NAVIGATING THE TRANSITION YEARS

A Handbook for Families of Young Adults with Mental Health Needs

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Developed by
The Maryland Coalition of Families

Dedication

This handbook is dedicated to all families struggling to help their child with mental health disabilities transition to adulthood.

May you find this handbook a source of information and empowerment.

Maryland Coalition of Families hopes that this information will be disseminated widely.
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July 2023

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Our Mission
Using our personal experience caring for loved ones with behavioral health needs, we connect, support and empower Maryland’s families and advocate to improve systems that impact individuals with behavioral health challenges.

Our Vision
For children, youth and adults with behavioral health challenges, we envision wellness and a stigma-free community that values the perspective of loved ones.

We Believe
- Children, youth and adults with behavioral health needs are valued and require individualized services to achieve their full potential.
- Parents and caregivers are an important source of stability in their loved one’s life and are equal partners in planning, implementation, monitoring and evaluation of services.
- People with behavioral health needs have the best chance of success when loved ones are active partners in their care.
- Effective services for individuals and families should build on their identified strengths and be responsive to their needs.
- Local and state systems of care must be culturally and linguistically responsive and respectful of the person with behavioral health needs and their loved ones.
- Recovery is possible.

Our Values
- We respect the dignity and individual differences of each family.
- We honor the rights of parents and caregivers to make decisions for their children.
- We work in partnership with providers, policymakers, administrators, and other advocacy organizations to improve systems that impact individuals with behavioral health challenges.
- We are responsible for providing families with understandable, complete, and accurate information.
- We are committed to self-empowerment of loved ones through support, training, and education.
- We are accountable to families, the community and to funders for the performance and quality of services and supports provided by MCF.
- We respect and embrace the unique qualities, characteristics, and identities of all those we serve and treat everyone compassionately and without judgement.
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Chapter 1: Introduction
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This handbook was originally published in 2010. It was the result of focus groups MCF held in the spring of 2006 in six locations across the state. We asked youth of transition age (defined as 16-25 years) with mental health challenges and their families to tell us about their experience with the transition process – that period of preparing and moving from high school to the adult world.

Several common themes emerged:
- Both young adults and their families had expansive dreams for the young adult’s future.
- Families who had been lifelong advocates for their child knew that it was time to let go but found this prospect frightening.
- Families and young adults felt that existing transition services were not well-tailored to youth with mental health needs.
- Young adults emphatically stated that they wanted to transition to adulthood – not into the adult mental health system.

Overwhelmingly, focus group participants were frustrated by the lack of coordinated information about many aspects of the transition process. One mother said, “Everything is so complicated, and I don’t know where to go to get help.”

This handbook is an attempt to bring together information and tools to navigate the transition process. It is written for families, but the intent is that with this information families can support their youth to self-advocate.

Transition to Adulthood

The transition to adulthood can be lengthy and difficult for all young adults – not just those with mental health disabilities. For example, in 2020, 58% of young adults 18-24 years old were living in their parent’s home.\(^2\)

As our society has become more complex, the adult milestones of completing secondary education, finding a job that pays a living wage, and leaving the family home often are not achieved until age 30 or later.\(^3\)

For young adults with mental health disabilities, the transition to adulthood can be longer and more difficult.

The social and emotional delays youth with mental health needs experience can impede the skills necessary to successfully transition to adulthood.\(^4\)

Developmental Characteristics of Young Adults with Mental Health Needs

Youth and young adults display developmental characteristics that can be challenging and sometimes frightening to their caregivers.

Youth with social and emotional disabilities may experience delays that are more typical of younger adolescents. Others are common to most young adults. They include:
- Seeking differentiation and independence from their parents.
- Possessing an overwhelming desire to fit in with their peers, including having a circle of friends and a romantic partner.
- Craving outward displays of adult milestones, which may include the use of alcohol and/or drugs, and sexual activity.
- Not wanting to identify as someone with a disability.

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\(^1\) For clarity, throughout this document, we will refer to the youth of transition age as “young adults”, “youth” or “youth of transition age”.


\(^3\) Maryann Davis, “The Path from Adolescence to Adulthood,” NAMI Beginnings, Summer 2006.

Young adults with mental health challenges share the same goals as their peers who do not have a disability. They want to earn money, own a car, have friends and live on their own. Often times, they are not interested in participating in “mental health services.”

The dilemma for families is that while youth with mental health needs want the same things as other youth their age, they may lack the social skills, confidence and maturity needed to achieve their dreams. To complicate matters, it is not unusual for youth to refuse any kind of mental health services that may help them reach their goals, including taking medication.

The Changing Role of Families
Parents and caregivers of children with mental health needs are accustomed to advocating for their child. Typically, they are involved in every aspect of their minor child’s life from education and social activities to medical care and mental health treatment.

Yet the roles and responsibilities of parents and caregivers change dramatically when a child turns 18, regardless of how prepared and capable a child is at that point. Often, this places families in a difficult position. Families feel responsible for their child but have little or no control or access to information. They may feel helpless and frustrated if their child loses ground or refuses/fails to receive appropriate support.

Through this time of transition, the task of the family is to take on a new role, one that tries to support rather than control their young adult. To help youth successfully transition to the adult world, families need to stand back and let go, while providing a safety net of support.

Above all, it is critical for families to recognize that young adults seek independence from their families and need to pursue this process. Therefore, transition plans must be developed and driven by the young adult. While this prospect makes many parents uneasy, it can be downright scary for families. They find it extremely difficult to step back while their young adult meets the complex and critical challenges of the transition stage.

“The passage from childhood to adulthood for all of us involves the “dignity of risk;” the right to make mistakes and learn from them.”
– From “Growing Up Without Growing Apart,” Utah Support Network

However, stepping back does not mean removing yourself entirely from the process. Young adults still need their family’s guidance. And for that reason, the more effective transition plans are youth-driven and family-guided. Plans and goals must be defined by the youth with the family providing critical guidance, especially when the youth encounters barriers or perhaps stumbles along the way.

Here are some suggestions for adopting a youth-driven, family-guided approach:
- Your young adult’s preferences are critical. You may not like them or agree with them, but don’t dismiss them. Listen with an open mind.
- Support your young adult’s career goals. Be non-judgmental - the ultimate goal must be the young adult’s.
- Help your child break down a major goal into smaller more manageable components and encourage back-up plans.
- Brainstorm with them.
- Recognize that the boundaries have shifted, and that your young adult must now take responsibility for themselves.
- Allow youth to experience natural consequences whenever possible.
Partnering with Your Young Adult in the Transition Process

To develop a transition plan that is youth-driven and family-guided, you may find it helpful to complete this exercise. Answer the following questions. Think about how your child might answer the questions or see if you can get them to respond.

1. Where are there similarities?
2. What are the differences?
3. How can you move toward supporting your child’s vision of their future?
4. When might you need to allow them to experience natural consequences?

Questions

1. What are your dreams about your child’s future?
2. What short-term goals do you have for your child?
3. What careers would you like your child to pursue?
4. What further education do you imagine your child attaining?
5. What barriers might get in the way of your child accomplishing their goals?
6. What independent living skills do you feel your child has acquired (banking, budgeting, cooking, shopping)? What do you think is lacking?
7. How do you anticipate your child will meet their transportation needs?
8. How do you perceive your child’s social life?
Chapter 2: High School Transition Planning
Chapter 2: High School Transition Planning

High School Support Staff
If your child has an Individualized Education Plan (IEP), a team of school personnel is responsible for helping them develop and implement their transition plan. If your child is supported by a 504 plan, they still have access to the services of a guidance counselor, a person who serves as a “transition coordinator,” and a Division of Rehabilitation Services (DORS) counselor, but you and your child may be responsible for initiating contact to access their support.

The major players in a student’s transition plan are:

Guidance counselor
- Assists with the development of a course schedule that meets transition objectives.
- Ensures that a student registers for and takes admission tests (such as the PSAT and SAT), if appropriate.
- Provides information on colleges and other institutions of continuing education.
- Provides guidance on applying for financial aid.

Transition coordinator
- Attends IEP meetings.
- Administers career interest inventories.
- Develops the transition plan within the IEP for those students aged 14 or older in conjunction with the student.
- Assists families in applying for post-secondary services from the state such as from DORS and (more rarely) the Behavioral Health Administration (BHA).
- Provides instruction and work experiences in authentic work environments, if indicated in the student’s IEP.
- Works collaboratively with DORS to ensure eligible students are identified and receive Pre-Employment Transition Services (Pre-ETS) and apply for Student Employment Services/Vocational Rehabilitation Services.

DORS Counselor (Chapter 3 contains more information about DORS)
- Pre-ETS and the application for Student Employment Services/Vocational Rehabilitation Services.
- Attends IEP meetings beginning in a student’s second to last year of school (as available).
- Refers the student for vocational assessments.
- Identifies services needed for successful transition to post-secondary education and/or employment.
- Makes referrals to outside agencies as needed.

High School Transition Planning Timeline
Both the Individuals with Disabilities Education Act (IDEA) 2004 and the Maryland State Department of Education established guidelines that IEP teams must follow when developing transition plans that help students meet their education and employment goals.

For detailed information on the transition planning timeline for a student with an IEP, see the Maryland State Department of Education’s “Secondary Education Planning Guide for Students with Disabilities,” which all students and families should receive after the student turns 14.

A student with an IEP may stay in school until earning enough credits to graduate from high school, or until 21 years of age.

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5 The role of “transition coordinator” is often filled by a member of the IEP team. This person is called different things in different counties. If no one takes the lead to help your child with an IEP or a 504 plan develop a transition plan after age 14, contact the transition coordinator in your county.

6 https://drive.google.com/file/d/1NREQNRRooATJS50jILZe-G71uQjIL8Mw0/view
Age 14
- Youth attends IEP meetings.
- Youth participates in transition assessments and develops an initial transition plan with support of transition coordinator.

