

Stay Well, Stay Working

Minnesota's Demonstration to Maintain Independence and Employment

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What is Stay Well, Stay Working?

- A research and health care initiative
- Funded by the Centers for Medicare and Medicaid Services (CMS)
- Began September 2006
- Funded through September 2009

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Purpose of Stay Well, Stay Working

- To test the effects of access to a comprehensive and coordinated set of health care and employment-based supports on employed individuals with serious mental illness
- To determine how these supports influence or prevent individuals from becoming disabled

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Examples of Applicant Diagnoses

- Schizophrenia
- Bipolar disorder
- Major Depressive disorder
- Generalized Anxiety disorder
- Obsessive Compulsive disorder

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Design Basics

- Population was employed individuals with serious mental illness (up to 1500)
- Hennepin, Ramsey, Anoka, Dakota, St. Louis, Lake, Pine, and Carleton counties
- Health care services that were comparable to the Medical Assistance Program

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Eligibility Requirements

- Ages 18-60
- Employed at least 40 hours per month (including self-employment) and earning at least \$5.85/hour
- Certified by a mental health professional as having a serious mental illness
- Not be certified as disabled by the Social Security Administration or the State Medical Review Team (SMRT)
- Pay a flat monthly premium of \$10

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- Provide Medicaid medical benefit set
- Establish project network
- Implement/coordinate project
- Develop materials-”Health Planner”
- Develop protocols
- Coordinate training
- Process encounter/claims data

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BH Services – Medica Behavioral Health

- Assist finding needed OP treatment
- Inpatient stabilization if necessary
- Partial hospitalization
- Day treatment
- Crisis stabilization
- Coordinate with WEN
- Referral for ARMHS services

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EAP Services-Optum

- Telephonic consultation
- Crisis assessment-not used
- Referral for legal/financial assistance-critical
- Face to face consultation
- Employment support
- Coordinate with WEN (Wellness Navigator)
- Workshops-budgeting, \$ management

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WEN Services-Resource, Inc.

- Complete initial assessment face to face
- Help enrollee complete WESP-concrete goals
- Explain range of services available
- Refer enrollee to needed services
- Monitor & follow-up (in person/phone/email)
- Provide brief counseling
- Top issues-jobs/health status/behavioral concerns

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EASE Services-Resource, Inc.

- For high risk enrollees
- Career counseling
- Work place visits
- Off-site employment assistance
- Employer/Coworker education
- Family education around work issues
- Coordinate with WEN
- 25% of participants accessed EASE

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WRAP Services-Consumer Survivor Network

- Teach WRAP skills to enrollees
- Provide peer support 1-1 or in group
- Coordinate peer support when requested
- WRAP=Wellness Recovery Action Plan
- Less utilization than expected

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Outreach and Recruitment

- Mailings of program description and application were sent to **20,491** individuals
- **3,973** applicants
- **1,794** enrollees: **1,494** intervention, **300** control
- Reason denied: majority of denials due to individuals not working.

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Participant Characteristics

- **61%** Female, **82%** white
- Average GAF score: **56.75**
- Average monthly income: **\$1585**
- Marital Status: **9%** married/living with someone, **26%** divorced/separated, **1%** widowed, **59%** never married
- Education: **29%** some college/2 year degree; **13%** college grad; **43%** high school diploma/GED; **4%** more than college
- Housing: **65%** rent, **15%** own home

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Participant Characteristics: Examples of Job Types

- | | |
|--|------------------------|
| ▪ House cleaning | ▪ Adjunct professor |
| ▪ Clerical support | ▪ Program coordinator |
| ▪ Bus driver | ▪ Manager |
| ▪ Food service | ▪ Artist |
| ▪ Delivery driver | ▪ Landscaper |
| ▪ Telemarketing/customer service | ▪ Machinist |
| ▪ Licensed practical nurse/personal care assistant | ▪ Nanny |
| | ▪ Sales/Retail |
| | ▪ Hair Stylist |
| | ▪ Mental Health Worker |

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Mental Health Diagnoses

- 52% Depressive Disorders
- 18% Anxiety Disorder
- 14% Bipolar Disorders
- 5% Adjustment Disorder
- 2% Attention Deficit Disorder
- 3% Substance Abuse Disorder*****
- 2% Schizophrenia
- 4% Other (e.g., Eating Disorders)

