



IDD Supported Employment Services

Employment Services for Individuals that Self-Direct

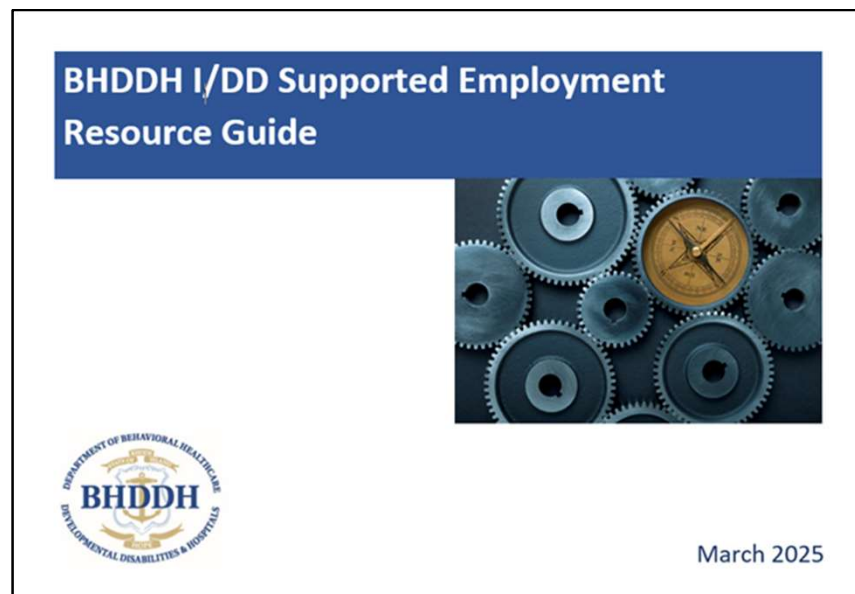


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BHDDH IDD Supported Employment Resource Guide

Our goal at the Division is to ensure that you have both the opportunity to make informed choices, and the supports you need to reach the goals you've chosen.

- Introduction
- Path to Competitive Integrated Employment
- List of BHDDH IDD Licensed Supported Employment Services Providers
- Training and Skills Programs
- Resources
- Definitions
- Contact Information

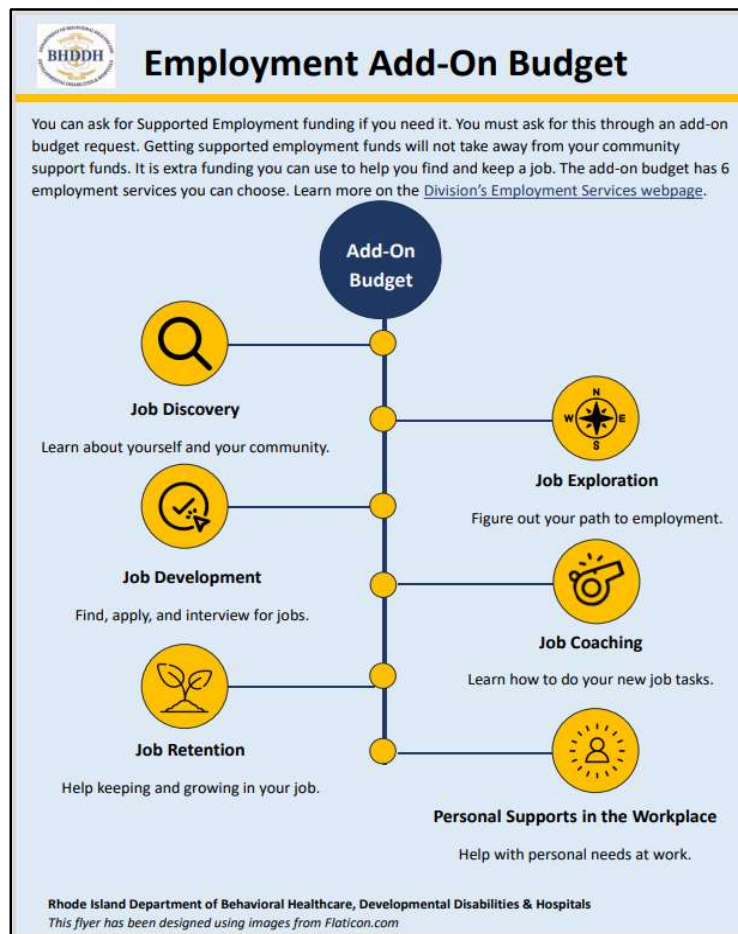


Add-On Employment Budget

The Add-On Budget was introduced in 2023 as a separate Supported Employment funding (money) source.

You no longer have to take away from your community support funds (money) in order to get more or new employment assistance. This gives you extra funding for supports that will help you find and keep a job. There are currently 5 services available on the Add-On Budget. Discovery was added to Supported Employment Services and Job Exploration will soon be available.

Add-On Supported Employment Services are provided through BHDDH licensed Supported Employment Providers. Job Development, Job Coaching and Discovery may only be provided and billed through a trained/certified provider staff.