9th grade (4 years prior to exit)
- Youth meets with guidance counselor to select a high school course of study program.
- Guidance counselor and youth review graduation requirements and youth completes career interest inventories.
- Youth and the transition coordinator update the IEP transition plan and work on transition activities.
- Youth applies to DORS for Pre-ETS and Student Employment Services/Vocational Rehabilitation Services. See Chapter 3.

10th grade (3 years prior to exit)
- Youth works closely with the transition coordinator to update the IEP transition plan and work on transition activities.
- Youth takes the PSAT

11th grade (2 year prior to exit)
- DORS should have examined documentation, performed assessments and determined eligibility status for Student Employment Services/Vocational Rehabilitation Services.
- A DORS counselor should attend the IEP meeting, if available.
- Consider a work-based learning program (see below).
- Youth visits any continuing education facility they are considering attending, and talks to staff in the Student Support Services office.
- Youth takes the PSAT.

12th grade (year of exit)
- Youth maintains regular contact with the DORS counselor, who should attend the IEP meeting, if available.
- The IEP Team ensures the IEP includes anticipated transition services, including Supplemental Security Income (SSI) benefits, continuing education or job support services, and BHA services.
- DORS counselor should make the outside referral to a supported employment provider and to BHA as needed, if the student is eligible for Student Employment Services/Vocational Rehabilitation Services.
- Youth visits the DORS Workforce Technology Center if they are considering receiving any services there and if eligible for Vocational Rehabilitation Services.
- Youth takes the SAT if appropriate.
- Youth visits any continuing education facility that they are considering attending, and talks to staff in the Student Support Services office.
- Families should fill out the FAFSA (Free Application for Federal Student Aid).

If a student is not on track to receive a learner’s permit from the Motor Vehicle Administration, they should apply to the MVA for an Identification Card:

https://mva.maryland.gov/drivers/Pages/apply-id-card.aspx
If your child plans on pursuing post-secondary education, consider applying to Project Access, a four week summer program at Howard Community College for youth with disabilities grades 9-12 who will be graduating with a diploma and who plan on going to college.

The program accepts students across the state. Financial aid is available to qualifying students.

*See Appendix 1 for more information.*

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**High School Course of Study Options**

Youth should work with their guidance counselor/transition coordinator to develop their plans.

**Classes to Prepare for Post-secondary Education**

Even if a student is planning to pursue post-secondary higher education, it can be beneficial for them to include high school work experience in their schedule (see below). Also, they should consider taking one or more courses at the local community college if this is a workable option.

**Career and Technology Education (CTE)**

Career and Technology Education (CTE) programs are for both career and college-bound students and include a sequence of four or five high school courses taken in addition to the academic core classes.

- Courses are offered within a comprehensive high school, a technical high school, or a CTE center. *There can be a competitive application process.*
- Course of study includes an internship or work-related experience.
- Students have the opportunity to earn career licenses (such as cosmetology) or college credits.
  - 10 career clusters are offered. Each cluster, however, is not available in all areas. They are:
    - Arts, Media and Communication
    - Business Management and Finance
    - Construction and Development
    - Consumer Services, Hospitality and Tourism
    - Environmental, Agriculture and Natural Resources
    - Health and Biosciences
    - Human Resource Services
    - Information Technology
    - Manufacturing, Engineering and Technology
    - Transportation Technologies

In addition to the 10 CTE career clusters there are two additional CTE programs:

**Career Research and Development** is a CTE program that prepares students to seek further education and employment in a career field of their interest upon graduating from high school.

The program consists of two in-school courses, a portfolio development project, and a work-based learning component. The work-based learning experience takes place at the worksite, includes a minimum of 270 hours, and may be paid or unpaid.

**Apprenticeship Maryland** is a CTE program that provides high school students with all aspects of an apprenticeship experience including work-based learning, related classroom instruction, and one-on-one mentoring from an industry professional.

Participating students start the program in their junior or senior year and complete at least one year of related classroom instruction and a minimum of 450 hours work-based training under the supervision of an eligible employer. The workplace component is a paid (at least minimum wage), mentored, on-the-job work experience.
Work-based Learning
Studies indicate that young adults who have had paid work experience during their high school years are far more likely to be employed in the years following graduation than those who have not. Moreover, successful work experience can profoundly influence a young adult's self-esteem and sense of independence. For some youth, a work-based learning program is an excellent way to get that paid work experience in high school.

There are a variety of ways a student can access a work-based learning experience. In most counties, there are work-based learning programs designed for students with developmental disabilities who are not diploma bound. Unless a student has a co-occurring mental health and developmental disability, they usually are not eligible for these programs. A student with a mental health disability may be able to access a work-based learning experience through the Pre-ETS program, or the Student Employment Services Program (if eligible) available through DORS. This will be discussed in Chapter 3 on DORS services.

Work-based learning opportunities vary from county to county. Some programs are exclusively for students who are in special schools. Others may include work hours after school or during the summer. There are also programs that offer work hours during during the school day, but this is usually not a recommended option for students on the diploma track. Because of the many benefits a work experiences provides, a student’s transition coordinator in conjunction with the DORS counselor should work to arrange a work-based learning experience for the youth whenever possible.

Mental Health Transition Planning
There is a tool offered by schools to help high school seniors develop a plan for receiving mental health treatment services after graduation: a “Post-Graduation Wellness Plan.” The plan is to be developed by the student with someone with whom they have an ongoing, trusted relationship. Examples include school mental health providers, school-based health center staff, school psychologists, professional school counselors, and school social workers. You can request from your child’s transition coordinator that a plan be developed with your child.

For more information, see https://gottransition.org/resource/?maryland-post-graduation-wellness-plan

In addition, schools have designed two mental health transition tools, one for students and one for parents, which list important questions that should be considered by students with mental health needs and their families. These can be completed with youth as young as age 14.

Student Transition Readiness Tool
https://gottransition.org/resource/?maryland-student-transition-readiness-tool

Parent/Caregiver Transition Readiness Tool

For All Students
The high school guidance counselor should help all students with:
• Registering for academic testing.
• Providing information on colleges and vocational programs.
• Compiling application packets.
• Providing information on applying for financial aid.

Also, guidance counselors have information about a wide variety of volunteer opportunities in the local community. Students who are considering attending an institution of continuing education should check with their guidance counselor about admission testing requirements.

There is a cost for most admission tests, and also for applications, although they may sometimes be waived based on financial need.
Financial Aid for Continuing Education
Families should complete the FAFSA (for their students who are considering pursuing continuing education after high school.) A FAFSA is required for almost all forms of financial aid such as grants, loans and scholarships (some scholarships, however, do not require a FAFSA). A FAFSA is also required to be eligible for financial aid through DORS (see chapter 3).

Most students will not be eligible for independent student status (i.e., independent of their family’s income).

Students are eligible for independent status if they are:
• 24 or older, or
• Married, or
• A graduate student (having completed a bachelor’s degree), or
• Have a dependent other than a spouse (e.g. a child), or
• A veteran, or
• An orphan or ward of the court at age 18.
Chapter 3: Division of Rehabilitation Services (DORS)
Chapter 3: Division of Rehabilitation Services (DORS)

DORS is Maryland’s Vocational Rehabilitation Agency. Federal law requires that every state have a vocational rehabilitation agency, with the mission to promote the employment, independence and self-sufficiency of individuals with significant disabilities. DORS is under the Maryland State Department of Education and serves individuals ages 14-64 regardless of type of disability.

DORS offers two specific programs to help youth with documented disabilities (including mental health disabilities) prepare for employment:

- **Pre-Employment Transition Services:**
  Services are available for students at least 14 years old, in at least high school, and no more than 21 years old. All students with IEPs or 504 plans are eligible for Pre-ETS.

- **Vocational Rehabilitation Services:**
  Individuals age 14-64 may be eligible for additional Vocational Rehabilitation services beyond Pre-ETS. When a student is receiving Vocational Rehabilitation Services while in school, it is called “Student Employment Services.” One must apply and be found eligible for Vocational Rehabilitation Services/Student Employment Services. There may be a waiting list for these services.

In the 2022 legislative session the Maryland legislature passed a bill to establish a Commission to make recommendations on improving DORS programs and services. Some of the concerns that prompted the passage of the bill were related to DORS Vocational Rehabilitation Services:

- The lengthy waiting list to receive Vocational Rehabilitation Services.
- Rates of people securing full-time employment after receiving Vocational Rehabilitation Services.

DORS has been making efforts to address these concerns.

Pre-Employment Transition Services (Pre-ETS)

**Eligibility**

Students are eligible for Pre-ETS if they:

- Are age 14-22.
- Have an IEP, or,
- Have a 504 plan, or,
- Have a documented disability (including mental health disabilities).

**Referral**

IEP teams should coordinate the referral of students to DORS. Students with 504 plans may not be automatically referred, but families can contact DORS directly.

To make a referral, go to: https://dors.maryland.gov/consumers/pages/referral.aspx.

**When to apply for Pre-ETS:** Qualifying students can request Pre-ETS as early as 14 years old when in at least high school.

**Services that may be available through Pre-ETS**

Services depend on the identified needs of the student and the availability in a geographic area but can include:

- Job exploration counseling.
- Counseling on opportunities for enrollment in comprehensive transition or post-secondary educational programs.
- Workplace readiness training.
- Instruction in self-advocacy.
- Work-based learning experiences. For students who are diploma bound, worked-based learning experiences typically take place during the summer months.

More information on Pre-ETS services can be found at http://dors.maryland.gov/Brochures/Pre-ETS_Fact_Sheet.pdf.
Vocational Rehabilitation Services/Student Employment Services

Eligibility
Students with disabilities are entitled to DORS Pre-ETS. To receive DORS Vocational Rehabilitation Services/Student Employment Services, a student must be found eligible.

Consistent with federal law, an individual is eligible for DORS Vocational Rehabilitation Services/Student Employment Services if they:

- Have a physical or mental impairment which constitutes or results in a substantial impediment to employment.
- Can benefit from services aimed at improving employment outcomes.
- Require vocational rehabilitation services to achieve employment.

