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VI. NON-DISCRIMINATION IN SERVICES POLICY

The Department on Disability Services, Rehabilitation Services Administration's mission is to provide individualized services and supports to eligible individuals that lead to competitive employment, economic self sufficiency, and/or independence.

Services will be provided in compliance with Title VI and VII of the Civil Rights Act, The Americans with Disabilities Act, the District of Columbia Human Rights Act (D.C. Law 2-38; D.C. Official Code 2-1401 *et seq.*) without regard to personal appearance, marital status, age, religion, disability, sex, sexual orientation, gender identity or expression, familial status, family responsibilities, political affiliation, genetic information, source of income, status as a victim of intra-family offense, place of residence or business, race, color, or national origin.

SUBSTANTIALITY OF SERVICES

Substantial vocational rehabilitation services are those services, which, provided in the context of the counseling relationship, collectively and significantly contribute to the achievement of an employment outcome consistent with the informed choice of the individual.

In order for the counselor to show substantial services in a case, the counselor must document the relationships of the provision of services, the criteria for evaluation of the intermediate objectives or steps needed to reach the vocational goal, and the counseling necessary for successful closure of a case. Documentation of substantiality of services in the case file is an ongoing process. This documentation must be found in the case narrative entries; therefore, the case notes must tell the story of the case and subsequently show the individual's participation and how the services provided enabled the individual to become employed.

90-Day Client Contact

The 90-day case narrative is required. The case narrative update should be direct face-to-face contact, email conversation, a phone conversation with the individual, or a letter from the client. If contact with the individual is not possible, use a letter to document the counselor's attempts to contact the individual leading to closure of the case because of loss of contact. Be sure to document counseling after services have been initiated.

Vocational Rehabilitation Services

As appropriate to the vocational rehabilitation needs of each individual and consistent with each individual's informed choice, the following vocational rehabilitation services are available: 34 C.F.R. §361.48(d):

1. Referral and other services necessary to assist eligible individuals to secure needed services from other agencies;

2. Assessment for determining eligibility and priority for services;
3. Assessment for determining vocational rehabilitation needs;
4. Vocational Rehabilitation counseling and guidance, including personal adjustment counseling, to maintain a counseling relationship throughout the program of services for an individual with a disability; and the referral necessary to help the individual with a disability secure needed services from other agencies when such services are not available and to advise those individuals about the Client Assistance Program;
5. Physical and mental restoration services necessary to correct or substantially modify a physical or mental condition which is stable or slowly progressive;
6. Vocational and other training services, including personal and vocational adjustment, books, tools, and other training materials -- provided that no training or training services in institutions of higher education, e.g. universities, colleges, community/junior colleges, vocational schools, technical institutes, or hospital schools of nursing -- may not be paid for with funds under this part unless maximum efforts have been made to secure grant assistance in whole or in part from other sources;
7. Maintenance, not to exceed the estimated cost of subsistence, provided in connection with VR services at any time from the date of initiation of services through the provision of post-employment services. Maintenance covers the individual's basic living expenses, such as food, shelter, clothing, and other subsistence expenses that are necessary to support and derive the full benefit of other VR services being provided; Maintenance payments will not be provided to an individual who is employed when such payments are intended as an income supplement;
8. Transportation, including cost of travel and subsistence during travel (or per die payments in lieu of subsistence) in connection with transporting individuals with disabilities and their attendants/escorts for the purpose of deriving the full benefit of other VR services being provided. Transportation may include relocation and moving expenses necessary for achieving a VR objective;
9. Services to a client's family when necessary to the adjustment or rehabilitation to the individual;
10. Interpreter services and note-taking services for the deaf, including tactile interpreting for deaf-blind individuals;
11. Reader services, rehabilitation teaching services, note-taking services and orientation, and mobility services;
12. Recruitment and training services to provide new employment opportunities in the fields of rehabilitation, health, welfare, public safety, law enforcement and other appropriate public, government and private sector employment;
13. Job search, placement assistance and job retention services;
14. Supported employment;
15. Personal assistance services;
16. Post-employment services necessary to maintain employment;
17. Occupational licenses (including any license, permit or other written authority)

required by a State, city or other governmental Unit to be obtained in order to enter an occupation or a small business, tools, equipment, initial stocks and supplies;
18. Rehabilitation technology services including vehicular modification, telecommunication, sensory, and other assistive technological aids, devices and services;
19. Transition Services in accordance with the definition of the term;
20. Technical assistance and other consultation services to individuals who are pursuing self-employment, telecommuting or establishing a small business operation as an employment outcome; and
21. Other goods and services determined necessary for the individual with a disability to achieve an employment outcome required in 34 C.F.R. § 361.48.

POLICY -- INFORMED CHOICE – Services

DCRSA will assure the eligible individual or their representatives are provided information and support services to assist them in exercising informed choice throughout the rehabilitation process. The counselor will inform each eligible individual through appropriate modes of communication about the availability of and opportunities to exercise informed choice, including the availability of support services for individuals with cognitive or other disabilities who require assistance in exercising informed choice in decisions related to service options.

