



# Interagency Agreement on Transition

## **Interagency Agreement on Transition**

*Wisconsin Department of Health Services*

*Wisconsin Department of Workforce Development | Division of Vocational Rehabilitation*

*Wisconsin Department of Public Instruction*

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**Wisconsin Department of Public Instruction**  
*Division of Learning Support: Special Education Team*

**Wisconsin Department of Workforce Development**  
*Division of Vocational Rehabilitation*

**Wisconsin Department of Health Services**  
*Divisions of Medicaid Services, Care and Treatment Services, and Public Health*

**INTRODUCTION**

This Interagency Agreement (IA) has been updated from the 2010 version to reflect changes under the Workforce Innovation and Opportunity Act (WIOA), the Centers for Medicare & Medicaid Services (CMS) Home and Community Based Services (HCBS) Final Settings Rule, and the 2017 Wisconsin Act 178.

The Department of Public Instruction (DPI), Department of Workforce Development (DWD) Division of Vocational Rehabilitation (DVR), and Department of Health Services (DHS) have the primary responsibility for providing services to students and youth with disabilities. This agreement outlines a plan to coordinate activities and programs within each agency to support positive transition into competitive integrated employment (CIE). This agreement is intended to support successful transition from childhood to adulthood for Wisconsin residents with disabilities.

**PURPOSE**

This IA addresses interagency agreement mandates found in the Individuals with Disabilities Education Act (IDEA), WIOA, the Rehabilitation Act, and CMS waiver regulations to promote the creation of state, county, and provider coalitions.

This IA is intended to clearly define necessary relationships, communication, and procedures between DPI, DWD-DVR, and DHS to establish collaborative efforts for service delivery to improve CIE outcomes for individuals with disabilities. This agreement also includes elements of the CIE Plan required under 2017 Wisconsin Act 178 legislation.

**AUTHORITY AND SCOPE**

*Individuals with Disabilities Education Act*

34 CFR Sec. 300.154 Methods of ensuring services.

- (a) Establishing responsibility for services. The Chief Executive Officer or designee of that officer must ensure that an *interagency agreement* or other mechanism for interagency coordination is in effect between each non-educational public agency.

*Workforce Innovation and Opportunity Act*

Sections CFR 397.20 and 397.30 require DWD-DVR, in collaboration with schools or local education authorities, to provide a specified set of transition services to students with disabilities ages 14 to 21.

Pre-Employment Transition Services (Pre-ETS) categories in WIOA include:

- **Job exploration** counseling,
- **Work-based learning** experiences (which may include in-school or after school opportunities and experiences outside the traditional school setting, including internships, that are provided in an integrated environment),
- Counseling on opportunities in comprehensive transition or enrollment in **postsecondary education and training programs**,
- Workplace readiness training to develop **social and independent living skills**, and
- **Instruction in self-advocacy**, which can include peer mentoring.

34 CFR Sec 361.53 (d) (1) Interagency Coordination. The vocational rehabilitation program and other appropriate agencies, will ensure that an interagency agreement or other mechanism for interagency coordination takes effect between the designated State vocational rehabilitation unit and any appropriate public entity, including the State entity responsible for administering the State Medicaid program.

### *Home and Community Based Waiver Services (HCBS)*

The DHS Division of Medicaid Services (DMS), and Division of Care and Treatment Services (DCTS), programs provide access to the community, including supported employment, funded through Medicaid waivers.

The DHS Division of Public Health's Children and Youth with Special Health Care Needs (CYSHCN) Program supports five Regional Centers for CYSHCN and the Youth Health Transition Initiative funded through the Title V Block Grant. Regional Centers provide information and referral information to families and providers regarding available supports and services.

DHS-DMS, under the authority of CMS, may provide community-based services and supports to eligible individuals as an alternative to institutional placement. These programs are administered and funded through Medicaid, counties, and/or Managed Care Programs (Family Care, Family Care Partnership, IRIS) for individuals with disabilities 18 and older.

The range of mental health and substance abuse services and supports available through DCTS also funded by federal, state, and local sources, is broader than those delivered through waivers for children ages birth to 18. The continuum is primarily community based and intended to help consumers remain in their communities.

