptions Act</a>	<a href="#">§1915(c) of the Social Security Act</a> 42 U.S.C. 1396n §1915(c)
<b>State Statute</b>	Neb. Rev. Stat. §43-4501 to 43-4514	Neb. Rev. Stat. §83-1202 to 83-1227
<b>Advisory Body</b>	Bridge to Independence Advisory Committee	Advisory Committee on Developmental Disabilities; Nebraska Planning Council on Developmental Disabilities
<b>Legislative Intent</b>	The purpose of the Young Adult Bridge to Independence Act is to support former state wards in transitioning to adulthood, becoming self-sufficient, and creating permanent relationships. The bridge to independence program shall at all times recognize and respect the autonomy of the young adult. Nothing in the Young Adult Bridge to Independence Act shall be construed to abrogate any other rights that a person who has attained nineteen years of age may have as an adult under state law.	It is the intent of the Legislature that: (1) All persons with developmental disabilities shall receive services and assistance which present opportunities to increase their independence, productivity, and integration into the community; (2) All persons with developmental disabilities shall have access to a full array of services appropriate for them as individuals; (3) All persons with developmental disabilities shall have a right to live, work, and recreate with people who are not disabled; (4) All persons with developmental disabilities shall be served in their communities and should only be served by specialized programs when their needs cannot be met through general services available to all persons, including those without disabilities; (5) All persons with developmental disabilities shall have the right to receive age-appropriate services consistent with their individual needs, potentials, and abilities; (6) All persons with developmental disabilities shall be afforded the same rights, dignity, and respect as members of society who are not disabled; and (7) Persons who deliver services to persons with developmental disabilities shall be assured a uniform system of compensation and training and a full range of work-site enhancements which attract and retain qualified employees
<b>State Regulation</b>	<a href="#">395 NAC 10</a>	<a href="#">Title 202 NAC 1; Title 207 NAC 1; and Title 404 NAC</a>
<b>Nebraska Residency Requirement</b>	No	Yes
<b>Open Court Docket</b>	Yes, docket remains open for youth to have review hearings with Judge	No open court docket to address specifically waiver services. Individual may file a petition for a judicial review after conclusion of the Developmental Disabilities hearing process (Neb. Rev. Stat. §83-1224)
<b>Review</b>	Foster Care Review Office conducts reviews every six months. A FCRO staff member does a paper file review as well as contacting or attempting to contact the young adult. This review includes data collection, advocacy for the young adult, and recommendations for systemic improvement.	
<b>Funding</b>	General Funds and Title IV-E	General Funds and Medicaid
<b>Medicaid Payment</b>	Medicaid does not pay for B2i Services, although young adults may apply to Medicaid.	Medicaid pays for DD services under home and community-based services (HCBS) Waivers.

	<b>Bridge to Independence Program</b>	<b>Comprehensive Developmental Disabilities Waiver</b>
<b>Eligibility</b>	<p>The bridge to independence program is available, on a voluntary basis, to a young adult: (1) Who has attained at least nineteen years of age; (2) Who was adjudicated to be a juvenile described in subdivision (3)(a) of section 43-247 or the equivalent under tribal law and (a) upon attaining nineteen years of age, was in an out-of-home placement or had been discharged to independent living or (b) with respect to whom a kinship guardianship assistance agreement was in effect pursuant to 42 U.S.C. 673 if the young adult had attained sixteen years of age before the agreement became effective or with respect to whom a state-funded guardianship assistance agreement was in effect if the young adult had attained sixteen years of age before the agreement became effective; and (3) Who is:</p> <p>(a) Completing secondary education or an educational program leading to an equivalent credential; (b) Enrolled in an institution which provides postsecondary or vocational education; (c) Employed for at least eighty hours per month; (d) Participating in a program or activity designed to promote employment or remove barriers to employment; or (e) Incapable of doing any of the activities described in subdivisions (3)(a) through (d) of this section due to a medical condition, which incapacity is supported by regularly updated information in the case plan of the young adult.</p>	<p>To be eligible for DD Services, an applicant must (1) Be a citizen of the United States of America or a qualified aliens under the federal immigration and Nationality Act and be lawfully present in the United States; (2) Be a resident of the State of Nebraska; (3) Have a developmental disability.