



Companion Toolkit: State Strategies to Assist Employees with Mental Health and Substance Use Issues Stay At Work/Return To Work

OVERVIEW

Employees experiencing mental health and/or substance use issues are not new phenomena. However, contemporary emphasis on opioid/substance use intervention coupled with bottom-line effects of untreated disorders mobilize legislators, treatment providers, and employers in conceiving innovative programs that keep workers working. Emphases on policies and practices that promote Stay At Work/Return To Work (SAW/RTW) objectives allow workers to remain “engaged in gainful employment as tax-paying members of the community, [so that] fewer individuals will need to apply for or [receive] disability benefits.”¹ Additionally, studies show that “treatment and work reinforce each other”² in tangible and intangible ways as successful employment can lead to economic independence and support recovery.

This Toolkit is a companion piece to Women In Government’s [“Mental Health and Substance Use Disorders Toolkit”](#) (2017) and focuses on initiatives to improve employment outcomes for those with mental health and/or substance use disorders.



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This Toolkit was developed in collaboration with the U.S. Department of Labor, [Office of Disability Employment Policy’s State Exchange on Employment & Disability \(SEED\)](#) in its efforts to foster a nationwide workforce more inclusive of people with disabilities.





SOMEONE YOU WORK WITH IS AFFECTED

- ◆ **1 in 5 U.S. Adults (over 40 million people) have a mental health condition in any given year**³
- ◆ **Depression** accounts for “the leading cause of disability worldwide”⁴
- ◆ About **1 in 25** U.S. adults “experiences a serious mental illness in a given year that substantially interferes with or limits one or more major life activities”, including employment⁵
- ◆ **Illicit drug use among U.S. workers is at 10-year high**⁶
- ◆ **75% of adults who are not seeking treatment** for their substance use remain in the workforce⁷
- ◆ **Access to mental health care** constitutes a significant impediment to treatment and recovery⁸

*“Far and away the best prize that life has to offer is the chance to work hard at work worth doing.” ~Theodore Roosevelt,
Address to the New York State Agricultural Association, Syracuse, NY, September 7, 1903*

SUBSTANCE USE AND EMPLOYMENT: ONE FEDERAL RESPONSE

On April 24, 2018 U.S. Senator Mitch McConnell introduced *The Comprehensive Addiction Recovery through Effective Employment and Re-entry* or **CAREER ACT** to address the reality of the opioid crisis and a diminished workforce:

“The [CAREER Act] would bring targeted relief to the states most devastated by substance abuse. This state-based pilot program would encourage local businesses and treatment groups to form partnerships to help those in recovery find and maintain employment.”¹⁸

STATE PROGRAM EXAMPLES

STATES MODELING EMPLOYER BEST PRACTICES

West Virginia: The West Virginia Division of Personnel in partnership with The Department of Health & Human Resources publishes a 34-page resource book for employees outlining a range of strategies available to state employees and West Virginia residents that include:

- 24-hour crisis help/online chat line; outline of available employee benefits;
- Mental health community service providers; addiction treatment options;
- Family and youth programs, and;
- Credit counseling.

This [Employee Referral Program Booklet](#)⁹ corresponds to private company [Employee Assistance Programs](#)¹⁰(EAPs) in an easy-to-read, easy-to-navigate format. Additionally, West Virginia’s Public Employee Insurance Agency (PEIA) offers [5 specifically-defined mental health and/or substance abuse benefits](#)¹¹ that include outpatient options and are available through multiple benefit enrollment levels.

WORK AS A HEALTH OUTCOME

Montana: In 2015, Montana legislature passed the bi-partisan Health and Economic Livelihood Partnership (HELP) Act. The Act “[authorized the Montana Department of Labor & Industry \(DLI\) to administer a workforce program in conjunction with the health coverage provided through expanding Medicaid.](#)”¹²

STATE PROGRAMS EXAMPLES, CONTINUED

Montana, continued: A unique feature of this program is that it starts with coverage and aims towards employment. Enrollees have access to a [wide range of services](#)¹³ offered through a case management model [to bring low-income Montanans into the workforce](#)¹⁴. [Program participants](#)¹⁵ and [initial studies](#)¹⁶ report that the costs of expanding Medicaid are “more than offset” by the savings created...and revenues associated with increased economic activity.” Other states, like [West Virginia](#), have taken notice of these reported positive outcomes and recommend similar measures.¹⁷

STREAMLINED COMMUNITY-BASED ACCESS

Massachusetts: The Commonwealth’s [recently announced budget](#)¹⁹ outlines specific funding increases for treatment centers, mental health services, and salary increases to mental health providers. Explicit aims of Governor Baker’s administration include coordinating activities of Mass Health, Department of Mental Health (DMH), and the Massachusetts Rehabilitation Commission (MRC) to “[provide vocational rehabilitation services to assist individuals with disabilities -- including individuals with mental illness -- in securing, maintaining, or advancing in competitive employment.](#)”²⁰

Massachusetts residents who experience mental illness or substance use issues that impede their employment opportunities can get help through a variety of community-based Centers funded through the Department of Mental Health.