### *DPI Guiding Principles*

1. Provide every child a free and appropriate public education for students protected under the IDEA.
2. Ensure every child graduates college or career ready.
3. Promote engaged learning that motivates all children to reach their fullest potential.
4. Sustain a culture of high expectations that promotes excellence and is achieved through intentional relationships with educational and interagency partners.

5. Include students and families in the process of making educational decisions, ensuring students play a vital role in determining their future.
6. Ensure educational environments are accessible, inclusive, and equitable for all students.
7. Support Local Education Agencies (LEAs) in mandated transition planning through collaboration with DWD-DVR and DHS. The Post-Secondary Transition Plan and Summary of Performance will be used as tools in this coordinated approach to effective transition planning.
8. Implement consistent policies and procedures around transition planning and services for students with disabilities.
9. Support evidence-based practices for students with disabilities that promote outcomes directly linked to competitive integrated employment for working-age individuals with disabilities.
10. Coordinate a network of professionals to assist LEAs in implementing effective transition planning, programming, and services.
11. Share statewide and regional post-school outcomes for students with Individualized Education Plans (IEPs).
12. Share data regarding pre-employment transition service delivery for students with IEPs.

### *DWD-DVR Guiding Principles*

1. Disability is a natural part of the human experience and in no way diminishes the rights of individuals to live independently with self-determination, make informed choices and decisions, contribute to society, pursue meaningful careers, and enjoy full inclusion and integration in the economic, political, social, cultural, and educational mainstream of American society.
2. Work is a fundamental aspect of adult life for individuals with and without disabilities. It contributes to independence and economic self-sufficiency, provides a sense of purpose and self-esteem, and shapes who we are and how we fit into our community.
3. Individuals with disabilities, including those with the most significant disabilities, can achieve employment that is high-quality, competitive, and integrated when provided the necessary services and supports. Competitive integrated employment includes self-employment and supported employment services, which could include customized employment services. Individual placement and support services, when provided in partnership with mental health services, also provide access to competitive integrated employment. Youth and adults with disabilities must have access to the services they need, including training and other supports, to have meaningful opportunities to achieve competitive integrated employment outcomes.
4. Implementation of programs, projects, and activities must be based on:
  - Person-centered planning;
  - Respect for individual dignity, personal responsibility, self-determination, pursuit of meaningful careers, and informed choice;
  - Respect for the privacy, confidentiality, and rights of individuals, including the right to effective and meaningful access to services, information, and data; and
  - Reliance on and pursuit of evidence-based, promising, and emerging best practices.

5. Service providers or workers hired by a participant through adult long-term care programs must be approved and their staff must be qualified to facilitate the achievement of competitive integrated employment outcomes, including supported employment services.
6. State agencies must value and support individual and systemic advocacy and community involvement, including supporting the involvement of an individual's representative, if an individual with a disability requests, desires, or needs such support.

### *DHS Guiding Principles*

DHS has established Guiding Principles that build on the value of full inclusion of people with disabilities served in long-term care programs. These evidence-based principles recognize that each person's path toward CIE involves a person-centered planning process that includes a variety of experiences to build toward successful jobs.

These principles do not limit or impact the provision of allowable services in DHS's long-term care programs, including the provision of pre-vocational services compliant with HCBS. Instead, this document focuses solely on advancing CIE as an outcome.