Individuals will be given information, or assistance in acquiring the information to make an informed choice with respect to services needed to achieve the employment outcome, the vendors that can provide the services, employment setting and the settings in which the services will be provided, and the methods available for procuring the services. Counselors will provide information or assistance in acquiring the information to enable the individual to make an informed choice regarding the program of services. To ensure that the availability and scope of informed choice is consistent, the information must include, at a **minimum**, information relating to the following:

- Cost, accessibility, and duration of potential services;
- To the extent available, consumer satisfaction with services;
- Qualifications of potential service providers;
- Types of services offered by the potential providers;
- The degree to which services are provided in integrated settings; and
- To the extent available, outcomes achieved by individuals working with service providers; 34 C.F.R. § 361.52.

PROCEDURES – INFORMED CHOICE – Services

The counselor will maintain a regional and citywide list of vendors that provide services that lead to an employment outcome.

To the extent available, the counselor will provide, or assist the individual in acquiring, consumer satisfaction surveys and reports regarding the service providers.

The counselor will provide, or assist the individual in acquiring, accreditation, certification, or other information relating to the qualifications of the providers.

When appropriate, the counselor will make referrals to other consumers, local consumer groups, or disability advisory councils qualified to discuss the services or service providers.

The counselor will document in the case notes the specific action taken in the above procedures using the **informed choice heading** to assure that informed choice was provided.

If applicable, the counselor will document Information and Referral Services and services needed from other agencies to assist the individual in accordance with CFR 34.361.23.

POLICY-- PROVISION AND AUTHORIZATION OF SERVICES

Dual signatures are required on all authorizations.

DCRSA currently requires prior approval on all new counselors (Section XIII, Policy and Procedure Manual). Supervisory and/or Administrative approval is also required for several specified purchases and services (Section VI, Policy and Procedure Manual).

All other authorizations must have a co-signature noted on the authorization. The co-signature should be legible and located under the signature of the authorizing counselor. The co-signature of the Supervisor or designated Senior Counselor indicates that the authorization was checked for accuracy and authenticity in accordance with established DCRSA policy and procedures prior to release.

The Authorization/Payment justification should consist of a copy of an invoice/receipt and a notation in the case narrative explaining why the services are necessary.

Written authorization must be made, simultaneously with, or prior to, the provision of the service or goods. **A verbal authorization may be given in an emergency followed immediately by a written authorization.** The written authorization must contain the date of the verbal authorization. An IPE must be written before any services or goods, other than diagnostic or to support diagnostic assessment, can be provided. It is the

counselor's responsibility to document case progress throughout the provision of services.

NOTE: A comparable benefit will be considered only to the extent that it is available and timely to meet the cost of the particular VR services.

NOTE: The counselor will not approve payment requests until documentation that the service has been provided and has been received. Documentation may include medical reports, training progress reports, attendance forms, receipts and/or invoices.

PROCEDURES -- PROVISION AND AUTHORIZATION OF SERVICES

Before an authorization is issued the counselor must consider the following issues:

- Is this service allowable under DCRSA Policy?;
- What, if any, limitation exists to providing this service?;
- Has the counselor clearly emphasized the comparable benefits requirement to the consumer? Are there any comparable benefits available to provide the service? (Reference Section V, Economic Need);
- Has the counselor verified financial need?;
- Has the counselor provided informed choice in the case record?;
- Does the case note reflect that the IPE was jointly developed with the client, taking into consideration the client's autonomy?;
- What other required references need to be accessed (i.e., fee schedule vendor list)?;
- What documentation is needed to procure/provide the service? (i.e., Medical Consultant reviews, prior approval, case documentation.);
- How is the paperwork routed?;
- Determine if the vendor is on DCRSA Vendor List. Complete W-9 if needed, i.e. federal ID #); and
- Create the authorization in the CMIS system once vendor is approved. The original authorization goes to the vendor, a copy is placed in the case file, and the individual may be provided a copy.

POLICY-- VOCATIONAL REHABILITATION COUNSELING AND GUIDANCE

The counselor will write a plan for vocational rehabilitation counseling and guidance, placement, and follow-up. The plan will outline the criteria for evaluation of progress toward the employment outcome, the counseling process and anticipated results. Documentation of counseling progress will be placed in the record of services. Vocational rehabilitation counseling and guidance services must be provided and documented in all VR cases closed rehabilitated, 34 C.F.R. 361.48(c).

PROCEDURE -- VOCATIONAL REHABILITATION COUNSELING AND GUIDANCE

The counselor will document in the case notes the specific progress the individual is making toward the employment outcome.

The individual's progress will be reviewed every 90 days.

Counseling and guidance must be documented in each successful closure.

POLICY-- JOB FINDING/REFERRAL

A job-finding service is provided when enough information has been given to permit the individual to arrange for a job interview with an employer. A job-finding service is also rendered when DCRSA directly refers or arranges for the direct referral of the individual to a prospective employer.

PROCEDURES – JOB FINDING/REFERRAL

The individual may be referred to the employment specialist in Status 12. The employment specialist can assist the counselor at this stage in the vocational planning process but significant involvement of the employment specialist may not occur until the individual is ready for employment (Status 20).

The counselor and employment specialist will assist the individual, either individually or within a group, in developing job-seeking skills that will include instructions on how to read the want ads, prepare job resumes, write cover letters and prepare for job interviews.

The counselor may refer the individual for services from other resources providing job-seeking skills, if appropriate.