- For youth/young adult clients, [The SPOT](#), is a “clinical program that offers employment services.”²¹ In The SPOT model, participants determine the level to which their case manager is involved in job search and post-placement supports. Case managers help their clients with skills assessment, resume writing, interview preparation, and job sourcing. Behavior coaching and coping skills are addressed at the outset in a safe, structured environment so that goals and solutions are mapped out in advance to promote on-the-job success.
- Regionally-based [Clubhouses](#) (Massachusetts Clubhouse Coalition) offer similar, comprehensive services to older job-seekers with mental health issues secure meaningful and competitive work opportunities.²²

MENTAL HEALTH AS A WORKERS COMP BENEFIT?

In March 2018, the Florida legislature signed [SB 376](#) into law that will cover lost wages for PTSD disability diagnosis “that meet certain conditions...without an accompanying physical injury” as a result of on-the-job occurrences. This law expands upon existing medical coverage benefits for first responders and widens the scope of disabilities eligible for workers compensation.²⁹

WHY THIS COULD MATTER:

With physical injuries, predictive modeling exists to forecast outcome scenarios and quantify costs. With mental health and/or substance use issues, however, perceptions that recovery may not be statistically attainable persist and insurance companies may be reluctant to assume such a risk if an end to a claim is not clearly defined. The data that could be obtained as a result of this kind of expanded coverage can inform future policy and best practices.

STATE PROGRAMS EXAMPLES, CONTINUED Massachusetts, continued:

- [Recovery Learning Communities](#) (RLCs) are peer-led centers coordinated through the Department of Mental Health that offer training, credentialing, and employment opportunities for those in recovery from mental health and substance use disruptions. In addition to direct employment opportunities, RLCs provide local residents with much needed access treatment options.²³

ENTREPRENEURSHIP AND SELF-EMPLOYMENT ASSISTANCE

North Carolina: The North Carolina Department of Health and Human Services outlines the [available steps and resources](#) ²⁴of setting up a small business with a Vocational Rehabilitation Counselor whose clients could include individuals affected by mental health and/or substance use issues. The department’s [Self-Employment Individual Handbook](#)²⁵ first affirms that the agency will not underwrite business ventures nor offset losses, but still provides candid and sequential advice to clients who seek to be their own boss.

Iowa: [Iowa’s Self-Employment Program](#) (ISE) presents a vocational option towards economic self-sufficiency by providing “technical and/or financial assistance to start, expand or acquire a business.” ISE offers consultation, counseling, and networking opportunities to clients with a “qualifying disability that results in a barrier to employment.”²⁶ A [2009 report](#) ²⁷ ranked Iowa among the top ten states for successful self-employment strategies and supports. Iowa’s own publication, “[Thinking Outside the Employment Box](#)”²⁸ lists more than a dozen success stories from entrepreneurs who reflect a range of abilities, including mental health disorders.

LEGISLATIVE STRATEGIES: EVERY PIECE ADDS TO THE PICTURE

Illinois: Representative Patti Bellock (R-IL) continues to augment the success of her earlier Mental Health Parity work in her state. Recently she reported to Women In Government that, “the biggest news in Illinois is our approval by the Feds of our 1115 waiver which centers on integrating mental health with physical [that] will be a national model in the country.” [Integrated Health Homes](#) and 10 other pilot programs will bring \$2 billion dollars into Illinois to manage mental health and addiction programs that also offer ancillary supports including housing and employment.³⁰

OTHER POLICY CONSIDERATIONS SUBSTANCE USE AND WORK

Depending on perceptions of substance use—or the substance user—illicit drug use may be viewed either as a criminal issue or a public health crisis, or both.

A wide variety of intersecting policy factors that impact successful employment for this population may include whether or not and employee may have:

- A criminal record which eliminates eligibility for job-type or employer of choice
- Lack of transportation (due to loss of driving privileges or other factors) that curtail employment options
- Use of substances as part of a treatment plan or in compliance with new laws that conflict with employer standards
- Access to protections offered by professional or labor associations

LEGISLATIVE STRATEGIES: EVERY PIECE ADDS TO THE PICTURE, continued

Kansas: All 50 states have signed the ABLE Act into law, while 36 of the 50 currently have an active program.³¹ In 2015, Representative Erin Davis (R-Olathe) led the effort to pass HB 2216 “Achieving a Better Life Experience Savings Program.” The Kansas ABLE Act allows qualified individuals with disabilities to open an ABLE savings account that grows tax-deferred/tax-free to pay for specific expenses, including education, supports, and employment training.³¹

In May 2018, HB 2067 “[ABLE 2.0](#)” went further to give contributors a Kansas tax deduction and protect these assets from Medicaid clawback.³² Tom Treacy, Director of Kansas’ ABLE Savings Program reported to Women In Government that, “this would not have happened were it not for Representative Davis.”