DORS has three eligibility categories:
Category 1: Most significant disabilities
Category 2: Significant disabilities
Category 3: Non-severe disabilities

Due to resource limitations, DORS provides services only to individuals who fall into Categories 1 and 2.

Usually, an individual is considered to have a significant disability (Category 2) if they have a physical or mental disability that limits their ability to:

- walk
- use arms and hands
- talk
- take care of personal needs
- get along with others
- adapt to the workplace

A person may be considered to have a most significant disability (Category 1) if there are substantial limitations in three or more of these areas. Individuals who are eligible for SSI are considered to have most significant disabilities.

For additional information regarding DORS eligibility visit https://dors.maryland.gov/consumers/Pages/eligibility.aspx

Your right to appeal: If you disagree with the DORS finding of eligibility status, you may appeal the decision through the Client Assistance Program.

Call 1-800-638-6343 or email cap.dors@maryland.gov.rd

Referral
If a student has an IEP team, the team should make the referral. If a student has a 504 plan, the family may need to make the referral.

It is advisable to apply for Vocational Rehabilitation Services/Student Employment Services as early as 14, given the likelihood of a lengthy waiting list. Students can receive Pre-ETS and Student Employment Services at the same time while in high school.

Anyone can make a referral to DORS at any time after an individual turns 14 years. Visit https://dors.maryland.gov/consumers/pages/referral.aspx and click on “Employment Services (under age 25),” or call 888-554-0334.

When contacting DORS, families should compile all relevant information such as:

- Educational assessments including cognitive tests or achievement tests.
- Psychological or psychiatric evaluations.
- Hospitalization history.
- Speech and language assessments.
- IEPs and 504 plans.

This information facilitates the determination of eligibility and the development of the Individualized Plan for Employment (IPE).
Services
DORS provides a range of services depending on the needs of the youth. These may include:
- Career assessment
- Career decision-making
- Counseling and referral
- Vocational training
- Work experiences

Services are provided by DORS counselors in local offices or by community providers. DORS also operates the Workforce and Technology Center in Baltimore.

Many DORS offices are co-located with the “One-stop Job Center.” The One-stop Centers are operated by the Department of Labor, Licensing and Regulation (DLLR), and are located in each jurisdiction.

The One-stop Centers serve all individuals who are searching for jobs. They provide access to various resources, including computers and copiers, a library of relevant books, and seminars on diverse job-seeking topics.

DORS counselors facilitate the connection with the One-stop Centers, which also provide information on topics such as how to:
- Use the computers on-site to research job openings
- Fill out job applications
- Produce a professional résumé
- Develop networking skills

DORS counselors will explain to the youth their options related to disclosure of a disability to an employer, and their rights under the Americans with Disabilities Act (ADA). DORS counselors can also help evaluate potential accommodations that might be available to them if they choose to disclose.7

Payment for services
DORS pays only for services that have been pre-approved and authorized in writing by a DORS official. DORS has a sliding scale for payment of many services, based on the income of the family.

Young adults who receive SSI are not required to contribute to the cost of services. DORS provides many services for free, including assessments, counseling, referral, and Supported Employment.

DORS is not a primary funder for post-secondary education. Youth who want to pursue post-secondary education to reach an approved employment goal are required to apply annually for grants and scholarships.

Financial need and other conditions apply to be eligible for financial aid through DORS.

Workforce and Technology Center (WTC) Programs and Services
The Workforce and Technology Center in Baltimore is the main campus of DORS. It offers a diverse variety of services and programs for individuals with disabilities, including intensive career and ability assessments, lifeskills classes, driver’s education courses, classes on using assistive technology or learning to read Braille, and a variety of vocational training programs.

Dormitory services are available Sunday night through Thursday night. An individual must provide their own transportation. It is important to note that the WTC serves individuals aged 16-64 and all disabilities.

7 Some typical job accommodations are: Modified work schedule; Modified examinations, training, or other programs; Adjustments to leave policy.
Two programs particularly relevant to youth of transition age with mental health needs are:

- Pre-vocational Services which focus on developing work readiness, Household skills and personal organization.
- Occupational Training which is offered in 13 program areas for individuals who have a determined career goal.8

It is highly recommended that interested individuals and their families arrange for a tour of the WTC.

For more information on DORS, including the phone numbers and locations of the local DORS offices, visit the DORS website www.dors.state.md.us

**Supported Employment**

Supported Employment is a partnership between DORS and BHA that provides a job coach to help people with mental health disabilities find and keep competitive employment in their communities. It has been found to be a successful program for young adults with mental health disabilities. The goals of Supported Employment are to help individuals secure:

- A traditional job in the community that pays at least minimum wage.
- A work setting that includes people who are not disabled.
- A job coach who provides ongoing, proactive support.

The approach is based on the principles that:

- An individual’s preferences are important.
- A person should choose as much or as little support as they want from their job coach.
- An individual should make the decision whether or not to disclose their disability to employers.
- Follow-along supports should be continuous.

Supported Employment is responsive to the fact that many young adults with mental health needs want to both work and attend school.

If that is a youth’s preference, their job coach will work to help them search for a part-time job that will fit with their school schedule.

Although a fundamental principle of Supported Employment is to obtain a job that pays at least minimum wage, if paid employment is not possible in the youth’s area of interest, job-shadowing or unpaid internships may be an option.

Supported Employment Specialists will continue working with the young adult as long as they want the help.

Transition-age youth with significant or most significant disabilities are eligible for Supported Employment services through a partnership between DORS and BHA. Supported Employment should be written into a youth’s Vocational Rehabilitation Plan with DORS.

There are also opportunities for youth to access Supported Employment services through the Public Behavioral Health System if a youth receives Medicaid. For more information, see chapter 6.

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8 They are: Automotive general service technician; Automotive mechanics; Automotive refinishing; Childcare provider; CVS Retail Academy; CVS Pharmacy Technician; Environmental services; Food service; Office technology; Professional animal worker; Starbucks barista training; Sephora Warehouse Associate; Warehouse technician
There is another employment program that youth with disabilities are eligible for: the Department of Labor's Youth Employment Program. This program serves youth ages 14-21 who are considered low income, and youth ages 16-24. Youth with disabilities are eligible for this program.

In addition, the program serves youth offenders, youth who have dropped out of school, homeless youth, and pregnant and parenting youth.

Services offered include:
- Summer employment
- Occupational skills training
- Paid and unpaid work experiences
- Career counseling and planning
- Employment development and placement services

Available services vary by area. For more information, visit https://www.dllr.state.md.us/employment/wdyouthbrochure.pdf.
Chapter 4: Post-secondary Education
Chapter 4: Post-secondary Education

Post-secondary Education Options

Students have a broad range of options for continuing education.

College

4-year selective-admission colleges seek students who have:
- Good grade point averages
- College preparatory courses in high school
- Good scores on standardized college admissions tests (e.g., SATs)
- Extra-curricular activities

2-year open-admission community colleges admit applicants who meet the requirements for a specific program.
- Community Colleges options include:
  - Taking a few selected courses in an area of interest
  - Taking vocational courses to train for specific jobs or certifications
  - Pursuing an associate degree
  - Preparing for transfer to a four-year college
  - Standardized college admission testing (e.g., SATs) and specific high school courses are not required
  - High school grades are not relevant to admission
  - Schools usually require placement tests in reading, writing and math to determine the level at which to begin course work. If students do not meet the minimum proficiency levels, they are required to take remedial courses.

Vocational and Technical Schools

Vocational schools teach job-specific skills and are devoted to practical training rather than academics. Examples include:
- Technical Institutes
- School of Dog Grooming
- Welding School
- School of Cooking
- Bartender School
- Barber School
- Travel Academy
- Academy of Hair Design

Vocational schools vary greatly in their effectiveness and post-training employment support. Before pursuing a vocational school, it is important to thoroughly research options and obtain references from the high school guidance counselor, alumni, friends, or career resource centers.

Apprenticeships

The Maryland Apprenticeship and Training Program oversees state-approved apprenticeship programs and provides information on the numerous apprenticeship programs in Maryland. Some of the more common apprenticeship programs are:
- Automobile Mechanic
- Cabinet Maker
- Electrician
- Plumber
- Tool and Die Maker
- Bricklayer
- Carpenter
- HVAC/R Technician
- Sheet Metal Worker
- Welder

Apprentices work full time and are paid depending on tenure. Most programs take three to six years to complete, and lead to a nationally recognized certificate of completion. Many apprenticeships are very competitive.

A student’s guidance counselor or transition coordinator can explain the apprenticeship application process and make the appropriate referrals.

Also, you can visit https://www.dllr.statemd.us/employment/appr/apprbecomeappr.shtml for more information.

Credits earned in Maryland community colleges usually transfer to Maryland four-year colleges if the student has completed an associate degree and the credits are for college level courses.
Payment for Post-Secondary Education

Grants, Scholarships and Loans
Families with students contemplating post-secondary education should complete the FAFSA. A FAFSA is required for almost all forms of financial aid such as grants, loans and scholarships, as well as some DORS Vocational Rehabilitation Services. Guidance counselors can assist with applications.