The counselor will document in the case notes the specific progress the individual is making toward the employment outcome.

POLICY -- PLACEMENT SERVICES

Placement services are organized and identifiable attempts to establish or improve the linkage of an individual and a work situation. While employment placement is the VR program goal and usually occurs toward the end of the rehabilitation process, employment planning should be an ongoing process throughout the VR program. **Placement is provided when the individual is referred to and is hired by an employer.** The State VR Agency, the Department of Employment Services, One-Stop Workforce Career Centers, other components of the State Workforce Investment system or any other job-finding source may provide this service. A key feature of this

service is that the individual becomes competitively employed as a result of the job referral, 34 C.F.R. §§361.48(d) and (l).

PROCEDURES – PLACEMENT SERVICES

The counselor will assist the individual with employment planning throughout the rehabilitation program.

The counselor and the employment specialist will document in the case notes the specific progress the individual is making toward the employment outcome.

POLICY -- FOLLOW-UP

The counselor will provide follow-up services to each individual placed in employment to determine if all planned services have been provided and the VR objective achieved. Follow-up services will include contacts and reports from the individual, employer, and others that provide reports to help the counselor determine if the employment situation is suitable for the individual's needs. The individual must be provided follow-up services within a minimum of 90 days and the counselor will have assurance that other DCRSA criteria have been met prior to case closure. The counselor will inform the consumer of the availability of post-employment services, including job retention and follow-along services.

PROCEDURES – FOLLOW-UP

The counselor or the rehabilitation assistant will maintain contact with the individual and employer to determine if the employment is suitable for the individual.

The counselor or the rehabilitation assistant will provide supportive services as necessary for maintaining employment.

The counselor or the rehabilitation assistant will document in the case notes the specific progress the individual is making toward the employment outcome.

POLICY-- ASSESSMENT SERVICES

Assessment services are those services required to determine an applicant's eligibility for rehabilitation services, priority for services, and to determine the services necessary to achieve an employment outcome. Assessment services may include, if appropriate, an assessment by personnel skilled in rehabilitation technology,. (34 C.F.R. §§361.48(a) and (b)).

Medical diagnostic services may include:

1) Medical and surgical examinations;

2) Dental examinations;
3) Consultations with and examinations by specialists in all medical specialty fields;
4) In-patient hospitalization for study or exploration, not to exceed three days or five days with local medical consultant recommendation;
5) Clinical laboratory tests;
6) Diagnostic x-ray procedures;
7) Trial treatment for differential diagnosis, stabilization of drug therapy, or determination of feasibility in the case of emotional disturbance;
8) Maintenance; and
9) Other medically recognized diagnostic services.

Vocational diagnostic or assessment services may include:

1) Referral to a Community Rehabilitation Facility for assessment;
2) Referral to DCRSA vendors for assessment; and
3) DCRSA Vocational Evaluator for assessment.

The above listed services may be provided to an individual at any time, but normally will be completed during the case evaluation process. They may be provided by DCRSA personnel, obtained elsewhere at no cost to DCRSA, or purchased by DCRSA.

POLICY-- RESTORATION (PHYSICAL/MENTAL) SERVICES

Restoration services mean those medical and medically related services that are necessary to correct or substantially modify within a reasonable period of time, a stable or slowly progressive physical or mental condition. These include surgery, therapy, treatment, and hospitalization, 34 C.F.R. §361.48(e).

Prosthetic appliances/devices provided to improve or maintain an individual's ability to work are coded as Rehabilitation Technology Devices.

If an individual has a physical or mental disability with resulting limitations constituting an impediment to employment which based on recommendations of medical personnel, can be removed by restoration services without injury to the individual, the individual ~~is~~ may receive counseling, guidance and placement if the **individual refuses to accept** the appropriate restoration services. The decision to provide only core services must be based on clear and convincing evidence that, without the restoration services, the client is incapable of benefiting in terms of an employment outcome from rehabilitation services due to the severity of the disability and resulting limitations.

PHYSICAL RESTORATION SERVICES PURCHASED IN-STATE

DCRSA will pay for all physical restoration services that are properly authorized. Payment will be made according to the vendors' stated fee, up to but not to exceed, the maximum amount determined by the established DCRSA Fee Schedules. The fee paid by DCRSA must be accepted as payment in full by the vendor. The fee paid to physicians for surgical treatment includes 15 days of routine post-operative care.

PROCEDURES -- PHYSICAL/MENTAL RESTORATION SERVICES

- Documentation of the action to be taken will be made in the case notes.
- Medical reports and recommendations will be obtained from the attending physician.
- Physician and the reports placed in the case file.
- Medical Consultant review is required. (Form RS3-g) (See Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Refer to DCRSA Fee Schedule for fees. (See Fee Schedule)
- Select appropriate DCRSA Procedure code.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- If billing statement is received, along with a medical report, retain medical report for case file and forward billing statement to Management Support to key payment in CMIS system. Refer to Management Support for assistance.

NOTE: The vendor must agree to accept DCRSA fees for services.

POLICY-- PHYSICAL RESTORATION SERVICES PURCHASED OUT-OF-STATE

If DCRSA purchases physical restoration services out-of-state, the rate paid will not exceed fees paid by the local rehabilitation Agency. DCRSA will use physicians and facilities that are used by the local state Agency. If fee information is not available, the counselor will contact the nearest out-of-state VR office to determine fees paid for needed services.