Add-On Purchase Orders/Guide

Add-On Budget amendments requests can be submitted at anytime. You do not have to wait for the next scheduled annual ISP meeting.

- Employment services are added to the PO Employment tab to support existing ISP Employment Goals.
- Add-On Purchase Order is submitted by the supported employment provider through the DD01
- Transportation is not included on the Add-On Purchase Order. It is included in the Flexible part of the Individual Budget

Annual Purchase Order for Employment
This document is developed with the person and their team to reflect the supports indicated in their Individual Support Plan (ISP)

PART A: INDIVIDUAL'S INFORMATION

Individual Name: _____
 MID # _____ Current Tier _____
 Residential Address _____
 Purchase Order Period _____ Start Date _____ End Date _____

PART B: ADD-ON BUDGET FOR EMPLOYMENT

Enter details for your employment request. Enter only on lines where you are making a service request. Leave remaining lines blank.


| FLEXIBLE BUDGET ITEMS | Agency Selected to Provide | Rate | # of Units | Unit Increment | Annual Budget \$ |
|------------------------------------|----------------------------|----------|------------|---------------------------------------|------------------|
| Discovery (Max 60 hours/240 units) | | \$ 17.61 | | 15 min | \$ - |
| Job Development (Max 200 hours) | | \$ 78.92 | | Hour | \$ - |
| Job Coaching | | \$ 18.06 | | 15 min | \$ - |
| Job Retention | | \$ - | | Monthly | \$ - |
| Personal Support in the Workplace | | \$ 12.36 | | 15 min | \$ - |
| Group Supported Employment | | \$ - | | 15 min | \$ - |
| | | | | Add-On Employment Budget Total | \$ - |

PART C: TOTALS AND SIGNATURES


| | | | |
|--|---------------------------------------|-------------|---------------|
| | Total Add-On Employment Budget | \$ - | Annual |
|--|---------------------------------------|-------------|---------------|

Signature of Participant (or Legally Authorized Representative) _____ Date (month/day/year) _____
 _____ Date (month/day/year) _____
 _____ Date (month/day/year) _____
 _____ Date (month/day/year) _____

Supports | PO Self-Direction ...



State of Rhode Island
 Department of Behavioral Healthcare, Developmental Disabilities and Hospitals (BHDDH)
 Division of Developmental Disabilities (DDD)
 6 Harrington Road, Cranston, RI 02920
 Phone: 401-462-3421 | www.bhddh.ri.gov | Fax: 401-462-2775



Guide to Employment
Add-On Budget Requests
 Guidebook for Providers and anyone completing purchase orders.

Blending, Braiding and Sequencing Supported Employment Funds

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Is Individual open with ORS?
Short term employment services
into long term support services.

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Other Employment Training Opportunities

DLT grant programs:

RIDDC Self-Employment Classes

Access Point Retail Training at Davies Lincoln

Other training opportunities:

- **Computer Training at local public libraries**
- **Amos House Culinary Classes**
- **Skills for RI Future Job Skills Trainings**
- **Provider Operated Culinary and Horticulture Classes**

Employment and Earnings Reporting Requirements

The Division of Developmental Disabilities (DDD) has developed a streamlined process of employment/income reporting, Benefits Counseling referrals, and Income Disregard submission through the completion of one form called the;

- [Employment and Earnings Reporting Form \(PDF\)](#) NEW online reporting web form

This form is used for the required reporting of earned income and employment changes to BHDDH and Medicaid (Dept of Human Services). You only need to submit it online to BHDDH (it will also be available to DHS). The information in this form is used to calculate any income disregards. An Income Disregard allows DHS to exclude part of the income you earn from your job when determining your benefits. Without the income disregard, you may be required to pay a portion of your cost of care. This form will also be used to make referrals for Benefits Planning. Please complete all sections of the form. If you have any questions, please contact your BHDDH social caseworker

*Please note: This form is used for BHDDH and Medicaid only. If you receive SSI/SSDI, you must report earnings to Social Security directly. If you have other benefits such as subsidized housing, report your income as those programs require.

Please complete all sections of the form. Once you submit, you will be unable to change or update this form. Please make sure all documents are attached before submitting.

Required questions are marked with a red **required** label.

Please select one of the following options: **required**

I am completing this form for myself. I am completing this form for another individual.

Submitter Information

Your First Name **required**
Enter response...

Your Last Name **required**
Enter response...

Relationship to the Person you are contacting us about **required**

Unanswered Parent Other
 Relative/Friend School Staff DD Staff
 Hospital Staff Community Organization

Your Preferred Method of Contact **required**

Unanswered Phone Email
 I do not wish to be contacted (Note: if you do not leave a phone or email, it is difficult to provide assistance.)

Name of DD Participant

First Name **required**
Enter response...

Thank You

For more information on BHDDH IDD Supported Employment Services please visit our Website [Services for Adults | Dept. of Behavioral Healthcare, Developmental Disabilities, and Hospitals \(ri.gov\)](#)

or contact:

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