Tuition Waivers
In addition to grants, loans and scholarships, tuition waivers exist for select populations:

- **Youth in Foster Care:** Maryland law provides that youth who are in foster care or kinship care at the time they graduate or complete their GED receive free tuition at all Maryland state colleges and universities. Vocational/trade and private schools are not part of this program. [https://mhec.maryland.gov/preparing/Pages/FinancialAid/ProgramDescriptions/prog_fostercare.aspx](https://mhec.maryland.gov/preparing/Pages/FinancialAid/ProgramDescriptions/prog_fostercare.aspx)

- **Youth Experiencing Homelessness:** The Maryland Tuition Waiver for Homeless Youth provides financial assistance to youth experiencing homelessness who are enrolled as a candidate for an associate degree, bachelor’s degree or vocational certificate at a Maryland public institution of higher education. [https://mhec.maryland.gov/preparing/Pages/FinancialAid/ProgramDescriptions/prog_homelessyouth.aspx](https://mhec.maryland.gov/preparing/Pages/FinancialAid/ProgramDescriptions/prog_homelessyouth.aspx)

- **Students receiving Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) benefits:** SSI/SSDI recipients are exempt from paying tuition at community colleges in Maryland for up to 12 credits per semester if taking classes as part of a degree or a certificate program designed to lead to employment. The waiver is limited to 6 credits if enrolled in community college credit courses for any other reason. [https://mhec.maryland.gov/preparing/Pages/FinancialAid/ProgramDescriptions/prog_disabilities.aspx](https://mhec.maryland.gov/preparing/Pages/FinancialAid/ProgramDescriptions/prog_disabilities.aspx)

Community College Promise Program
The Maryland Community College Promise Scholarship is a scholarship that is available to students who enroll at a Maryland community college.

Eligible students can receive up to $5,000 to cover any remaining tuition and mandatory fees after Federal or state financial aid has been applied.

Who May Apply?
A Maryland high school graduate or GED recipient eligible for in-state tuition who is planning to enroll or is currently enrolled as a full-time (12 credits semester for credit-bearing courses) student at a Maryland community college in:

- A credit-bearing vocational certificate/certificate/associate degree program;
- A sequence of credit or non-credit courses that leads to licensure of certification; or
- A registered apprenticeship program.

In addition, an applicant must:

- Have an unweighted, cumulative high school GPA of 2.3 or higher by the end of first semester senior year, or at graduation. Community college student applicants must have an unweighted, cumulative community college GPA of 2.5 or higher.
- Have a household income of:
  - $100,000, or less, if single or living in a single-parent household, or
  - $150,000, or less, if married or living in a two-parent household.

For more information on the Community College Promise Program, go to [https://mhec.maryland.gov/preparing/Pages/FinancialAid/ProgramDescriptions/prog_MDCommunityCollegePromiseScholarship.aspx](https://mhec.maryland.gov/preparing/Pages/FinancialAid/ProgramDescriptions/prog_MDCommunityCollegePromiseScholarship.aspx)
Unlike IEP accommodations, which are intended to make available to students with disabilities “a free appropriate public education that emphasizes special education and related services designed to meet their unique needs,” Section 504 requires that “reasonable accommodations” be provided to students with disabilities.

Common continuing education accommodations for youth with mental health disabilities include:

- Allowance for excused absences
- Tutoring
- Extended time on tests
- Freedom from distractions when testing

Schools will not provide accommodations that require a fundamental alteration of the coursework. Schools can vary in their support for students with disabilities.

For this reason, it is very important for students to visit the Student Support Services Office (the name of this may vary by institution) before deciding to attend a particular institution.

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Students need to understand their disabilities, know what accommodations work best for them and how to advocate for their needs while in post-secondary education.

Colleges have disability services available but only for students who have documented their disability and requested services.

Reasonable accommodations are available to students, but they must disclose information about the disability and the need for specific accommodations to be protected by the law.

**The Americans with Disabilities Act (ADA)**

The American with Disabilities Act is a federal law that guarantees equal opportunity for people with disabilities in public accommodations, employment, and other arenas.

Unlike the Individuals with Disabilities Educational Act (IDEA), persons with disabilities are not entitled to services but can request “reasonable accommodations.”

**Section 504 of the Federal Rehabilitation Act**

Section 504 of the Federal Rehabilitation Act prohibits discrimination on the basis of a disability in programs conducted or funded by federal agencies.

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**Individuals with Disabilities Education Act (IDEA)** entitles students with disabilities a free and appropriate education.

**Americans with Disabilities Act (ADA) and Section 504** guarantee reasonable accommodations.

<table>
<thead>
<tr>
<th>Required Documentation</th>
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<tbody>
<tr>
<td>- Individualized Education Plan (IEP)</td>
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<tr>
<td>- Documentation focuses on determining whether a student is eligible for services based on specific categories in IDEA.</td>
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<tr>
<td>- High School IEP may not be sufficient.</td>
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<tr>
<td>- Students may need to get evaluation(s) at their own expense.</td>
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<tr>
<td>- Documentation must provide information on specific reasonable accommodations.</td>
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<th>Advocacy</th>
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<tr>
<td>- Parents are actively involved in advocating for appropriate services and supports for their children.</td>
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<tr>
<td>- Schools reach out to parents and their participation in the IEP team process is required.</td>
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<td>- Parents talk directly to their child’s teachers on a regular basis.</td>
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<tr>
<td>- Students are expected to advocate for themselves. Parent involvement is not always actively sought and may be discouraged.</td>
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<tr>
<td>- College faculty and staff do not communicate with parents directly without student’s consent.</td>
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<th>Individual Education Programs and Supports</th>
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<tr>
<td>- The IEP team, which includes the student, parent(s) and school district, develops the Individual Education Program (IEP) and must follow this legal document for services.</td>
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<tr>
<td>- Parent has access to student records and can participate in the accommodation process.</td>
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<tr>
<td>- There are no IEPs in college.</td>
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<tr>
<td>- The Student Support Services Office will develop an accommodation plan based on documentation of disability that is provided by the student.</td>
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<tr>
<td>- Student must request accommodations from the college Student Support Services Office each semester.</td>
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<tr>
<td>- Parent does not have access to student records without student’s written consent.</td>
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**Accessing Accommodations**

At least one month before starting classes, a student (not the parent) should register with the Student Support Services Office. The student will meet with a counselor and provide supporting documentation of their disability, as well as suggestions for accommodations that may be helpful. A student must meet with a counselor **before** receiving accommodations. Accommodations will not be provided retroactively for a student who is performing poorly.

**Supporting Documentation**

The documentation required to be eligible for accommodations differs from one school to another. As a rule, however, schools require documentation prepared by a qualified professional that includes:

- Diagnosis
- Methodology used to determine diagnosis
- Functional limitations
- A medical history, including past treatments and medications

Other documentation might include a letter from a doctor, documentation from high school, or testing results from a professional.

In addition, it can be useful if a professional recommends specific accommodations that might be helpful to the student.

**Parental Involvement**

Parents typically are discouraged from advocating for their child with the Student Support Services Office.

Moreover, parents do not have access to their child’s records without the student’s written consent. Parents should have a discussion with their child about securing the student’s consent.
Chapter 5: Supplemental Security Income (SSI)
Chapter 5: Supplemental Security Income (SSI)

About SSI
Supplemental Security Income (SSI) is a federal program that provides a monthly payment to qualifying individuals with disabilities and limited income and resources.

Benefits are based on financial need and adjusted to the individual’s income and living situation. In addition to a monthly payment, the benefits of SSI eligibility include:
- Automatic eligibility for Medicaid – a comprehensive public health care plan.
- Automatic DORS Category 1 eligibility and all DORS services free of charge.
- Tuition waiver for certain courses and a limited number of credits at Maryland community colleges.

SSI should not be confused with SSDI. They are different programs. People who have worked a certain amount of time and paid into Social Security, who then become disabled, are eligible for SSDI.

SSI is for people with disabilities who either have not worked or have not worked long enough to qualify for SSDI. What follows is a discussion about SSI, since in most circumstances, it is the program that youth of transition age might qualify for.\(^{11}\)

A Decision
Many families struggle with the decision whether to have their child apply for SSI. While there are advantages to a secure income, there are disadvantages as well. Studies have shown that only about 1 out of 100 people who receive SSI ever completely stop needing SSI in their lifetime. Thus, there is a fear that being on SSI might promote dependence. Since the benefit amount is reduced as an individual earns income, some SSI recipients are reluctant to become employed.

Also, some families believe there is a stigma associated with receiving public benefits. Ultimately, the decision to apply for SSI should be made by the young adult, with the family providing information and support.

Eligibility Requirements
An individual age 18 and older is considered disabled if they:
- Have a medically determinable physical or mental impairment which:
  - Results in the inability to do any substantial gainful activity.
  - Has lasted or can be expected to last for a continuous period of not less than 12 months.

To be eligible for SSI, an individual must have limited income and resources. The income limits vary according to circumstances, and the resource limit is $2,000. Not all sources of income or resources, however, are counted towards the limits.

The SSI website provides a list of income and resource exemptions. [https://www.ssa.gov/ssi/text-income-ussi.htm](https://www.ssa.gov/ssi/text-income-ussi.htm)

People with mental health disabilities are eligible for SSI. While many mental health diagnoses are listed in SSI documentation as possible disabling conditions, some are much more likely than others to result in a disability determination. A diagnosis of ADHD, for example, seldom results in a disability determination.

Quite often, initial disability claims for SSI are denied. Therefore, the young adult should expect that an appeal will be necessary.

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\(^{10}\) In 2023.

\(^{11}\) If your young adult has a substantial work history, they may qualify for SSDI rather than SSI. The application process for the two programs is identical. The Social Security Administration will make the determination on whether your application is for SSI or SSDI.
The Application Process

The application process for SSI can be difficult, both in terms of paperwork and emotional impact. You and your child will have to document all the history of their illness, which can be rather traumatic.

In addition, you will be trying to show why your child's illness will prevent them from engaging in any gainful activity. This experience can be demoralizing for your child. The potential benefit of being determined eligible for SSI may outweigh these drawbacks.

A youth may apply for adult SSI after they turn 18. At age 18, the youth will be evaluated on their own income and assets, not the family's (for a child under age 18 to be eligible for Medicaid, a family income must be below a certain amount).

While ideally your child complete as much of the application as they can independently, realistically you will be much better able to tackle the fairly daunting application process.

Start by visiting the Social Security Administration’s website https://www.ssa.gov/applyfordisability/, which provides a detailed description of the application process.