PROCEDURES – PHYSICAL/MENTAL SERVICES – OUT-OF-STATE

- Documentation of the action to be taken will be made in the case notes.
- Medical reports and recommendation will be obtained from the attending physician and the reports placed in the case file.
- Medical Consultant review is required. (See Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.

- Refer to DCRSA Fee Schedule for fees. (See Fee Schedule)
- Select appropriate DCRSA Procedure code.
- Key authorization in CMIS once vendor is approved; Refer to Management Support for assistance.
- If billing statement is received, along with a medical report, forward billing statement to Management Support.
- The medical report will be retained for the case file.

POLICY-- MEDICAL CONSULTANT

In all cases involving medical and surgical treatment, hospitalization, drugs (except for acute medical care), and all medically directed therapies, a written consultation must be obtained from the Medical/Psychiatric Consultant.

PROCEDURES – MEDICAL CONSULTANT

The medical consultant will review medical/psychiatric reports and make recommendations.

The medical consultant will complete the Medical Consultant form.

The form will be placed in the case file.

POLICY-- MEDICAL, SURGICAL, PSYCHIATRIC, AND MEDICALLY DIRECTED TREATMENT: 34 C.F.R 361.48(t)

Medical Treatment: After the initial diagnostic medical evaluation, payments may be made to a physician (general practitioner or specialist), clinic, dispensary, or hospital for services provided to the individual. Examples include drugs, biological, or other medical supplies incidental to treatment.

Psychiatric Treatment: After the initial psychiatric diagnostic evaluation, payments may be made to a specialist in neuropsychiatry, a psychiatric clinic or hospital for psychiatric treatment.

Surgical Treatment: Payments may be made for surgical operations and fees for pre-operative care. Payments will be made according to the established DCRSA Fee Schedule.

Anesthesia: Payments may be made to anesthetists and anesthesiologists not included in hospitalization.

Physical and Occupational Therapy: DCRSA will pay for PT/OT services when prescribed and provided by competent medical personnel and when necessary to a VR program. If the expected duration of treatment is more than 30 days, then equivalent services, if available through a comparable benefit, should be considered.

Podiatrist or Chiropractor: DCRSA will pay for the services of a Podiatrist or Chiropractor only with Medical Consultant approval.

Dental: DCRSA may purchase dental services including oral surgery when necessary for an individual to participate in or complete a VR program. Available services do not include routine preventive dental care. Services will be purchased consistent with DCRSA fee schedule.

EXCEPTION: Insurance benefits must be used first in paying for surgical and medical services. The amount allowed by DCRSA Fee Schedule will be authorized followed by the statement "Rehabilitation Services will pay only that part of the authorized amount not covered by the insurance policy up to the maximum amount allowed by DCRSA Fee Schedule". Authorization will be based on DCRSA Fee Schedule.

PROCEDURES – MEDICAL, SURGICAL, PSYCHIATRIC, AND MEDICALLY DIRECTED TREATMENTS

- Documentation of the action to be taken will be made in the case notes.
- Medical reports and recommendations will be obtained from the attending physician and the reports placed in the case file.
- Medical Consultant review is required. (See Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Refer to DCRSA Fee Schedule for fees. (See Fee Schedule)
- Select appropriate Procedure code.
- Key authorization in CMIS System once vendor is approved. Refer to Management Support for assistance.
- Refer to Out of State Policy limitations, if necessary. (See VI. Services Index)

POLICY-- DIRECTED THERAPY FOR WEIGHT LOSS

DCRSA may provide services for structured weight loss programs such as Weight Watchers, local Wellness Programs, etc., or other medical directed programs. The counselor should make every effort to seek out programs in the community that provide supportive/mental health counseling and address significant lifestyle changes including

diet, exercise and behavior modification. **The counselor will consult with the Supervisor for approval of the treatment program and negotiated costs.**

PROCEDURES – DIRECTED THERAPY FOR WEIGHT LOSS

- Medical reports and recommendations will be obtained from the attending physician and the reports placed in the case file.
- Medical Consultant review is required. (See Appendix E)
- Counselor will negotiate reasonable fees with the vendor.
- The counselor will secure the approval of the Supervisor.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Select appropriate Procedure code.
- Key authorization in CMIS once vendor is approved; Refer to Management Support for Assistance.
- Refer to Out of State Policy limitations, if necessary. (See VI. Services Index)

POLICY-- GASTRIC RESTRICTIVE OR BYPASS SURGERY AS TREATMENT FOR MORBID OBESITY

Individuals requesting assistance from DCRSA for gastric restrictive or bypass surgery as a method of treatment for morbid obesity are to be informed the procedure is a major operation with the potential of both short-and long-term complications.

Any decision to use surgery as a treatment for morbid obesity requires assessing the risk-benefit by an experienced physician(s). Candidates for the procedure should be judged as having a low probability of success using non-surgical measures as demonstrated by failure in an established weight control program(s). Such programs might include in various combinations behavior modification, exercise, low- or very low-calorie diets, and drug therapy.