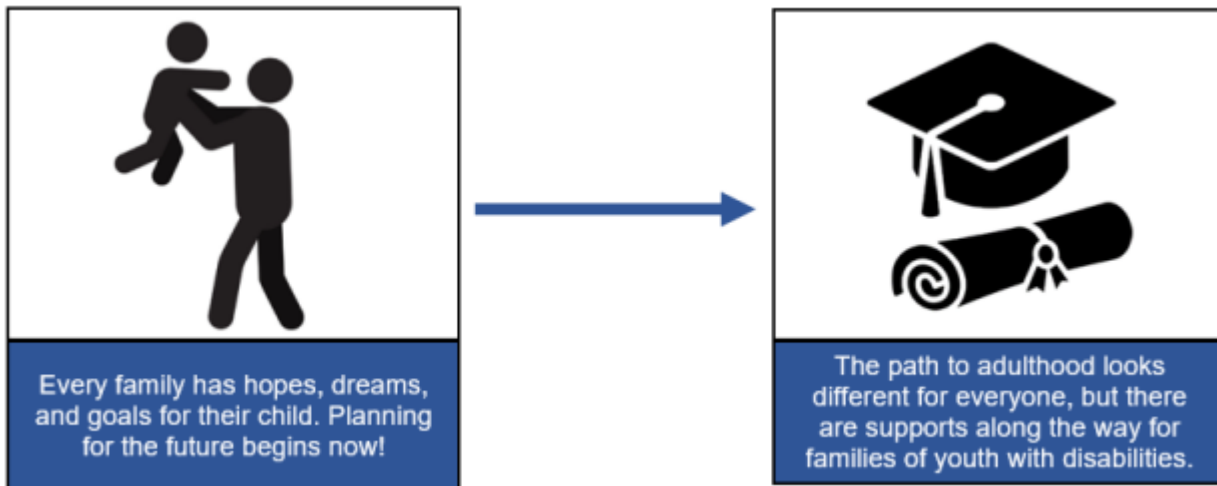
1. Everyone can work in a job if it is matched to their unique skills and interests, and they are provided with the right supports.
2. Competitive, integrated employment is the first and preferred employment outcome for all working-age youth and adults.
3. Working creates a strong path toward better physical and mental health.
4. Work is a pathway out of poverty, reduces reliance on public benefits, and is cost effective.
5. Students with disabilities who have the supports to participate in general education classes and activities and take some type of post-secondary courses are more likely to obtain competitive employment, require fewer supports, and earn higher wages.
6. When a child's parents, teachers, and other adults in their life expect that the child or teenager will work, they are up to five times more likely to work in the community as an adult.
7. Having two or more paid community work experiences during high school means teens are five times more likely to work in the community after high school.
8. To make informed choices about employment, people with disabilities need opportunities to receive comprehensive information about services available, work incentive benefits counseling, reasonable accommodations, supports, and opportunities to try a variety of community jobs.
9. Interagency coordination at the state level with long-term care agencies, DWD-DVR, DPI, businesses, technical colleges, and school districts, as well as local and regional coordination, is necessary for youth and adults with disabilities to achieve their employment goals.
10. Society as a whole and businesses in all sectors of the economy can benefit from a workforce that includes, and actively engages, people with disabilities.

### **PRIORITIES**

This IA between DPI, DWD-DVR, and DHS includes four overall priorities supporting CIE:

1. To comply with federal legal mandates under CMS, WIOA, the Rehabilitation Act, and IDEA.
2. To provide practical guidance, technical assistance, and training to internal and external stakeholders and staff regarding CIE-related services and supports.
3. To provide information on CIE-related services to individuals with disabilities and their family members or guardians so they will be able to participate fully in CIE.
4. To provide stakeholder role clarification within each respective department regarding individuals with disabilities who have CIE-related support needs to ensure seamless, non-duplicative, and transparent services.








### TRANSITION FOR YOUTH WITH DISABILITIES IN WISCONSIN



#### *Overview of Transition*

Transition services are a coordinated set of activities for a student with a disability as part of a results orientated process focused on improving the academic and functional achievement of the student with a disability. Transition services facilitate the student's movement from school to post-school activities, including post-secondary education, vocational education, competitive, integrated employment (including supported employment), continuing and adult education, adult services, independent living, and community participation.

Transition services are based on the individual student's needs, strengths, preferences and interests; and include instruction and related services, community experiences, development of employment and other post school adult living objectives, and, if appropriate, a functional vocational evaluation and development of daily living skills. *34 CFR 300.43* of the Rehabilitation Act further states that transition services must promote or facilitate the achievement of the employment outcome identified in the student's individualized plan for employment.