• Online: To apply online visit https://www.ssa.gov/benefits/disability/

• In Person: Appointments to apply in person at the local Social Security Office can be made by calling 1-800-772-1213. Representatives are available Monday through Friday from 7:00am to 7:00pm.

Data shows that calling at the end of the month, at the end of the week, or early in the morning may result in shorter wait times to speak to a representative, who will gather some basic information about your child. The representative will also set up an appointment for you at your local Social Security Office.

Completing a disability benefits application can be an overwhelming process. It helps if you are well prepared before you start.

To complete the application, you will need to gather a list of all services provided to your child, including:

- Emergency Room visits
- Hospitalizations
- Treating psychiatrists
- Treating therapists and/or counselors
- School services – IEPs or 504 plans
- Neuropsychological or other testing
- Medications

Start with the most recent services and providers and work backward. Then you will need to locate:

- The name, address and phone number of each provider/hospital that provided the service.
- The dates that your child received services from the provider/hospital.

You will also need to complete an employment history for your child, which includes providing a list of all the jobs your child has held along with the names, addresses and phone numbers of their employers, and the dates they were employed.

Other documentation must be mailed to the Social Services Administration or brought to the local office:

- Social Security Card or number
- Original birth certificate
- Copies of bank statements for checking and savings accounts
- Copies of other assets such as savings bonds
- W-2 form from last year (if your child worked)
- If your child is living with you, you will need a written agreement from your child to pay fair market value for housing and food. If you do not have a lease agreement with your child, the free room and board that you are providing to them will be counted as a source of income and their monthly check will be reduced.
You do not need to provide medical records. The Disability Determination Service will send letters to your child’s medical providers (including hospitals) to request medical records. The Disability Determination Service may also require that your child has a psychiatric evaluation with their own psychiatrist, at no cost to you.

SSI determinations usually take about three to six months. It is not unusual for people with mental health disabilities to be denied on the first application. Therefore, plan to appeal any denial. Many applicants who are turned down initially are determined eligible on appeal. In a denial letter, Social Security provides detailed information about how to file an appeal.

Once Social Security makes a favorable disability determination, the claimant is eligible for SSI benefits retroactive to the date they initially applied for the benefits.

Since six months or more may have passed, it’s likely that a large back payment is owed to the individual by SSA, which will be paid in three installments.

Managing SSI benefits
Monthly SSI checks may be sent directly to your child or, if Social Security determines that your child will not be able to manage their monthly checks, they may require a “Designated Payee” for the youth.

You can apply to be named your child’s designated payee (see chapter 8).

- If you wish to ensure that your child receive the full SSI benefit, and if your child is living with you, you must draw up a rental agreement charging your child room and board.

- All income the youth earns must be reported to SSA. The amount of SSI will decrease as the recipient earns wages, based on a formula that incentivizes employment. **SSI recipients will always make more money by working than by not working.**
- If your child is under the age of 22 and regularly attending school, the allowable income limits are increased. Certain stipulations apply.

Contact SSA for more information ([www.ssa.gov](http://www.ssa.gov/) or 1-800-772-1213).

**Employed Individuals with Disabilities Program**
The Employed Individuals with Disabilities Program (EID) allows individuals with disabilities who lose SSI due to their income to retain full Medicaid coverage. The impetus for the EID program is to encourage SSI recipients to work, and work at higher salaried positions, without having to worry about losing their Medicaid.

The EID program is for Marylanders who:

- Have disabilities that meet Social Security's medical criteria
- Work for pay
- Are 18-64 years old
- Meet the income limit
- Meet the resource limit (which does not count the home in which the applicant lives, any vehicles, and many types of retirement accounts).

EID enrollees pay a monthly premium based on their level of countable income. EID beneficiaries receive the full Medicaid coverage, and can also have private insurance.

For more information, contact the Maryland Department of Disabilities at 1-800-637-4113.
Maryland offers free or reduced fare programs to individuals with disabilities to enable them to use community transportation.

To learn about these programs, visit Maryland MTA reduced fare program:

https://mta.maryland.gov/disabled-reduced-fare-program
Chapter 6: Health Care
Chapter 6: Health Care

Health care reform
Over the last decade there have been dramatic changes in health care law. The Affordable Care Act (ACA) radically altered both private health insurance and Medicaid regulations.

The Affordable Care Act
The ACA is a federal law that impacted both private health insurance and Medicaid coverage. The legislation did a number of things:

• Required health insurers to allow families to maintain dependent children on their health insurance policy until a young adult’s 26th birthday, regardless of the youth’s student status.
• Required that many insurance plans cover mental health and substance use services.
• Allowed states to expand Medicaid coverage to childless adults, which Maryland has done.

Medicaid
Medicaid (also called Medical Assistance) is a joint federal-state program that pays for the health care of people with disabilities and people who have low income. Medicaid offers comprehensive health and mental health coverage. Medicaid is not the same as Medicare. Medicare is for people who are over the age of 65, are on SSDI, or who have certain medical conditions.

Medicaid Eligibility Requirements
Currently, transition age youth are eligible for Medicaid under the following conditions:

• If they were in foster care when they turned 18, they are Medicaid eligible until age 26.
• If they receive a disability determination and are eligible for SSI, they are automatically Medicaid eligible. If they are low income, they are Medicaid-eligible in Maryland.
• If they are low income

An individual can apply for Medicaid at any time. Enrollment is open year round. If a person is deemed eligible for Medicaid, coverage will begin on the first day of the month that they applied. Medicaid must be renewed once a year. Recipients will be contacted when it is time to renew.

How to Apply for Medicaid
In Maryland, to apply for Medicaid:

• Apply online at https://www.maryland-healthconnection.gov/
• Call 1-855-642-8572.
• Find free, in-person help nearby at https://www.marylandhealthconnection.gov/find-help/

Maryland Health Benefit Exchange
If a young adult earns more than the Medicaid income threshold and they are not on their parent’s private insurance, they can purchase insurance through Maryland Health Benefit Exchange during the open enrollment period (or at any time for specific qualifying life events). There are a variety of plan options, with various premium amounts that are based on income.

Young adults ages 18-34 may be able to receive help paying for their monthly health premium. The amount of financial help received varies based on income, family size and zip code.

To find out if a young adult qualifies, visit https://www.marylandhealthconnection.gov/health-coverage/financial-help/young-adult-assistance/
The Public Behavioral Health System
If a person receives Medicaid, they will be eligible to obtain mental health services through the Public Behavioral Health System (PBHS).

In Maryland, the PBHS is managed by BHA (a state agency) through Local Behavioral Health Authorities in each Maryland jurisdiction.

The PBHS provides mental health services to individuals who receive Medicaid or, in very specific cases, to those who are deemed exceptionally needy. The PBHS offers a spectrum of mental health services, many of which are not available through private insurance. Most services are low-cost or no-cost.

PBHS Eligibility Criteria
- Must be eligible for Medicaid, or
- Must meet the eligibility criteria for exceptional circumstances

The criteria for exceptional circumstances is very narrow, applying to such cases as individuals experiencing homelessness, youth coming out of residential treatment centers, or individuals transitioning from incarceration.

Many conditions apply in these circumstances. Contact the Local Behavioral Health Authority\(^\text{12}\) for help determining an individual’s eligibility for services in the PBHS if they are not Medicaid-eligible.

Services for Adults
The following list is not exhaustive, but includes the more commonly utilized services:
- Individual mental health practitioner services (sessions with counselors, psychologists and psychiatrists)
- Medications
- Psychiatric inpatient care (hospitalization)
- Psychiatric day treatment (partial hospitalization)
- Psychiatric Rehabilitation Programs (PRP) – a day program, for 5-6 hours/day, 5 days a week. Programs that are not specifically for transition age youth are more appropriate for adults who have serious and persistent mental illness.
- Residential Rehabilitation Programs (RRP). Programs that are not specifically for transition age youth are more appropriate for adults who have serious and persistent mental illness
- Supported Employment and vocational services
- Case Management Services – a case manager is assigned to coordinate care across all providers and agencies and to help with benefits.

Waiting lists may exist for some of these services. All services have eligibility requirements, called “medical necessity criteria.” For some services, such as therapy, psychiatry and medications, the eligibility criteria is low. For other services the eligibility criteria is more narrow.

To receive PRP or RRP services, for example, an adult must have one of the following DSM-V diagnoses, along with specified functional impairments:
- Schizoaffective disorders
- Psychotic disorders
- Bipolar I or Bipolar II disorder
- Major Depressive Disorder
- Borderline Personality Disorder

The medical necessity criteria for Supported Employment is unique to young adults. In general, a youth of transition age is eligible for Supported Employment services if they have one of the following DSM-V diagnoses:
- Schizoaffective disorders
- Psychotic disorders
- Disruptive Mood Dysregulation Disorder
- Major Depressive Disorder or Unspecified Depressive Disorder
- Bipolar I or Bipolar II disorder
- Schizotypal Personality Disorder
- Borderline Personality Disorder
- Social Anxiety disorder
- Panic disorder
- Agoraphobia
- Generalized Anxiety Disorder
- Obsessive Compulsive Disorder
- Post-traumatic Stress Disorder

\(^{12}\) For a list of Local Behavioral Health Authorities and their contact information, see appendix 2.
PBHS Programs for Youth of Transition Age

In addition to the general service array for adults, BHA has several programs geared toward serving only youth of transition age. These programs are designed to move youth into adulthood – not into the adult-serving mental health system.

The underlying philosophy of transition age programs is that with the proper supports in place, and given time to mature, many of these youth will not require long-term services in the adult system.

Appendix 3 provides brief descriptions of BHA’s programs for youth of transition age. Typically, a youth must be a resident of the county in which the program is located in order to receive services, but exceptions may be made in certain circumstances.

Appendix 3 also lists two programs for youth of transition age for which youth do not need to be eligible for the PBHS in order to receive services called the Healthy Transition Initiative. This initiative offers a program for youth who reside Anne Arundel County and another program for youth in the Mid-Shore region.