A diagnosis of morbid obesity alone does not indicate an individual is an appropriate candidate for this procedure. High-risk conditions such as significant diabetes mellitus, obstructive sleep apnea, obesity-related cardiomyopathy and joint disease would increase the likelihood an individual would be an appropriate candidate for gastric restrictive or bypass surgery.

Individuals with a diagnosis of morbid obesity may be eligible for restoration services if all the following criteria are met:

1) Have a Body Mass Index (BMI) of at least 55 (BMI is an individual's weight in kilograms divided by his/her height in meters squared);
2) Have an associated high-risk co-morbid condition(s);
3) Have documentation that morbid obesity has been present for a minimum of 5 years;
4) Have documentation from a treating physician of failure by the individual in a structured weight loss program while under that physician's care for a minimum of 1 year;
5) Counselor's impression that the individual is well motivated and understands the risks associated with the surgical procedure and the restricted eating habits which will follow; and
6) If the individual has demonstrated success in a structured weight loss program in the past, the Counselor will be required to assess the appropriateness of the gastric restrictive or bypass procedure. Re-enrollment in a structured weight loss program should be explored.

PROCEDURES – GASTRIC BYPASS SURGERY

- Obtain a general medical assessment or current medical information that documents the individual's diagnosis of morbid obesity and any other high-risk co-morbid conditions.
- Obtain a Mental Health Assessment that indicates the individual does not have a mental health condition that might preclude this restoration service.
- Obtain documentation from a treating physician of the individual's failure in a structured weight loss program for at least 1 year and the presence of morbid obesity for at least 5 years.
- Documentation of co-morbid conditions by an appropriate physician with a statement of recommendation for weight loss surgery.
- Obtain medical reports that document the need for referral to a surgeon for an assessment to determine the appropriateness of gastric restrictive or bypass surgery.
- Obtain an examination from a surgeon proficient in gastric restrictive and bypass procedures that documents the individual is an appropriate candidate for this procedure.
- Assess the individual regarding motivation for the procedure and understanding of the associated risks.
- The Counselor will submit received reports and documentation for review and approval by the Medical Consultant.
- The Counselor will submit a memorandum to the Deputy Director through the Chief of Vocational Rehabilitation Services Division with the reports and all required documentation requesting approval for the procedure. As a part of the memorandum, the counselor will provide the Deputy Director the counseling issues to be addressed during the restoration and recovery process.
- If the Deputy Director agrees that all the required documentation is present and the individual meets DCRSA eligibility and Order of Selection requirements, the individual is an appropriate candidate for the procedure, and agrees with the

identified counseling issues, the Deputy Director will provide the Counselor a memorandum of approval.

- If the Deputy Director does not agree the individual meets eligibility and Order of Selection criteria, and is not an appropriate candidate for the requested gastric restrictive or bypass procedure, or is of the opinion that the identified counseling issues are inadequate or inappropriate, a memorandum of denial will be sent to the counselor notifying the counselor of the decision.
- If the Deputy Director approves, the Counselor will proceed as with any other physical restoration case.
- During the recovery process, the Counselor will be required to document a minimum of three (3) counseling sessions prior to case closure.
- It is recommended that the case be placed in post-employment status so that necessary counseling and follow-up can take place to ensure optimum benefits from the procedure.

NOTE: If the referred case has serious medical problems that pose serious consequences due to delay of case processing, an administrative exception may be requested.

POLICY-- COCHLEAR IMPLANTS

Requirements include:

- Complete psychological exam to determine emotional and mental stability of the individual;
- Document evidence from the individual or employer that the procedure would remove any significant vocational impediment;
- Document counseling with medical personnel and a peer in regard to after effects and adjustment to the procedure;
- Document post-operative aural rehabilitation plan; and
- Refer required documentation to Deputy Director through the Chief of Vocational Rehabilitation Services Division for approval.

POLICY-- SURGICAL AND HOSPITAL INSURANCE

Insurance benefits must be used first in paying for surgical and medical services. The amount allowed by the DCRSA Fee Schedule will be authorized followed by the statement.

"The Rehabilitation Services Administration will pay only that part of the authorized amount not covered by the insurance policy up to the maximum amount allowed by the DCRSA Fee Schedule". Authorization will be based on the DCRSA Fee Schedule.

POLICY-- CONSULTATION

For diagnostic purposes, the attending physician may consult with another specialist. The counselor must have a recommendation for consultation and prior authorization is required.

POLICY-- POST-OPERATIVE REPORTS

It is the counselor's responsibility to obtain a post-operative report or narrative letter prior to processing the final payment.

POLICY-- MINOR SURGERY BY GENERAL PRACTITIONERS

DCRSA may pay general practicing physicians for minor surgery, such as the opening of a superficial abscess or removal of a superficial tumor or cyst.

POLICY-- PURCHASE OF MEDICATION, PRESCRIPTION GOODS AND MEDICAL SUPPLIES

DCRSA shall purchase medication, prescription goods, and medical supplies if it is determined that: 1) no comparable benefit is available to the individual; and 2) it is necessary to achieve the individual's vocational goal or independent living goal. The individual must provide to the counselor a current, valid prescription from an authorized, licensed medical or other professional.

POLICY-- MEDICATION

Medication during assessment will be limited to not more than 60 days.

Medication can be provided throughout the active VR program and 30 days following placement.

