

## The Challenge

Good research can inform and transform public policy. Often, it does not affect policy because results are not communicated in a manner that is timely, relevant and understandable to decision-makers.

The Texas Demonstration to Maintain Independence and Employment (DMIE) study tests whether a coordinated program of health care and employment supports can keep workers with potential disabilities employed and healthy.

Texas DMIE is a randomized controlled trial with a large study population (1600+). This strong research design is expected to provide excellent data for decision-making.

The plan to communicate what is learned is as important as the design of the DMIE study itself. A special challenge is informing policy and decision-makers, who are not researchers. Texas DMIE is a partnership between the State's Public Health/Mental Health Agency, the largest Texas County Hospital District and State Medicaid Agency.

There are many decision-makers involved and opportunities to shape policy decisions with research. There is also an opportunity to inform policy at the national level.

Texas DMIE will communicate findings to the research community via traditional means. The independent evaluator (UT Austin) will publish findings in scholarly journals and present findings, after consultation with the state, at research conferences. However, because traditional methods take longer to disseminate results and are not generally "user-friendly" for decision-makers, Texas will also tell the DMIE story to "lay" audiences through non-traditional methods.

## Targeting "Lay" Audiences

- Texas state agency executive leadership in Public Health, Mental Health and Medicaid
- Local leadership at the county level (Hospital District Board of Managers, District Executive staff, county commissioners, etc.)
- State legislators and Governor's office
- Texas Congressional delegation
- Policy-makers in other states such as State Medicaid Directors and State Mental Health Agencies (via their national associations)
- Stakeholder advisory groups including the State's Promoting Independence Advisory Board, Medicaid Infrastructure Grant (MIG) state advisory group, State Agency Councils and consumer advisory groups for public health, human services and mental health

## Telling the Story

Policy and decision makers require highly summarized findings, free of jargon and relevant to issues of immediate interest. Findings will be compared, where possible, to common points of reference familiar to target audiences, such as the characteristics and behaviors of Medicaid recipients. State staff will use face to face interactive presentations to present interim findings and determine the research questions of greatest immediate interest to target audiences. The Texas DMIE team will:

- Publish interim findings as short articles in the State's research-to-practice on-line newsletter "*Behavioral Health Newsbrief*". This newsletter is published several times each year and has a readership of thousands, including Public Health and Mental Health executives, as well as policy and administrative staff throughout Texas
- Provide periodic 1 to 2 page policy briefs to state and county leadership
- Brief leadership at state and local executive meetings
- Brief stakeholder advisory groups periodically via statewide meetings
- Present interim findings and policy implications at professional conferences for long term care, public health and mental health.



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**Texas Demonstration to Maintain Independence and Employment**  
*by Dena Stoner, Office of the Assistant Commissioner for Mental Health and Substance Abuse Services*

**What Is Texas DMIE?**

The Texas Demonstration to Maintain Independence and Employment (DMIE) is a study designed to examine whether or not working people with behavioral health conditions can remain independent and employed if provided health benefits and employment services. Texas DMIE is a partnership between the State and the Harris County Hospital District (HCHD), the fourth largest hospital district in the nation, which serves over 500,000 people each year. Participants in Texas DMIE are working adults under age 60 enrolled in HCHD's *Gold Card* program that provides discounted access to healthcare in the District. Like 1 in 4 Texans, most DMIE participants lack private health insurance. They are working people with serious mental illness (i.e., schizophrenia, bipolar disorder, or major depressive disorder), or other mental health or substance abuse conditions coupled with a significant physical health problem. As part of the study, Texas DMIE participants are randomly assigned to a *control group* that receives services normally available through HCHD, or an *intervention group* that receives case management, employment services, and additional medical, dental, and behavioral health services. The study will operate through September 2008.

**How Could Texas DMIE Inform Public Policy?**

To date, 1,112 people have qualified to participate and Texas has gathered baseline data on 1,028 individuals, making the Texas DMIE the largest study in the nation. By May 2008, over 1,400 people are expected to participate. As such, Texas DMIE offers an unprecedented opportunity to examine issues of interest to state and national policy makers. Indeed, some findings may challenge conventional "wisdom". Issues of interest include:

- What are the characteristics of uninsured working people with significant health conditions? (For example, 20% of current Texas DMIE participants are healthcare workers, such as personal care attendants, facility aides, etc.)
- What factors cause working individuals with health conditions to lose independence? How do factors such as psychiatric diagnosis affect behavior? (For instance, baseline data indicates that people with serious mental illness have the same motivation to work as people with other health conditions.)
- What strategies are effective in enrolling individuals in health benefits plans? (DMIE experience to date suggests that traditional marketing strategies may be less effective than enrollment at point of service in health clinics.)
- What strategies are effective in promoting continued independence and employment? How can these best be implemented?

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