For more information about the programs dedicated to serving youth of transition age, contact the Local Behavioral Health Authority in your jurisdiction (see Appendix 2).
Chapter 7: Housing Options
Chapter 7: Housing Options

Housing Realities
Most families of young adults will find their youth will continue to live with them, if not on a permanent basis, then on a revolving door basis – moving out for a time and then moving back in.

Youth with mental health disabilities may well need to live in the family home longer than average, since it can be more difficult for them to attain a job that pays well enough to enable them to live on their own. In some cases, however, the severity of a young adult’s emotional disability makes living at home difficult for them and the family.

Though it may be a financial strain, it is sometimes wise for youth to get experience living independently and there are subsidized and private-pay housing options to support this.

Subsidized Housing – Residential Rehabilitation Programs (RRPs)
BHA operates several Residential Rehabilitation Programs (RRPs). RRPs provide the most intensive level of housing service. Typically in these settings, two to three adults live in a furnished apartment or townhouse, with varying levels of staff support as needed.

A reasonable rent is charged and residents are expected to be receiving SSI or have a current application pending. A resident’s stay in an RRP is meant to be time-limited and efforts are made to help them develop independent living skills.

To meet the medical necessity criteria to live in an RRP, a young adult must have one of the following DSM-V diagnoses, along with having specified functional impairments:

- Schizoaffective disorders
- Psychotic disorders
- Bipolar I or Bipolar II disorder
- Major Depressive Disorder
- Borderline Personality Disorder

There are two types of RRPs.

Adult Residential Rehabilitation Programs
– are for adults with mental health disabilities.
  - Must be Public Mental Health System eligible and meet the medical necessity criteria.
  - May be appropriate for young adults who will need RRP services beyond 25 years of age.
  - There are a limited number of beds and waiting lists exist
  - County residents have priority.
  - Intensity of need takes priority.
  - For information, contact your Local Behavioral Health Authority (Appendix 2).

There are select RRPs for transition age youth only (see Appendix 3 for a list of transition age youth programs with RRPs).

Transition-age Youth (TAY) Residential Rehabilitation Programs
- Must be eligible for the Public Mental Health System and meet the medical necessity criteria.
- For youth of transition age only (18 to 26 years old).
- There are a limited number of beds and waiting lists exist.
- County residents have priority.
- Intensity of need takes priority - If a young adult is homeless or coming out of a Residential Treatment Center, they will go to the top of a waiting list.

For information about the transition age youth residential programs, see Appendix 3. For information about a particular program, contact the Local Behavioral Health Authority in that county (see Appendix 2).
Other Subsidized Housing Programs

Department of Human Services Independent Living Programs
These programs are for young adults 18 to 21 years old who are leaving foster care. A young adult’s social worker should connect them to the benefit. For further information, visit https://dhs.maryland.gov/foster-care/youth-resources/independent-living/

Main Street Housing
Main Street Housing is a non-profit organization that provides affordable rental housing opportunities to individuals with psychiatric disabilities and low income. The organization owns properties in 13 counties and is continually expanding its number of rental units.
- Houses have two or three tenants.
- Rent is set at affordable levels.
- Applicants must meet minimum income requirements.
- For information, go to http://www.mainstreethousing.org/

Section 811 housing – for all disability groups
The Section 811 Project Rental Assistance Program provides project-based housing and additional support services for people with disabilities and low income. With Section 811 Project Rental Assistance, the tenant pays 30% of their income for rent and utilities, and the program pays the rest of the rent directly to the landlord.

Harry and Jeanette Weinberg Affordable Rental Housing Opportunities for Persons with Disabilities Initiative – for all disability groups
Under this program, eligible tenants pay 30% of their income to rent and utilities.

Eligibility:
To qualify for this initiative, applicants must:
- Be between the ages of 18 and 62
- Be SSI or SSDI recipients
- Have a gross household income at or between 15-30 percent of Area Median Income (AMI) in the Maryland county in which they wish to reside
- Not be convicted sex offenders
- Not have been convicted of possession of methamphetamines on Public Housing Authority-owned property

There are populations who receive priority access to Section 811 housing:
1. People with disabilities living in institutions.
2. People with disabilities at risk of institutionalization.
3. People with disabilities coming out of a group home or a Department of Health assisted living facility.
4. People with disabilities who are homeless.
5. Even if an individual is in one of the priority populations, there is often a lengthy waiting list.

For more information, contact the Maryland Department of Disabilities at 410-767-3660 or visit housinginfo.mdod@maryland.gov.
Private-pay Housing Options
Since it can be difficult to access subsidized housing, either because of eligibility requirements or because of waiting lists, private-pay options are more realistic possibilities for youth of transition age.

- College/university dormitories: the “room” part of “tuition, room and board.”
- Public message boards seeking roommates or advertising rooms for rent. Be savvy about meeting up with strangers.
- A few private-pay group homes for young adults with mental health challenges exist outside of Maryland, but they can be cost prohibitive for many families.
Chapter 8: Legal Matters
Chapter 8: Legal Matters

*Information contained in this section is meant only as a guide and should not be considered legal advice or replace the advice of legal counsel. It is important to consult with a lawyer who is knowledgeable about issues pertaining to individuals with disabilities, particularly regarding financial matters.*

**Age of Majority**
When a child turns 18, they become a legal adult, regardless of whether their parent or caregiver feels they are ready for this status. Men must register for the selective service. Young adults must act for themselves in all legal matters.

They have the right to exclude their parent or caregiver from receiving medical or financial information about them, and the right to exclude them from participating in any decision-making process. This can be a scary prospect for parents of young adults with a mental health disability. Their young adult may seem especially vulnerable.

There are many ways for young adults to consent to the disclosure of confidential information and include parents in decision-making. Some are voluntary at the discretion of the young adult; others are involuntary. As youth transition to adulthood, it is important to always begin with choosing the least restrictive option in matters of decision-making. The ultimate goal is for the young adult to feel as empowered as possible.

**Consent to share information**
If a young adult agrees to allow their psychiatrist, therapist, or other treating medical professional or hospital to share information with a third party, including a parent or caregiver, they can simply write a statement to this effect.

Many service providers can provide the young adult a “Release of Information” to document who the service provider can talk to and what information can be shared. The young adult may revoke the statement at any time.

If the young adult does not complete such a document, their service providers are prohibited from releasing information to anyone for whom the young adult has not provided consent.

**Tools to Promote Shared Decision-Making**
In addition to consenting to share information about themselves, young adults also have several options to engage in shared decision-making with other in general or in specific circumstances.

**Advance Directives for Medical Care**
An advance directive allows a person to decide who they want to make health care decisions for them, especially if they are unable to do so themselves. It can also be used to state what kind of treatment a person wants or does not want.

An advance directive can either name a health care agent, or provide health care instructions, or do both. It is voluntary and empowering to the individual.

- **Health care agent**
  A health care agent is someone named to make decisions about another’s health care. (This sometimes is also called a “durable power of attorney for health care,” but, unlike other powers of attorney, this applies only to health care decisions, not financial issues.) A health care agent has the authority to see that doctors and other health care providers give a person the type of care they want, and that they do not give them treatment against their stated wishes. A health care agent has full power to receive and provide information about the individual.

- **Health care instructions for treatment**
  Health care instructions allow an individual to state what treatment they want or do not want in the event they are unable to make their wishes known themselves.

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13 Education is an exception. As long as your child is in high school, you are entitled to receive information about their educational progress and to participate in any planning process. Once your child advances to post-secondary education, however, you lose these entitlements.
Preparing an advance directive
Advance directives do not need to be drawn up by an attorney. Samples can be obtained from the website of the Maryland Attorney General. There is no one form that must be used. To make the advance directive valid, it must be signed in the presence of two witnesses, who will also sign. If a health care agent is named, they may not be a witness. Maryland law does not require the document to be notarized.

Copies of the advance directive should be given to doctors and hospitals. If a health care agent is named, that person should also be given a copy of the advance directive. For a sample advance directive form and instructions, go to: https://www.marylandattorneygeneral.gov/Pages/HealthPolicy/advancedirectives.aspx

Implementation of an advance directive
If a person names a health care agent, they should make clear in the advance directive when they want the agent to act on their behalf. This can be at any time (including the present). An advance directive typically takes effect, however, when a doctor certifies in writing that a person is not capable of making a decision about their care. A person can change or rescind their advance directive at any time.

Advance Directives for Mental Health Care
Advance directives for mental health treatment are identical to medical advance directives, except they are used for psychiatric decision-making. An advance directive for mental health treatment is an empowering and proactive step for a person with a mental health disability.

All the regulations that apply to advance directives, including their preparation and implementation, apply to advance directives for mental health treatment. For a sample advance directive for mental health treatment, see Appendix 4.

As in medical advance directives, a person may do one or both of the following in an advance directive for mental health treatment.

• Health care agent
An individual can appoint a health care agent to receive and share medical information about them, and/or to make treatment decisions for them. It can go into effect whenever the individual chooses – either immediately after being witnessed, or when the person is declared medically incompetent by a treating physician.

• Treatment directive
In a treatment directive, an individual states their wishes regarding treatments, medications, treatment providers, visitors, and who providers can speak with about their care. A treatment directive goes into effect when a treating physician determines that the individual is mentally incompetent.

It is important to note that an individual may revoke their psychiatric advance directive at any time - even in the event that they are found incompetent to make decisions.

Also, Maryland law does not allow a person, even a health care agent, to force another adult into a psychiatric hospital.
Financial Power of Attorney
There are different kinds of financial powers of attorney: general and limited. Like advance directives, financial powers of attorney are voluntary.
- A general power of attorney conveys to an agent full power and authority to act on behalf of the grantee in business and personal situations involving bank accounts, real estate, stocks, contracts, and anything else that may arise.
- A limited power of attorney is used for a limited duration or circumstance, to give the agent the authority to perform a specific transaction, or series of transactions, on behalf of the grantee. All this information must be clearly stated in the document.