The counselor must document the ongoing medication need either through the Medical Consultant or the individual's personal care physician. Unless a particular brand is specified by an authorized, licensed medical or other professional, the counselor must actively negotiate for the most economical, generic medication.

PROCEDURES – MEDICATION

- Documentation of the action to be taken will be made in the case notes.
- Medical reports and recommendations including prescription will be obtained from the attending physician and the reports placed in the case file.
- Medical Consultant review is required. (See Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Select appropriate DCRSA Procedure code.

- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- Refer to Out of State Policy limitations, if necessary. (See VI. Services Index)

POLICY-- SPEECH AND HEARING THERAPEUTIC SERVICES

Individuals with organic or inorganic speech and hearing disorders may be scheduled for evaluation and therapy by an approved therapist. The counselor will furnish the therapist with information needed to provide services.

PROCEDURES – SPEECH AND HEARING THERAPEUTIC SERVICES

- Documentation of the action to be taken will be made in the case notes.
- Medical reports and recommendations will be obtained from the attending physician and the reports placed in the case file.
- Medical Consultant review is required. (See Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Refer to DCRSA Fee Schedule for fees. (See Fee Schedule)
- Select appropriate DCRSA Procedure code.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.

POLICY-- HOSPITALIZATION, CONVALESCENT CARE AND NURSING SERVICES

DCRSA will pay for inpatient or outpatient hospitalization, including blood, in District of Columbia hospitals according to current Medicaid fees.

DCRSA will pay for the day an individual enters the hospital, but not the day on which the individual is discharged.

PROCEDURE -- HOSPITALIZATION, CONVALESCENT CARE AND NURSING SERVICES

- Documentation of the action to be taken will be made in the case notes.
- Medical reports and recommendations will be obtained from the attending physician and the reports placed in the case file.
- Medical Consultant review is required. (See Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Refer to DCRSA Fee Schedule for fees. (See Fee Schedule)
- Select appropriate DCRSA Procedure code.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.

POLICY-- CONVALESCENT OR NURSING HOME CARE

If care in a convalescent or nursing home is medically recommended after a period of hospitalization, the arrangements will be noted in the IPE. There will be a re-evaluation of rehabilitation potential within 30 days.

PROCEDURES – CONVALESCENT OR NURSING HOME CARE

- A recommendation from the attending physician must be secured before authorizing for convalescent or nursing home care.
- Documentation of the action to be taken will be made in the case notes.
- Medical Consultant review is required. (See Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Refer to DCRSA Fee Schedule for fees. (See Fee Schedule)
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.

POLICY-- HOSPITALIZATION THROUGH COOPERATING AGENCIES

DCRSA will use hospitalization available through cooperating agencies when feasible. It is the counselor's responsibility to determine if these services are available through the cooperating agencies before obligating DCRSA for these services.

POLICY-- RADIOLOGY/ PATHOLOGY

DCRSA may pay for radiology/pathology services according to the DCRSA Fee Schedule.

PROCEDURE – RADIOLOGY/PATHOLOGY

- Documentation of the action to be taken will be made in the case notes.
- Medical Consultant review is required. (See Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Refer to DCRSA Fee Schedule for fees. (See Fee Schedule)
- Select appropriate DCRSA Procedure code.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.

NOTE: If radiology and pathology are provided in conjunction with surgery, the medical consultant review is not necessary for these services since the consultant has already reviewed the recommendation for surgery.

POLICY-- SPECIAL NURSES

DCRSA may provide nursing service by a registered nurse only if ordered by the attending physician. Practical nurses will be used only when a registered nurse cannot be obtained or if, in the opinion of the attending physician, the services of a registered nurse are not required. DCRSA may pay the standard rate for this service in the community.

PROCEDURES – SPECIAL NURSES

- Documentation of the action to be taken will be made in the case notes.
- Medical Consultant review is required. (See Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Refer to DCRSA Fee Schedule for fees. (See Fee Schedule)
- Select appropriate DCRSA Procedure code.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.

POLICY-- CHILDREN'S MEDICAL SERVICES

Any individual who may be eligible for Children's Medical Services and who might need physical restoration will be referred to D.C. Medical Assistance Program (D.C. Alliance), Income Maintenance Administration, or Social Security Administration to determine eligibility. If the individual is eligible for services through the above mentioned Administrations, DCRSA will not provide the services.

POLICY-- POST-SECONDARY EDUCATION AND TRAINING

The Rehabilitation Services Administration shall pat for post-secondary tuition costs in accordance with §§ 122.4, 122.5 and 122.6, only if the academic program(s) is necessary to achieve the consumer's vocational goal.

Training services are those vocational rehabilitation services needed to prepare an eligible individual for work. These services are individualized and are jointly developed by the individual and counselor through the process of informed choice.

Vocational training includes the following broad categories:

1) On-the-Job Training;
2) Short-term Specialized Training;
3) Vocational/Technical;
4) Community College; and
5) College/University.