</p> <p>To be eligible for the waiver, the applicant must: (1) Submit an application; (2) Be eligible for Medicaid in accordance with 477 NAC; (3) Meet the definition of a developmental disability as determined by the Department in accordance with Neb. Rev. Stat. §83-1205; (4) Meet institutional level of care criteria initially and annually thereafter; (5) Elect to receive Medicaid home and community based waiver services as an alternative to institutional placement; (6) Have a physical health screen within the past 12 months and annual thereafter; and (7) Accept Service Coordination service.</p> <p>Developmental disability, as defined in Neb. Rev. Stat. § 83-1205, means: a severe, chronic disability, including an intellectual disability, other than mental illness, which:</p> <ol style="list-style-type: none"> <li>(1) Is attributable to a mental or physical impairment unless the impairment is solely attributable to a severe emotional disturbance or persistent mental illness;</li> <li>(2) Is manifested before the age of twenty-two years;</li> <li>(3) Is likely to continue indefinitely;</li> <li>(4) Results in substantial functional limitations in one of each of the following areas of adaptive functioning: <ol style="list-style-type: none"> <li>(a) Conceptual skills, including language, literacy, money, time, number concepts, and self-direction;</li> <li>(b) Social skills, including interpersonal skills, social responsibility, self-esteem, gullibility, wariness, social problem solving, and the ability to follow laws and rules and to avoid being victimized; and</li> <li>(c) Practical skills, including activities of daily living, personal care, occupational skills, healthcare, mobility, and the capacity for independent living; and</li> </ol> </li> <li>(5) Reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.</li> </ol> <p>An individual from birth through the age of nine years inclusive who has a substantial developmental delay or specific congenital or acquired condition may be considered to have a developmental disability without meeting three or more of the major life activities described in subdivision (4) of this section if the individual, without services and support, has a high probability of meeting those criteria later in life.</p>

	<b>Bridge to Independence Program</b>	<b>Comprehensive Developmental Disabilities Waiver</b>
<b>Waitlist</b>	No waitlist for eligible young adults currently	Yes (Priority Waitlist as per Neb. Rev. Stat. §83-1216): (4) The priorities for funding the Medicaid home and community-based services waivers under this section are as follows: (a) The first funding priority of the state shall be responding to the needs of persons with developmental disabilities in immediate crisis due to caregiver death, homelessness, or a threat to the life and safety of the person; (b) The second funding priority of the state in responding to the needs of persons with developmental disabilities shall be for persons that have resided in an institutional setting for a period of at least twelve consecutive months and who are requesting community-based services; (c) The third funding priority of the state in responding to the needs of persons with developmental disabilities shall be for serving wards of the department or persons placed under the supervision of the Office of Probation Administration by the Nebraska court system who are transitioning upon age nineteen with no other alternatives as determined by the department to support residential services necessary to pursue economic self-sufficiency; (d) The fourth funding priority of the state in responding to the needs of persons with developmental disabilities shall be for serving persons transitioning from the education system upon attaining twenty-one years of age to maintain skills and receive the day services necessary to pursue economic self-sufficiency; and (e) The fifth funding priority of the state in responding to the needs of persons with developmental disabilities shall be for serving all other persons by date of application.
<b>Grievance Process</b>	Yes	Yes Neb. Rev. Stat. §83-1219 A person with developmental disabilities or his or her parent or guardian may initiate a hearing on matters related to the initiation, change, or termination of or the refusal to initiate, change, or terminate the determination of eligibility for specialized services or the evaluation or placement of the person or the provision of specialized services or records relating thereto. A copy of the procedures specified in rules and regulations of the department for complaints and hearings under this section shall be provided to such persons who are receiving specialized services or their parents or guardians. The hearing shall be initiated by filing a petition with the department.
<b>Income Limits</b>	No	No. A person who does not qualify for Medicaid may have an Ability to Pay for DD services, as outlined in Title 202 NAC.
<b>Pay for Services</b>	No. The youth is provided a stipend, and the Independence Coordinator connects the youth to resources in the community to meet the needs of the youth. The young adult is responsible for any premiums, copayment, share of costs, or other costs relating to accessing services.	Yes. An objective needs assessment is completed. Assessment results are translated into an Individual Budget Amount (IBA), which is the annual amount a participant may use to purchase DD services.