Financial powers of attorney are simple documents. There is no particular form used to create a financial power of attorney and sample forms can be found online. They do not need to be witnessed or notarized, but they do need to be signed by the grantee.

Representative Payee
When the Social Security Administration (SSA) makes a disability determination, it may also determine that the beneficiary cannot manage their own money. In this event, SSA will seek to appoint a representative payee, preferably someone who lives with the beneficiary and has their best interest in mind. Parents are frequently named the representative payee for their child.

A representative payee must ensure that the payee's benefit checks are used for the beneficiary's needs. They must file an annual report that states how the beneficiary's money was spent.

If the SSA did not find that a representative payee is needed, it still may be possible to become a representative payee if there is indication that the young adult is unable to manage their own money. Applications to become a representative payee are made at the local SSA office. To locate the nearest office, visit www.ssa.gov.

Representative payee application must provide:
- An application form that must be completed in a face-to-face interview.
- Documents to prove applicant's identity.
- Applicant's social security number.

Once the application is completed, SSI will investigate and make a determination as to whether the young adult is capable of managing their money.

Representative payees should use their position to empower the young adult to improve their financial decision-making skills.

Guardianship
Guardianship is the most restrictive way to assist a person with decision-making. It is an extreme measure, and the law requires that it only be considered when less restrictive alternatives have failed.

Guardianship:
- Deprives the person of the right to make virtually all personal and/or financial decisions.
- Must be determined in a court by a judge. Laws differ by state and Maryland has very restrictive laws. It is quite difficult to be granted guardianship, especially of a person who solely has a mental health disability that is not co-occurring with other disabilities.
- Is costly and time-consuming.
- Potentially sets up an adversarial relationship with your child, who will have a court-appointed attorney represent them.
There are three types of guardianship:

• Guardianship of Person: makes decisions about the person’s medical care, residence, food, clothing, shelter, etc.
• Guardianship of Property: makes decisions only about the person’s money, income, property, and other assets
• Guardianship of both: If less restrictive measures have failed, it is preferable to have limited guardianship, such as just guardianship of property, rather than full guardianship. This limitation allows your child to maintain some control of their own life.

It should be noted that the guardian of an adult person with a disability does not have the authority to commit that person to a psychiatric facility without an involuntary admission proceeding.

It is important to consult a lawyer if you are considering guardianship.

Supported Decision-making
Supported decision-making is an alternative to Guardianship. In supported decision-making, an adult with a disability selects a supporter or supporters from whom they can ask for assistance with a financial matter, education, or housing (to name a few).

A supporter can help the young adult think about all the parts of a decision. The supporter, however, does not make the decision. The young adult makes their own decision. A supported decision-making agreement can be used to describe the help the young adult needs and wants.

For more information about supported decision-making and for a sample agreement, visit Disability Rights Maryland’s website at https://disabilityrightsmd.org/resources/

Estate Planning
Families have important issues to consider when planning how to leave money or assets to a child with mental health disabilities. First, an inheritance over allowable income limits will cause their child to lose their SSI and possibly their Medicaid.

Second, the family must consider whether the child is able to manage a bequest independently, and how will the child support themselves in their later years.

Due to the complex questions these issues raise, it is wise to hire an attorney who specializes in disability estate planning. An attorney who is knowledgeable about government benefits and sensitive to the needs of people with disabilities can guide you through the issues and help you consider alternatives on how best to structure your estate.


It may also be appropriate to discuss potential inheritances with grandparents or anyone else who might leave a bequest to your child. Again, an attorney with expertise in special-needs estate planning can recommend options that will preserve your child’s eligibility for benefits.

Conclusion
While navigating the transition years can feel like traveling through treacherous waters at times, there is ample reason for hope. Studies have shown that continued family support and commitment to a young adult vastly improve the odds of achieving a successful outcome.

Your very act of reading this handbook demonstrates your commitment to helping your young adult. We hope that it will provide you with some information and tools to assist your young adult to achieve their dreams.
Appendix
Appendix 1

Project Access

What:
Project Access is a transition and retention program located on the Howard Community College campus in Columbia, Maryland.

Project Access is aimed at helping high school students with disabilities get into college and succeed there. **Students completing grades nine, ten, eleven and twelve and who will be receiving a high school diploma are eligible.**

The four-week Project Access Summer Institute offers instruction in comprehensive reading strategies, composition writing, mathematics, executive functioning skills/strategies to support college success, advocacy skills, career development skills, and more.

Peer mentors, successful college students with disabilities, will help as mentors to show the students ways to achieve success.

**Prompting or additional support provided by paraeducators or assistants is NOT provided.**

Project Access attempts to replicate a college environment, which requires a level of independence and self-regulation on campus and within the classroom.

**Certain ADA accommodations will be provided.**

Who:
- Project Access accepts students coming out of 9th, 10th, 11th, and 12th grades. Students must be on a diploma track and recognized by their high schools as having the ability to do college-level work.
- Students must have a documented disability (IEP or 504 Plan) Free transportation is provided for students in Howard County from public locations.

When:
- The Institute is held for 4 weeks in July, 5 days a week, from 9:00 – 3:00pm.
- The application process begins in early January and continues until the middle of April.

Cost:
- The cost for the 2023 Summer Institute was $850 for Howard County residents and $860 for out-of-county residents. Financial aid is available.

For more information, go to [https://www.howardcc.edu/services--support/academic-support/disability-support-services/project-access/](https://www.howardcc.edu/services--support/academic-support/disability-support-services/project-access/) or contact the Associate Director of Project Access, Dianne Nagle at (443) 518-4625.
Appendix 2

Local Behavioral Health Authorities by County
Each region in Maryland has a Local Behavioral Health Authority to assist Medicaid recipients with finding and accessing treatment and recovery for mental health disorders.

Allegany County
Allegany Co. Behavioral Health System
P.O. Box 1745 Cumberland, MD 21501
301-759-5070 achd.bhso@maryland.gov

Anne Arundel County
Anne Arundel Co. Mental Health Agency
PO Box 6675, 1 Truman Parkway,
101 Annapolis, MD 21401
410-222-7858 mhaaac@aol.com
Anne Arundel County Health
Department Behavioral Health
3 Harry S. Truman Parkway HD24
Annapolis, MD 21401
410-222-7164 www.aamentalhealth.org/

Baltimore City
Behavioral Health System Baltimore, Inc.
100 South Charles Street, Tower II,
Floor 8, Baltimore, MD 21201
410-637-1900 www.bhsbaltimore.org

Baltimore County
Baltimore County Department of
Health, Bureau of Behavioral Health
6401 York Road, Third Floor
Baltimore, MD 21212
410-887-3828

Calvert County
Calvert County Core Service Agency
P.O. Box 980 Prince Frederick, MD 20678
410-535-5400

Caroline County
Mid Shore Behavioral Health, Inc.
28578 Mary’s Court, Suite 1 Easton,
Maryland 21601
410-770-4801

Carroll County
Carroll County Local Behavioral
Health Authority
290 South Center Street
Westminster, MD 21157
410-876-4449

Cecil County
Cecil County Core Service Agency
401 Bow Street Elkton, MD 21921
410-996-5112

Charles County
Charles County Local Behavioral
Health Authority
P.O. Box 1050, 4545 Crain Highway
White Plains, MD 20695
301-609-5757

Dorchester County
Mid Shore Behavioral Health, Inc.
28578 Mary’s Court, Suite 1 Easton,
Maryland 21601
410-770-4801

Frederick County
Frederick County Mental Health
Management Agency
22 South Market Street, Suite 8
Frederick, MD 21701
301-682-6017

Garrett County
Garrett County Behavioral Health Authority
1025 Memorial Drive Oakland, MD 21550
301-334-7440

Harford County
Office on Mental Health of Harford County
2231 Conowingo Rd. Suite A Bel Air, MD 21015
410-803-8726

Howard County
Howard County Health Department
8930 Stanford Road Columbia, MD 21046
410-313-7316
Kent County
Mid Shore Behavioral Health, Inc.
28578 Mary’s Court, Suite 1 Easton, Maryland 21601
410-770-4801

Montgomery County
Montgomery County Department of Health & Human Services
401 Hungerford Drive, 1st floor
Rockville, MD 20850
240-777-1400

Prince George's County
Prince George’s County Health Department
9314 Piscataway Road Clinton, MD 20735
301-856-9500

Queen Anne's County
Mid Shore Behavioral Health, Inc.
28578 Mary’s Court, Suite 1 Easton, Maryland 21601
410-770-4801

Somerset County
Somerset County Health Department
8928 Sign Post Road Westover, MD 21871
443-523-1787

St. Mary’s County
St. Mary’s County Health Department
21580 Peabody Street PO Box 316
Leonardtown, MD 20650
301-475-4330

Talbot County
Mid Shore Behavioral Health, Inc.
28578 Mary’s Court, Suite 1 Easton, Maryland 21601
410-770-4801

Washington County
Washington Co. Mental Health Authority
339 East Antietam Street Suite 5
Hagerstown, MD 21740
301-739-2490

Wicomico County
Wicomico Behavioral Health Authority
108 East Main Street Salisbury, MD 21801
410-543-6981

Worcester County
Worcester County Local Behavioral Health Authority
6040 Public Landing PO Box 249
Snow Hill, MD 21863
410-632-3366
Appendix 3

Behavioral Health Administration Transition-age Youth (TAY) Programs

The Behavioral Health Administration made available grant money to counties throughout the state to provide services for transition-age youth with significant mental health needs. Although not always specified in the eligibility terms, youth must be in the Public Behavioral Health System (PBHS) in order to be eligible for these programs. The following are BHA’s grant funded programs that are exclusively for young adults. The contact information for each jurisdiction can be found in Appendix 2.