It is the policy of DCRSA to provide "individualized" training services needed to achieve employment. Individualized services reflect the unique strengths,

priorities, concerns, abilities, capabilities, career interests, and informed choice of each eligible individual. These individualized services may be based upon a review, to the extent necessary, of the following:

1) An analysis of pertinent medical, psychiatric, psychological, neuro-psychological, and other pertinent vocational, education, cultural, social, recreational, information;
2) Environmental factors, and related functional limitations, that affect the employment and rehabilitation needs of the individual;
3) An analysis of the individual's personality, career interests, interpersonal skills, intelligence and related functional capacities, educational achievements, work experience, vocational aptitudes, personal and social adjustments, and employment opportunities;
4) An appraisal of the individual's patterns of work behavior and services needed to acquire occupational skills and to develop work attitudes, work habits, work tolerance, and social and behavior patterns suitable for successful job performance; and
5) An assessment, through provision of rehabilitation technology services, of the individual's capacities to perform in a work environment, including in an integrated setting, to the maximum extent feasible and consistent with the individual's informed choice.

DCRSA recognizes the transition from high school to post-secondary training is a critical time and is a period of change and stress. Training options beyond the vocational-technical level must have documentation based on the assessment of rehabilitation needs that the individual can be successful in the selected training area which may include; a career assessment; and psycho-educational assessment.

An individual is eligible for post-secondary education training:

1. if the individual meets basic eligibility requirements;
2. provides documentation of acceptance for matriculation from an accredited post-secondary institution as defined in §199; and
3. **demonstrates the aptitude and ability to succeed in college level work in the chosen course of study identified in the IPE through either past post-secondary academic performance or a diagnostic assessment conducted by a qualified professional, which may include at minimum: a career assessment; and psycho-educational assessment;**
4. Resolves any defaulted student loan or obtains a waiver from the Department of Education regarding any defaulted student loan;
5. Submits a financial aid application annually to all available federal and local grant funding programs;
6. Provides DCRSA a copy of the FAFSA Student Aid Report(SAR) and any other financial aid award letter from each source of grant funding applied for;
7. Signs **DCRSA's Release of Information Form** authorizing the post-secondary institution to provide DCRSA all information pertaining to the individual's training or educational program;

8. Only after effort has been made to utilize comparable benefits and other available resources as required. 34 CFR § 361.53.

POLICY-- FINANCIAL AID

The counselor will provide general information regarding various alternative-financing sources; however, the individual is responsible for securing financial aid. **Documentation must be presented to the counselor prior to the first day of training. This documentation should include: college award letter; Grant response or other award letters; on-line Pell printouts; or copies of Pell Grant application forms.**

The counselor will utilize the basic cost of education reported from the school that the individual attends. The applicable PELL categories are dependent, on campus, dependent off campus, and independent. The basic cost may include tuition, books, fees, room and board, supplies and transportation.

The individual will indicate choice of school and course of study in accordance with informed choice by signing the IPE.

NOTE: DCRSA will not be bound to any agreement or contract the individual entered into prior to signing the IPE.

POLICY-- COLLEGES AND UNIVERSITIES

The counselor will assist individuals in pursuing two- and four-year college and university training programs in only those colleges and universities accredited by appropriate local, state, or national accrediting organization, and whose courses will be given full recognition by other accredited colleges and universities. It is the counselor's duty to determine if the selected institution is approved by the State Department of Education or by another qualified accrediting organization of the state in which it is located.

If a public post-secondary institution ("public institution") located in the Washington, D.C. Metropolitan Area ("Area") offers an academic program necessary to achieve the consumer's vocational goal and the consumer chooses to attend that institution, the Rehabilitation Services Administration shall pay the published tuition rate of that particular public institution.

If a public institution located in the Area offers an academic program necessary to achieve the consumer's vocational goal, but the consumer chooses to attend a private post-secondary institution ("private institution") that is also located in the Area, the Rehabilitation Services Administration shall pay the published tuition rate of the University of the District of Columbia.

If either a public or private institution located in the Area offers an academic program necessary to achieve the consumer's vocational goal, but the consumer chooses to attend a post-secondary institution (whether public or private) that is located outside of the Area, the Rehabilitation Services Administration shall pay no more than:

- Three times the tuition rate published by the University of the District of Columbia for the applicable number of credit hours and academic term; or
- The published tuition rate for the necessary training program that is available within the Area if the training program is not based on credit hours.

PROCEDURE – COLLEGE AND UNIVERSITY TRAINING

- Documentation of the action to be taken will be made in the case diary notes.
- The individual will provide the counselor with documentation of any financial aid awards and scholarships. This documentation can include: college award letter, Pell grant response letter; on-line Pell printouts or copies of Pell grant application forms.
- Complete Annual Review, if appropriate, and document any amendments to the IPE by completing the Request for Amendment form in CMIS and obtain required signatures.
- Update the Client Financial Participation Form at Annual Review, if appropriate.
- The counselor and the individual will complete the College Student's Responsibilities Form prior to the first semester and then each fall semester.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Refer to the College and University websites for current costs and fees.
- Refer to College and University websites for current academic / course catalogs.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- If the billing statement is received, forward immediately to Management Support.
- Refer to Out of State Policy limitations, if necessary.

POLICY-- ADVANCED DEGREE

It is DCRSA's policy to assist eligible individuals in obtaining an advanced degree only when this degree is a minimum requirement for the vocational objective. For example, DCRSA may assist eligible individuals beyond the Bachelor level in occupations that require advanced training for entry-level, such as medicine, dentistry, law, social work etc.

This does not mean that an eligible individual whose vocational objective is teaching may change the objective to superintendent or principal ~~to~~ in order to continue receiving further DCRSA financial assistance.