	<b>Bridge to Independence Program</b>	<b>Comprehensive Developmental Disabilities Waiver</b>
<b>Case Management</b>	Yes – provided by an Independence Coordinator. Case management is defined as “support provided by the Department to a young adult to complement his/her own efforts towards self-sufficiency.” 395 NAC 10-002. As per statute this may include assisting the youth to access resources to obtain employment, identification, bank services, juvenile court sealing, secondary education, vocational and post secondary education, apply for immigration relief, create a health care power of attorney or health care proxy, obtain health and education records, apply for public benefits and assistance, maintain relationships with individuals who are important to the young adult, including searching for individuals, access information about relatives, access young adult empowerment opportunities, and access pregnancy and parent resources and services.	Yes – provided by a Service Coordinator. Services coordination is defined as “activities conducted on behalf of individuals with developmental disabilities and their families to help them access developmental disability services and other services not funded by the Department. Service coordination ensures that services are responsive to the preferences and needs of the individual and that services promote the independence, interdependence, productivity, and inclusion of individuals receiving services. In Nebraska’s home and community-based waivers for persons with developmental disabilities, service coordination is referred to as case management.” 404 NAC 2 A Service Coordinator will: Work directly to develop a service plan based on wants and needs; Complete referrals for DD agency providers and assist with visits and transition plans; Help preferred DD independent provider to enroll; Help access services not funded by DD, such as Medicaid, SSI, and SNAP; Help identify and access community resources; Hold meetings every six months, at a minimum, to help participants work toward life goals; Complete monitoring of the plan to ensure implementation and adequately addressed needs; Follow up with participant to ensure needs are being met; Follow up with any legal representative and, as requested, family; Adjust service plan and services when changes are necessary for success; Help advocate for what the participant wants and needs from service provider(s), family, and community; and •Ensure services promote independence, productivity, and inclusion.
<b>Team</b>	Independence Coordinator and individuals of the young adult’s choice.	Individual Support Plan Team is coordinated by the Service Coordinator. The Team includes the participant, Service Coordinator, any DD providers whose services are used, and the guardian, if applicable. The participant can also invite any other family, friends, or organizations who support them.
<b>Contact with Case Manager</b>	In person meeting every thirty days	Service coordination must have a billable contact at least monthly with each participant.
<b>Employment Services</b>	Not provided by the program, IC can connect young adult with resources	Yes, in addition to connecting participants to resources. All DD participants must apply for and use benefits from Vocational Rehabilitation, when eligible. DD day services focus on finding employment and increasing skills needed to join the workforce. Services include prevocational services, supported employment, habilitative workshops, and habilitative community inclusion.
<b>Medicaid Services</b>	A young adult who is enrolled in the B2i Program will receive medical assistance through Nebraska Medicaid, if eligible. IC can assist young adult with applying for Medicaid	To help maximize federal funding, all DD participants must apply for and accept federal Medicaid benefits. When necessary, a Service Coordinator can assist a participant with applying for Medicaid. Service Coordination will also assist a participant to maintain Medicaid by taking actions upon receiving an alert that Medicaid will be lost for any reason.
<b>Requirement to Apply for other Services</b>	No	Yes - “It is the intent of the Legislature that the department take all possible steps to maximize federal funding. All Nebraska residents eligible for funding for specialized services through the department shall apply for and accept any federal Medicaid benefits for which they may be eligible and benefits from other funding sources within the department, the State Department of Education, specifically including the Division of Rehabilitation Services, and other agencies to the maximum extent possible.” <a href="#">Neb. Rev. Stat. §83-1216</a>
<b>Stipend for Individual</b>	Yes. Financial support is provided in the form of continued foster care maintenance payments.	No

	<b>Bridge to Independence Program</b>	<b>Comprehensive Developmental Disabilities Waiver</b>
<b>Stipend for Dependents</b>	Yes	No
<b>Residence Payment</b>	No	No – DD does not pay for room and board. DD may pay for residential services provided to help participants learn independent living skills and increase access to the community. Residential services may occur in a participant’s own home or apartment, family home, or a provide-operated location.
<b>Assessment</b>	National Youth in Transition Database	Needs are assessed using the ICF/DD level of care criteria. An objective assessment is also used to determine DD funding amount.
<b>Services Provided</b>	Case management, monthly meetings, court hearings, Foster Care Review Office Reviews, connection to resources, stipend.	Developmental Disabilities provides Service Coordination to coordinate and oversee the delivery of effective services.  The following DD services are approved to be paid to providers: Adult Companion Service; Adult Day Services; Assistive Technology; Consultative Assessment Service; Crisis Intervention Support ; Environmental Modification Assessment ; Habilitative Community Inclusion; Habilitative Workshop; Home Modifications; Homemaker Services; In-Home Residential Habilitation; Personal Emergency Response System (PERS); Prevocational Services; Residential Habilitation; Respite Service; Supported Employment – Enclave; Supported Employment – Follow Along; Supported Employment – Individual; Transitional Services; and Transportation.