Promote [Stay At Work /Return to Work](#) #S@W/R2W in social media

WHAT LEGISLATORS CAN DO TODAY

- ◆ Identify your state’s existing disability and vocational programs and convene a Task Force reflecting the full range of employment-focused stakeholders.
- ◆ Review whether your state is considered a “Model Employer” that actively includes employees with mental health and substance use in these initiatives.
- ◆ Engage local companies and business groups in frank discussions about what employers may need to hire or retain employees who suffer from mental health or substance use issues.
- ◆ Visit county programs and community-based service providers to get their feedback on gaps specific legislation can address.
- ◆ Liaise with State Education Departments and school districts’ special education and transition programs to overcome obstacles and maximize workforce opportunities and outcomes.
- ◆ Keep up with Stay-at-Work/Return-to-Work initiatives at the federal level for ideas and Technical Assistance inquiries: <https://www.dol.gov/odep/topics/Stay-at-Work-Return-to-Work.htm>



WORKING WORKS FOR EVERYONE

FOR THE EMPLOYEE

- Income is maintained
- Access to benefits provides treatment continuity and relapse prevention
- Avoiding employment gaps supports career trajectory
- Inter-personal relationships aid in recovery

FOR THE EMPLOYER

- Accommodations help retain experienced employees
- Early intervention staves off expensive crises
- Actively managing workflow disruptions maintains optimal productivity
- Mutual trust and loyalty can lead to less turnover

FOR THE FAMILY

- Breadwinners and caregivers are better able to fulfill household obligations when employment and treatment are in accord
- Affected family members are matched with available services through workplace benefits
- Negative effects to personal relationships and social status are reduced when employees can keep their jobs

EMPLOYER RESPONSES PUBLIC SECTOR INITIATIVES

States as Model Employer:

Convened by the Council of State Governments (CSG) and the National Conference of State Legislatures (NCSL) in collaboration with the U.S. Department of Labor's State Exchange on Employment & Disability (SEED), the National Task Force on Workforce Development for People with Disabilities issued [Work Matters: A Framework for States on Workforce Development for People with Disabilities](#) (December 2016).³³ The policy framework offers state policymakers 13 broad policy options to build strong, inclusive workforces, as well as 48 suggested strategies and more than 240 examples of state-implemented innovative programs and policies.

Among these recommendations, states were encouraged to “lead by example and ‘walk the walk’—ensuring that state agencies become model employers and use state financial resources to support model employers in the private sector.

Transitional Employment:

New York's Office of Mental Health in partnership with Transitional Services of New York (TSINY) has funded an [affirmative business model](#) to offer “training and employment opportunities for individuals with a mental illness or co-occurring disorder.”³⁴ For the last eight years, “Turn the Page Again” bookstore in Queens has been providing part-time transitional employment up to 20 hours per week at minimum wage for 20-30 employees that rotate every nine months. Ave McCracken, Director of Public Affairs for TSINY, reports that the program gives participants real-world experience in retail and service environments where they gain the hard and soft skills to build work history critical for sustained employment success.

Progressive Employment:

Vermont's Division of Vocational Rehabilitation offers a [Progressive Employment](#) option that allows job-seekers and employers to try each other out through short-term trainee placement opportunities. Candidates and employers alike are carefully matched without the risk of commitment to explore the feasibility of career readiness or firm employment offer. Through this Progressive Employment model, training costs are offset depending on the host agency with these costs not calculated as wages or income. Additionally, trainees are covered through the State Risk Management Program to minimize potential liabilities to employers.³⁵

WORKING WORKS FOR EVERYONE, continued

FOR THE COMMUNITY

- Employees and employers continue to pay taxes
- Employees can keep or stay in their home
- Employees' children can remain with their parents/family caregivers and stay in their school
- Patient-to-Peer-Leader offer attainable examples towards recovery

RESOURCES FOR EMPLOYERS AND EMPLOYEES

- Mental Health [First Aid](#)
- Mental Health America [Returning to Work](#)
- Office of Disability Employment Policy (ODEP) [Return to Work Toolkit](#)
- Substance Abuse and Mental Health Services Administration (SAMHSA) [“Supported Employment: Evidence-Based Practices Kit”](#)
- National Alliance on Mental Illness (NAMI): [“Road to Recovery: Employment and Mental Illness”](#)
- Job Accommodation Network ([JAN](#))
- Workforce Innovation and Opportunity Act ([WIOA](#))