 <p><b>Children's Long Term Care</b></p> <ul style="list-style-type: none"> <li>• Birth to Three</li> <li>• Children's Long Term Supports</li> <li>• Katie Beckett</li> </ul>	 <p><b>School</b></p> <ul style="list-style-type: none"> <li>• Individualized Education Program</li> <li>• Academic and Career Planning</li> <li>• 504 Plans</li> </ul>	 <p><b>Children and Youth with Special Health Care Needs</b></p> <ul style="list-style-type: none"> <li>• Five Regional Centers</li> <li>• Youth Health Transition Initiative</li> </ul>	 <p><b>Transition Planning</b></p> <ul style="list-style-type: none"> <li>• Transition planning beginning at age 14</li> </ul>	 <p><b>DVR</b></p> <ul style="list-style-type: none"> <li>• Referral two years before exit</li> <li>• Employment services as part of the Individualized Plan for Employment</li> </ul>	 <p><b>ADRC</b></p> <ul style="list-style-type: none"> <li>• Starting point for entry to long term services</li> <li>• Apply for Adult LTS starting at age 17 1/2</li> </ul>	 <p><b>Adult Long Term Care</b></p> <ul style="list-style-type: none"> <li>• Family Care/IRIS</li> <li>• Partnership</li> <li>• Comprehensive Community Services</li> <li>• Community Support Programs</li> </ul>
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Every student eligible for special education may not be eligible for vocational rehabilitation services; every student eligible for vocational rehabilitation may not be eligible for special education; and every student eligible for long term supports and services through home and community based programs (HCBS) or mental health and substance abuse services may not be eligible for vocational rehabilitation. Therefore, the coordination and delivery of transition services will vary from student to student, depending on their eligibility status under IDEA, the Rehabilitation Act, and Medicaid waivers. This makes coordination of these programs and services between agencies essential.

The transition planning document under IDEA is the Individualized Education Program (IEP), and under the Rehabilitation Act it is the Individualized Plan for Employment (IPE). The IEP is an educational plan that must have appropriate measurable post-secondary goals based on age appropriate assessments related to training, education, employment, and where appropriate, independent living skills. *34 CFR § 300.320(b)*. The IPE is a vocational plan that can have an educational component. Some students will have an IEP, some will have an IPE, and some will have both.

When a student qualifies for services under IDEA, transition begins when the student turns age 14 (or younger, if appropriate) and may last through age 21 while the student has an active IEP. *34 CFR § 320(b), Wis. Stat. § 115.787(2)(g)*.

If the student has both an IEP and an IPE, the documents will outline activities and services (including

DWD-DVR, special education, and related services) necessary for the student to move toward their post-school employment goal. Both the IEP and IPE should have the same post-school employment goal. Therefore, even though there are differences in orientation, activities and services specified in each plan can overlap.

Both the IPE and IEP provide individualized transition services based on the individual student's needs, priorities, strengths, preferences, abilities, capabilities, and interests.

For students 18 to 21 years of age still enrolled in school who meet financial and functional eligibility requirements and are receiving services and supports under Medicaid Home and Community Based Services (HCBS) waivers, coordination between the above plan(s) and a waiver-required Member-Centered Plan (MCP) for Family Care members, or an Individual Support and Service Plan (ISSP) for IRIS participants or an Individual Service Plans (ISPs) for individuals participating in CLTS must also occur.

Youth with medical conditions that require management need health transition goals included in their IEPs to prepare them to be responsible for their own health condition in the workplace and independent living. This includes the ability to share information about the condition, seek appropriate care when needed, and instruct others on how to assist in a medical emergency.

Youth with mental health and/or substance abuse issues who are enrolled in a program using the wraparound process, such as Coordinated Services Teams, Comprehensive Community Services, or other community based support programs related to mental health and/or substance use should address transition issues in their individual plans of care. Youth in Comprehensive Community Services programs have their transition and pre-employment related planning included in their service plans. Service plans for young adults in Community Support Programs are also required to include an element on employment issues.

Children and youth with special health care needs, which includes students eligible for special education and those receiving support through the Medicaid Waivers, can receive support through the five Regional Centers for CYSHCN. Staff are available to support parents during the transition process by answering their questions and linking them to needed resources. In addition, the Youth Health Transition Initiative provides expertise on the process of transitioning from pediatric to adult health care. Healthcare transition is a process that must be successful for the student to be able to fully participate in educational and vocational transitions.

