

Positive Outcomes for Students with Intellectual Disability Attending College : Why Medicaid Waivers Should Provide Support

By Paige Parisi and Julia Landau

The opportunity for individuals with intellectual disability (ID) to participate in postsecondary education (PSE) using Medicaid Home and Community Based Services (HCBS) waivers could greatly improve their likelihood of employment, as well as opportunities to experience greater community inclusion, personal satisfaction, and decreased reliance on publicly provided support services. Students in at least nine states have already used HCBS waivers as a funding source for service and supports while in college.¹

Given the positive outcomes of PSE possible for individuals with ID, more states should consider allowing HCBS waiver participants the option to use waiver support to participate in PSE. These positive outcomes are similar to the well-established higher employment rates for people without disabilities who attend college. However, opportunities to obtain PSE are limited for young adults with ID because there are not enough institutes of higher education that support this population of learners. Of those that do, only one third are approved Comprehensive Transition Programs, which enable students to apply for federal student aid (i.e., FAFSA). Since most students with ID are thus not eligible for FAFSA loans, college is usually an option only for those who can afford to pay privately. Making Medicaid waiver funding available would allow more students with ID the option to attend college and the potential for improving their life outcomes (Parisi & Landau, 2019).

COST SAVINGS TO STATES

Although research is limited, there is evidence to suggest that students with ID who participate in PSE

¹DE, CA, MI, NC, NJ, NY, OH, PA, VT. The District of Columbia intends to begin waiver support in 2020.

use fewer government support services after exiting college. A study of over 9,000 young adults with ID who received vocational rehabilitation (VR) services found that individuals who participated in PSE earned higher wages. As a result, they used 31% fewer government services than individuals with only a high school education. Although the cost of VR was higher for individuals while attending college, these higher costs were relatively minor compared to the lifetime of cost savings in government assistance that resulted. Research shows that the VR costs would be mitigated in just a couple of years (Cimera, Thoma, Whittenburg, & Rulh, 2018).

The opportunity for individuals with intellectual disability to participate in postsecondary education using Medicaid waivers could decrease reliance on publicly provided support services.

Research also indicates decreased reliance on Supplemental Security Income (SSI) benefits for individuals with ID who participated in PSE. A review of federal data from 2008–2013 found that individuals with ID who had accessed PSE decreased their reliance on SSI benefits by an average of \$76.98 monthly (Sannicandro, 2016).

Data also reflect long-term reductions in Medicaid waiver costs for individuals with ID who participate in PSE. For one California higher education program, participants were using 30 fewer hours of waiver services per month ten years after exiting the college program. This amounted to cost reductions of over \$22,000 per individual annually (Ross, Marcell, Williams, & Carlson, 2013).

Students also used fewer waiver services while enrolled in PSE. Students in North Carolina had a 56% average decrease in Medicaid supports while enrolled in a college program (North Carolina Department of Health and Human Services, 2017).

Investing in programs that improve employment outcomes for people with disabilities can also result in lower public expenditures on health care. Health care costs are lower for employed vs. unemployed individuals generally (Goodman, 2015). Medicaid claims have also been shown to decrease when people with disabilities are employed. People with disabilities enrolled in the Utah Medicaid Work Incentive program (MWI) had 57% lower Medicaid expenditures compared to people with disabilities not enrolled in MWI (i.e., not employed) (Chambless, Nelson, & McCormick, 2010). For people with disabilities enrolled in the Kansas Medicaid Buy-In program, any level of employment was associated with better health status and lower health-care costs. (Hall, Kurth, & Hunt, 2013).

EMPLOYMENT FIRST

Investing in efforts that increase community-based, integrated employment opportunities for people with disabilities is a priority in virtually every state, and is endorsed by policies and practices outlined by the U.S. Department of Labor, collectively known as Employment First. Publicly financed systems are urged to align policies to commit to competitive integrated employment as the priority for day and employment services for people with disabilities. Because PSE can increase the likelihood of employment, efforts by state Medicaid authorities to increase access to PSE promote Employment First priorities.