Abbreviations:
PRP: Psychiatric Rehabilitation Program
SE: Supported Employment
RRP: Residential Rehabilitation Program
PBHS: Public Behavioral Health System

<table>
<thead>
<tr>
<th>Area Served:</th>
<th>Baltimore City - Also a Healthy Transitions Initiative* site</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ages Served:</td>
<td>16-25</td>
</tr>
<tr>
<td>Type of Program:</td>
<td>PRP, with access to SE</td>
</tr>
<tr>
<td>Eligibility:</td>
<td>Youth must be in the PBHS and meet the medical necessity criteria for Targeted Case Management or PRP</td>
</tr>
<tr>
<td>Contact:</td>
<td>Anne Arundel Mental Health Agency/Arundel Lodge</td>
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<thead>
<tr>
<th>Area Served:</th>
<th>Baltimore City</th>
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</thead>
<tbody>
<tr>
<td>Ages Served:</td>
<td>18-25</td>
</tr>
<tr>
<td>Type of Program:</td>
<td>RRP, with access to SE</td>
</tr>
<tr>
<td>Eligibility:</td>
<td>Diagnosed with Serious Mental Illness and meet the medical necessity criteria for RRP</td>
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<tr>
<td>Contact:</td>
<td>Behavioral Health Systems Baltimore</td>
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<tr>
<th>Area Served:</th>
<th>Baltimore City</th>
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</thead>
<tbody>
<tr>
<td>Ages Served:</td>
<td>18-25</td>
</tr>
<tr>
<td>Type of Program:</td>
<td>RRP, with access to SE</td>
</tr>
<tr>
<td>Eligibility:</td>
<td>Diagnosed with Serious Mental Illness and meet the medical necessity criteria for RRP</td>
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<tr>
<td>Contact:</td>
<td>Behavioral Health Systems Baltimore/University of Maryland Harbor City Unlimited</td>
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<tr>
<th>Area Served:</th>
<th>Baltimore County</th>
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<tbody>
<tr>
<td>Ages Served:</td>
<td>18-25</td>
</tr>
<tr>
<td>Type of Program:</td>
<td>Independent Living Program/Supported housing/RRP with access to SE</td>
</tr>
<tr>
<td>Eligibility:</td>
<td>Diagnosed with Serious Mental Illness and meet medical necessity criteria and financial eligibility for PRP or RRP</td>
</tr>
<tr>
<td>Contact:</td>
<td>Baltimore County Department of Health, Bureau of Behavioral Health/People Encouraging People</td>
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<tr>
<th>Area Served:</th>
<th>Charles, Calvert, and St. Mary’s Counties</th>
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<tbody>
<tr>
<td>Ages Served:</td>
<td>16-25</td>
</tr>
<tr>
<td>Type of Program:</td>
<td>PRP; SE; Supported Education</td>
</tr>
<tr>
<td>Eligibility:</td>
<td>Individuals must meet the medical necessity criteria established for the PBHS for each service</td>
</tr>
<tr>
<td>Contact:</td>
<td>Charles County Local Behavioral Health Authority/Pathways</td>
</tr>
<tr>
<td>Area Served</td>
<td>Ages Served</td>
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</tr>
<tr>
<td>Charles, Calvert and St. Mary’s Counties</td>
<td>13-21</td>
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<tr>
<td>Frederick and Washington Counties</td>
<td>16-25</td>
</tr>
<tr>
<td>Garrett County</td>
<td>13-21</td>
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<tr>
<td>Howard County</td>
<td>16-25</td>
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<tr>
<td>Kent, Queen Anne’s, Talbot, Caroline, and Dorchester Counties – Also a Healthy Transition Initiative* site</td>
<td>18-25</td>
</tr>
<tr>
<td>Montgomery County</td>
<td>18-22</td>
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<tr>
<td>Montgomery County</td>
<td>18-25</td>
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</table>
Area Served: Worcester County
Ages Served: 16-24
Type of Program: PRP
Eligibility: Mental health diagnosis – meet the medical necessity criteria for service
Contact: Worcester County Local Behavioral Health Authority

Area Served: Prince George's County
Ages Served: Ages Served: 18-24 – must be a parent or pregnant
Type of Program: RRP
Eligibility: Must be 18-24 years of age with at least one child or pregnant
Contact: Contact: Prince George's County Health Department/Rehabilitation systems, Inc.

Area Served: Montgomery County
Ages Served: 16-24
Type of Program: PRP; SE; Supported education
Eligibility: Mental health diagnosis; meet medical necessity criteria for service
Contact: Montgomery County Department of Health and Human Services/ Cornerstone Montgomery (Career Transition Program)

*Healthy Transitions Initiative*
In addition to the above programs, the Behavioral Health Administration received a federal “Healthy Transitions Initiative” grant to expand programming for youth of transition age. BHA is implementing two programs – one in Anne Arundel County and one in the Mid-Shore. These programs provide transition facilitators to work with youth aged 16-24 who have a serious mental health disability.

The programs offer an intensive form of transition facilitation, providing access to Supported Employment, supported education, supported living, Family Psychoeducation, community treatment, and other individualized supports existing within the communities. A young adult doesn’t necessarily have to be eligible for services through the Public Mental Health System to enroll in the programs. For more information contact the Anne Arundel County Mental Health Agency or Mid-Shore Behavioral Health, Inc.

**Early Intervention Program (for psychosis)**
The EIP offer specialized programs with expertise in the early identification, evaluation, and comprehensive psychiatric treatment of adolescents and young adults at risk for, or in the early stages of, a mental illness with psychosis. The programs use an integrated approach to address the health and mental health needs of young adults, including providing support for co-occurring substance use disorders. Programs are located in Baltimore City, Baltimore County, Montgomery County, and Prince Georges County.

Services vary by program, and can include education about the illness, medication, therapy, supported employment, supported education, and linkages to resources such as housing and insurance.

For more information go to [https://marylandeip.com/](https://marylandeip.com/) or call 877-277-6347.
Appendix 4

Sample Advance Directive for Mental Health Treatment

I (name) ____________________________ being an adult, and emotionally and mentally able to make this directive, willfully and freely complete this health care advance directive to be followed if it is determined by two physicians that I am not able as a result of a psychiatric or physical illness to assist in my health care treatment. (The second physician may not be involved in my treatment). It is my intent that care will be carried out despite my inability to make choices on my own behalf. In the event that a guardian or other decision-maker is chosen by a court to make health care choices for me, I intend this document to take priority over all other means of discovering intent while able.

The usual symptoms of my identified mental disorder may include:

I direct my health care providers to follow my choices as set forth below:

**Medications for treatment of my mental illness:**
If I become unable to make informed choices for treatment of my mental illness, my wishes regarding medications are as follows:

<table>
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<tr>
<th>Medication</th>
<th>Reaction</th>
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I may be allergic to the following medications:

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<tr>
<th>Medication</th>
<th>Reaction</th>
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The following medications have been helpful in the past and I would agree to them if prescribed:

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Initial all that apply:

_____ I agree to the performance of all tests and other means to identify or assess my mental health.

_____ I agree to the performance of all tests and other means to check how well the medications are working and their effect on my body, i.e. blood tests.

_____ I specifically do not agree with dispensing the following medications, or their own brand-name, trade name or generic equal.

<table>
<thead>
<tr>
<th>Medication</th>
<th>Reasons for not agreeing</th>
</tr>
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_____ I agree with dispensing all medications prescribed by my treating psychiatrist, unless listed above.

**Admission to and continuation of Mental Health Services from a facility other than an inpatient hospital.**

Check one

_____ I do not have a preference about receiving mental health services from a facility or other provider than a psychiatric hospital, i.e., clinic, PRP, mobile treatment.

_____ I agree to receive services from a facility, which is not a hospital.

_____ I do not agree to receive mental health services from a provider or facility other than a hospital.

**Conditions/ Limits:**


**Other Choices**

If I am unable to make informed decisions about my mental health choices, my wishes regarding other information or options are listed below:


**Release of Records**

I authorize the release of (check one):

_____ any and all mental health records

_____ the following mental health record/ records of the following providers:


 to:

(name of person records may be released to)
Appointment of Health Care Agent

I select the following person as my agent to make health care choices for me:

Name ________________________________________________________________
Address _____________________________________________________________

Work Number ________________ Home Number ____________________________

If this agent is unable, unwilling, or elsewhere engaged to act as my agent, then I select the following person to act in this role:

Name ________________________________________________________________
Address _____________________________________________________________

Work Number ________________ Home Number ____________________________

My agent has full power and right to make health care choices for me:

_____ Just in regards to the instruction above.

_____ If my wishes are not expressed above, and my wishes are not otherwise known to my agent, or if my wishes are unknown or unclear, my agent is to make health care choices for me with my best interest in mind, to be determined by my agent after reviewing the benefits, burdens, risks that might result from a given treatment or course of treatment, or from the withholding or withdrawal of a treatment or course of treatment.

The authority of my agent is subject to the following conditions and limits:

________________________________________________________________________
________________________________________________________________________

My agent has full power and right to:

1. Request, receive and review any information, oral or written, regarding my physical or mental health, including, but not limited to, medical and hospital records, and the right to disclose this information.

2. Employ and release my health care providers.

3. Approve my admission to or release from any facility (other than psychiatric hospital or unit), nursing home, adult home or other supervised housing or medical care facility.
Circle One:
My agent **HAS** **HAS NOT** the power and authority to approve my admission to or release from a psychiatric hospital or unit.

Check one:
My agent’s powers and rights become active:
_____ when my attending physician and a second physician decide that I am unable to make well-versed choices regarding my health care;

**OR**

_____ when this document is signed.
My agent shall not be responsible for costs of care based just on this agreement.

________________________________________

________________________________________

Date **Signature**

The above named person signed or acknowledged signing this advance directive in my company and based upon my personal study appears to be a capable person.

______________________________________

Witness name **Witness signature**

______________________________________

Witness name **Witness signature**
For information contact:
Maryland Coalition of Families
8950 State Route 108, Suite 223
Columbia, Maryland 21045
410-730-8267

info@mdcoalition.org | www.mdcoalition.org