Students enrolled in CLTS will work with their support and service coordinators starting at age 14 to reach out to DVR and local school resource teams to begin the development of a plan for competitive integrated employment.

The overlap of policies and procedures between each entity and possible variations or combinations within these program options require coordinated and purposeful approaches to ensure service effectiveness and continuity in individual's lives to the greatest extent possible.

### *2017 Wisconsin Act 178: CIE Joint Commitments*

2017 Wisconsin Act 178 requires DWD-DVR, DHS, and DPI to collaborate, with the input of stakeholders, in the development of a joint plan to increase CIE. This plan establishes performance improvement targets, describing specific coordination methods to ensure programs, policies, and



procedures support CIE. The agencies will update the plan at least biennially.

A requirement of the plan is to submit annual report to the legislature that includes data from DHS, DWD-DVR, and DPI on the number of individuals working in CIE, as well as the interagency efforts in place statewide to increase CIE for individuals with disabilities. As part of the plan there are three specific performance improvement targets that describe the required interagency collaboration to increase CIE in Wisconsin. All three of those performance measures include activities and responsibilities for each agency that support children and youth with disabilities in transition with a focus on CIE.

Please see the CIE website at <https://dwd.wisconsin.gov/dvr/partners/cie/> for more detailed information.

### **TERMS OF THE AGREEMENT**

The terms of this IA between DWD-DVR, DPI, and DHS shall begin on the date the IA is fully executed by the parties and will continue until replaced by a new agreement, terminated upon mutual agreement, or upon written request of any party.

### **RESOLUTION OF CONFLICTS**

A. General procedures for intra- and inter-agency disputes:

For the resolution of disputes arising over issues addressed in this IA, all parties will utilize the appropriate steps and methods as described herein. Attempts will be made to resolve the issue at the lowest level of disagreement. Informal resolution will be the first step in dealing with any disagreements relative to this agreement. When an issue cannot be resolved at the lowest level, it should be referred to the next highest level as a formal dispute. Formal disputes under these procedures are to be submitted in writing at the appropriate local or state level. The materials presented will include: the regulation or requirement related to the dispute; the specific issue needing resolution; the prior steps taken to resolve the issue, and any additional information that may be relevant to the dispute. Utilizing the information presented, a good faith effort will be made to reach a mutually satisfactory solution. Efforts must be made at each level for resolution in a timely manner.

B. Conflict resolution between individuals and agencies identified in this agreement:

Individuals and their parents or legal guardians/decision makers have the right to appeal decisions regarding eligibility, services, and other aspects of their IEP, IPE, MCP, ISSP, or ISPs. In these situations, an appeal should be filed following agency/school appeal procedures.

C. Resolution of state department intra-agency disputes:

This IA recognizes that each agency has its own administrative mechanisms for the timely resolution of internal disputes. This agreement recognizes these procedures and permits each agency to resolve its own internal disputes.

D. Resolution of inter-agency disputes:

When a formal dispute arises between the parties regarding the terms of this IA, the party seeking

clarification shall use the following procedure for resolution:

1. The issue will be referred to the respective division administrator or their designees for resolution.
2. If unresolved by division administrators, the issue will be referred to the highest level within the agencies for resolution.
3. All necessary steps in the resolution under this section shall occur within 60 days from referral to division administrators. If acted on in good faith with just cause and through mutual consent, an extension may be granted.

## SIGNATURES

### Department of Health Services

DocuSigned by:

*Jim Jones*

12/7/2020

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James D. Jones

Date

Medicaid Director

Department of Health Services

### Department of Public Instruction

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*Barbara Van Haren*

12/8/2020

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Barbara Van Haren

Date

Assistant Superintendent

Division of Learning Support, Department of Public Instruction

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*Carolyn Stanford Taylor*

12/11/2020

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Carolyn Stanford Taylor

Date

State Superintendent

Department of Public Instruction

### Department of Workforce Development

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*Delora Newton*

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Delora Newton

Date

Administrator

Division of Vocational Rehabilitation

DocuSigned by:

*Robert Cherry*

12/17/2020

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Robert Cherry, Jr.

Date

Deputy Secretary

Department of Workforce Development