EMPLOYER RESPONSES

PRIVATE SECTOR INITIATIVES

Unilever: This multi-national consumer goods corporation with operations in multiple states throughout the U.S. is considered a pioneer in its commitment to tackle stigma around mental health and improve “mental resilience” among leadership and employees. The company’s global health initiative [Lamplighter](#) aims “to evaluate and provide physical and mental health support” for their employees and offers a variety of options to this end including awareness, coaching, and access to a variety of treatment options.³⁶ [Impact analyses](#) demonstrate that program spending yields nearly 150% return on investment “showing that good health is good for our people and good for our business.”³⁷

Chesapeake Energy Corporation: Like Unilever, Oklahoma-based Chesapeake Energy Corporation’s commitment to [improving mental health outcomes](#) began with leadership response to personal tragedies. The company worked hard to enhance and source employee benefits that support mental health and combined these efforts with a “Your Life Matters” information campaign marketed to all levels of the organization.³⁸

Caesars Entertainment Corp (Las Vegas): In 2017, Nevada legalized recreational use of marijuana and in 2018 Caesars became the first major casino to [state on the record](#) that they would no longer screen for marijuana use as a condition of employment for certain jobs.³⁹

Belden, Inc.: This Midwest-based international manufacturer partnered with community workforce and health partners to launch its [“Pathways to Employment,”](#) a pilot program in Indiana that “provides personalized rehabilitation with the promise of a job after successful completion.” This program was developed in direct response to worker shortage as a result of the opioid crisis. Though it has only 5 participants currently, “progress to date has been positive and promising” and expansion to other Belden operations is anticipated.⁴⁰



Connecting Legislative Leaders

Women In Government is a non-profit, non-partisan organization serving women state legislators nationwide with policy-driven education, in-depth leadership training, and coalition-building networking opportunities.

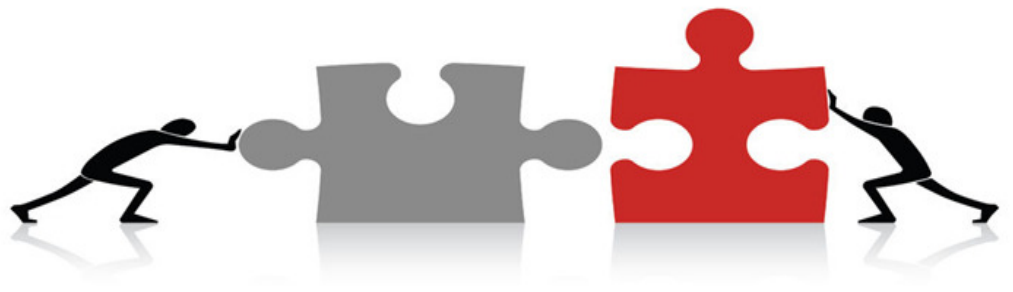
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EMPLOYER RESOURCES AND INCENTIVES

States are motivated to help businesses and employees succeed!

Employers of all sizes should check first with their state's [Vocational Rehabilitation Services](#) department to investigate the range of specific resources available that help recruit and retain employees with disabilities, including those with mental health and substance use issues. These departments can also identify additional incentives for which employers may be eligible, including:

- ◆ [Federal Tax Benefits](#) for Business Who Have Employees with Disabilities (IRS.gov —<https://www.irs.gov/businesses/small-businesses-self-employed/tax-benefits-for-businesses-who-have-employees-with-disabilities>)
- ◆ [Work Opportunity Tax Credit](#) (U.S. Department of Labor—<https://www.doleta.gov/business/incentives/opptax/eligible.cfm#Veterans>)
- ◆ State Tax Credits ([New York State Example](#)—https://www.tax.ny.gov/pit/credits/workers_with_disabilities_credits.htm)
- ◆ Federal Vendors: [Compliance and preference](#) with Section 503 of the Rehabilitation Act (Explanation on Social Security Administration's "Your Ticket to Work" website—<https://yourtickettowork.ssa.gov/related-resources/section-503.html>)
- ◆ [Veterans Opportunity to Work](#) (Veterans Administration—<https://www.benefits.va.gov/VOW/for-employers.asp>)
- ◆ [Individualized Placement and Support](#) (IPS Works—<https://ipsworks.org/index.php/what-is-ips/>)
- ◆ Reductions of insurance premiums or shared risk ([Oklahoma Example](#)—https://www.ok.gov/odol/documents/OSHAWCPRFact_Sheet.pdf)
- ◆ Federal and State Employer Financial Incentives (Employer Assistance and Resource Network on Disability Inclusion-[EARN](#)—http://www.askearn.org/topics/laws-regulations/employer_financial_incentives/)



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