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Health/Mental Health Issues: Survey Responses

- 91% report depression
- 71% report anxiety disorder
- 57% report chronic fatigue/low energy
- 53% report chronic sleeping problems
- 40% report problem with alcohol or drugs
- 25% report being obese

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Primary Findings:

Before enrolling in SWSW, service use patterns were similar for people in both Intervention and Control groups

Post-enrollment, health services utilization increased for intervention group and decreased for control group

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Intervention Group:

Increased OP Health Services=84%
Increased BH services=26%
Increased BH physician services=52%
Increased Pharmacy use=50%
Increased Dental services=168%

Findings Continued:

Less likely to apply for SS benefits 4% vs. 14%
Increase in earnings and job stability \$2374 vs. \$1549
Less medical debt
Lower bankruptcy rates
Less likely to delay needed care
Greater improvement in ADLs

Findings continued:

Improved mental health status-SF 12
More likely to access preventive care (mammograms/eye and dental exams)
More likely to engage in health promotion
Greater improvement in Quality of Life (financial and health status)

Case Study Characteristics

- Edith-F-60s-Metro-2yr.Degree-MDD
- Ben-M-40s-Metro-College-MDD
- Emily-F-20s-Duluth-High School-Dysthymia
- Sam-M-40s-Metro-2yr.Degree-SchizoAffective
- Jane-F-50s-Metro-PostGrad-MDD
- Sarah-F-30s-Duluth-College-PTSD/MDD

Participant Outcomes

	MSC1	MSC2	Income1	Income 2
• Edith	42.71	48.6	\$17,000	\$21,000
• Ben	25.08	34.15	\$25,000	\$30,000
• Emily	22.34	34.52	\$18,000	\$24,000
• Sam	28.13	38.0	\$15,000	\$18,000
• Jane	33.71	35.63	\$15,000	\$26,000
• Sarah	21.20	56.48	\$15,000	\$26,500

Case Study-Sarah

- MH issues since childhood-PTSD/MDD
- Variety of jobs
- Quality of life-very negative-health and \$\$\$
- What happened: WEN and EASE
- Consistent therapy and meds
- Financial counseling
- Raise at job; new job/more\$/more hours
- Followed by another new job-more \$
- Increased Quality of Life-job, social ,financial, general health

Case Study-Edith

- Numerous health issues-diabetes, sleep apnea, high blood pressure, bad knee, MDD
- On numerous medications
- Telemarketing-not challenged; homeless
- What happened: WEN and EASE
- Knee surgery; more physically active
- Added work hours; increased salary
- Therapy and good medication compliance
- “Working makes me feel good about myself”

Case Study-Sam

- Long history of MI-SchizoAffective
- History of unstable employment
- What happened: WEN and EASE
- Goals: Take meds consistently; go to gym; eat better; save \$100/month
- Regularly took his (3) medications
- Increased productivity at work-more \$
- Consistent use of preventive services-dental

Prior to Program Entry

- “When I needed dental work, I’d go tooth to tooth based on which one was worst”
- “I had to make choices between different medications, I chose BP meds over my mental health medications”
- “My employer required a \$2500 deductible, so I stopped taking my meds; I lost my stability and my job”
- “The system does not recognize that there are MI people who actually want to improve their lives”

WEN Impact

- “You can never get enough accountability, I look forward to meeting with my WEN. My life has been transformed, I’ m more confident”
- “My WEN gave me the power to advocate for myself. I was reminded I have choices and can ask questions about my care”
- “Since I’ ve been on SWSW, I’ ve been more proactive. My WEN really helped me. I was never really interested in learning how to manage my mental health before”

Final Comments

- “This program covers every aspect of what a person needs, without health you can’ t do your job”
- “Paycheck therapy is better than work therapy, I feel so much better when I’ m working”
- “I have contemplated applying for SSDI, but I have the potential and desire to work. Before SWSW, it was hard to get insurance and to keep a job”
- “SWSW program offers a hand up instead of a hand out”
- “I’ m no longer settling. I’ ve increased my own expectations for my quality of life. I realize now that I deserve to thrive”

More Information:

staywellstayworking.com

THANKS FOR COMING!

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