IMPROVED EMPLOYMENT OUTCOMES

In the United States, the employment rate for people with ID receiving state developmental disability services is 19% (Grigal, Papay, Smith, Hart, & Verbeck, 2018). However, for students with ID who complete a federally funded PSE program, the employment rate is more than three times higher (65%) (Grigal, Hart, Smith, Papay, & Domin, 2018).

Data collected from a variety of case studies support

Because postsecondary education can increase the likelihood of employment, it aligns with the goals of HCBS waivers and Employment First policies.

higher employment outcomes for individuals with ID who participate in PSE.

- 84% of graduates from a California community college program for students with ID were employed ten years after graduation (Ross et al., 2013).
- 86% of all graduates from Vermont PSE programs for students with ID were employed within four months of graduation (Vermont Developmental Disabilities Services Division, 2017).
- 62% of students from a North Carolina university program were employed six months after graduation (North Carolina Department of Health and Human Services, 2017).
- PSE programs in Connecticut and Maryland demonstrated employment rates of 83% and 72%, respectively, for students exiting the program. (Grigal & Dwyre, 2010).
- 75% of students with ID from seven PSE programs in Ohio were employed after exiting the program (Ohio Statewide Consortium, 2014–2018).

There is also growing evidence that PSE improves the quality of economic outcomes for people with ID in terms of higher wages and access to jobs not traditionally held by people with ID.

- Studies show that individuals with ID who participated in PSE worked nearly 50% more hours per week than those with only a high school education and earned \$80–95 more per week (Cimera et al., 2018; O’Neill, Kang, Sanchez, Muller, Aldrich, Pfaller, & Chan, 2015).
- Individuals with PSE were four times more likely than those without PSE to obtain employment in fields not traditionally held by someone with ID (Sannicandro, 2016).
- Rehabilitation Services Administration data show that VR recipients who received PSE support earned 44% more than recipients who received other services (Smith, Grigal, & Shepard, 2018).

COMMUNITY INCLUSION

PSE increases community inclusion for individuals with ID, providing opportunities to meet another important goal of HCBS waivers. In PSE programs, inclusion is facilitated in a variety of environments. Students take classes with peers without disabilities, have meals in dining halls, study in the libraries, and partake in social activities on a college campus, a naturally inclusive setting. On average, students in an inclusive PSE program spend approximately 75% of their time in activities, classwork, and leisure with nondisabled peers (Moore & Shelling, 2015). Peer mentors create further inclusive opportunities for students with ID. In addition to classroom and tutoring support, peer mentors facilitate social networking and opportunities to participate in community-based sports and social activities (Workman & Green, 2019).

PERSONAL SATISFACTION

Studies have found that personal satisfaction of individuals with ID improves for those who participate in PSE. Students with ID who participated in inclusive PSE have reported increased satisfaction in terms of interpersonal relationships, personal development, self-determination, feelings of dignity, and social inclusion (Hughson, Moodie, & Uditsky, 2006).

91% of former students nationally reported being satisfied or very satisfied with their social life (Grigal & Hart, 2018).

Students who attended PSE in Kentucky reported higher rates of activities such as going out to eat (90%), attending a religious service (67%), and exercising regularly (74%); and over 84% had gone on a vacation in the last year (Sheppard-Jones, Kleinert, Butler, & Whaley, 2018).

CONCLUSION

Lack of employment contributes to the the exclusion of people with disabilities from full community participation. It also affects upward mobility, quality of life, and well-being. However, individuals with ID who participate in PSE are more likely to be employed and earn more per hour than their peers who do not

participate in PSE. They also have improved outcomes in other areas of their lives.

Given the scarcity of public funds and the goals of HCBS waivers and Employment First policies, state developmental disability agencies can meet HCBS objectives by using Medicaid waivers to support individuals with ID in college. Although PSE may not be appropriate for every young adult with ID, it should be an option available given the positive outcomes.

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