POLICY-- FULL-TIME STUDENT

A full-time student receiving financial support from DCRSA is one who completes 12 semester hours or 6 semester hours for a summer term at the college level.

At the counselor's discretion, exceptions may be made when the record of services reveals that, because of the severity of the disability or for other obvious reasons such as schedule difficulties, the need for part-time work or upon the recommendation from the individual's physician, school officials, etc., the individual cannot be expected to carry 12 hours of course work.

The individual shall submit the request and written documentation on an annual basis. The documentation of the exception must be made in the diary note in CMIS and filed in the case service record.

POLICY-- ONLINE COURSES

DCRSA may provide sponsorship for online college degree program courses if needed to reach the IPE vocational goal.

POLICY-- REMEDIAL COURSES

DCRSA will only pay for a total of 6 semester hours of remedial work. These remedial hours must be completed during the first academic year. The following statement will be placed on authorizations for college tuition "DCRSA will only pay for 6 hours of remedial work."

POLICY -- SATISFACTORY PERFORMANCE – COLLEGE AND UNIVERSITIES

Any full-time college student who fails to complete 12 hours of course work during the regular academic year per semester or 6 hours per summer semester with a cumulative grade point average of "C" (2.0), or its equivalent computed annually may be placed on probation for the following semester at the counselor's discretion. If the client is placed on probation and fails to maintain the required cumulative "C" average (2.0), college training may be terminated. Failure to do acceptable college course work may result in a re-evaluation of the individual's program and the selection of a more realistic vocational objective.

An eligible individual who is receiving post-secondary educational training shall continue to receive financial assistance from DCRSA if the individual satisfies the requirements set forth in §122.10.

POLICY-- GRADES – COLLEGES AND UNIVERSITIES

The counselor is responsible for obtaining grades. This responsibility should be delegated to the individual. Cumulative Grade Point Average (GPA) and/or equivalent

progress training reports will be used as the measure of satisfactory progress and must be provided to the counselor in a timely manner in order to approve the next semester or training cycle. Responsibility of College and Vocational training students form must be signed by the individual and counselor and placed in the individual's record of services prior to the initial semester or training cycle and each following fall semester and/or training cycle.

Accredited universities/colleges are beginning to offer classes via Internet and other distance education options. These classes can provide college training to individuals with the most significant disabilities whose accessibility or environmental needs made traditional campus-based training difficult.

This type of training, however, may be impractical for students who require the reinforcement and motivation of time-scheduled classes and social participation. Because of the many non-accredited correspondence courses offered by businesses or companies, the counselor should evaluate this option carefully.

POLICY-- POST-SECONDARY INSTITUTION TRANSFERS & GOAL CHANGE

The counselor may approve only one transfer from one post-secondary institution to another post-secondary institution and only one change in the vocational goal during the vocational rehabilitation process unless it is determined that exceptional circumstances warrant a change. This does not include individuals not liking the program or institution. Exceptional circumstances may include but are not limited to the following (i.e. accreditation problem, change in status of disability, destruction of dormitory as a result of extreme weather conditions).

PROCEDURE – POST-SECONDARY INSTITUTION TRANSFERS

- Documentation of action to be taken will be made in the case diary notes in CMIS.
- Submit justification to Unit Supervisor for approval.
- Complete IPE Request for Amendment form in CMIS and obtain required signatures.
- File copy of the signed amendment to the IPE in the case file and give copy of the signed IPE amendment to the individual after approval.
- Key authorization into CMIS System once vendor is approved. Refer to Management Support for assistance.

PROCEDURE – CHANGING GOAL SELECTION

- Documentation of action to be taken will be made in the case diary notes in CMIS.
- Counselor will complete IPE Request for Amendment Form in CMIS.

- Counselor and individual will sign the Amendment Form.

- Counselor will file copy of the signed amendment to the IPE in the case file and give copy of signed IPE amendment to the individual with new goal.

POLICY-- FAILURE TO MAINTAIN SATISFACTORY PROGRESS

The counselor may not authorize funding for at least the academic semester following dismissal of an individual by a post-secondary institution or failure of the individual to maintain satisfactory academic or performance requirements, or financial aid eligibility criteria; or to earn the requisite certificate for the course of study or other progress (i.e. time and attendance, internships, qualifying exams).

PROCEDURE – FAILURE TO MAINTAIN SATISFACTORY PROGRESS

- Documentation of the action to be taken will be made in the CMIS diary note.

- The counselor will complete letter of denial in CMIS immediately upon notification of failure to maintain satisfactory progress if there are no exceptional circumstances, sign, and forward to Unit Supervisor for approval.

- Counselor forwards letter of denial immediately to Unit Supervisor for approval.

- Counselor mails letter of denial via certified mail to the individual within three (3) days.

- Counselor files a copy of the letter of denial with other supporting documents in the case file.

POLICY -- RECONSIDERATION OF POST-SECONDARY EDUCATION FUNDING

The counselor may reconsider funding costs of post-secondary education if the individual provides documentation of successful completion of a C or better while maintaining a full-time schedule at a post-secondary education institution in his or her course of study for one semester.

PROCEDURE -- RECONSIDERATION OF FUNDING

- Documentation of the action to be taken will be made in the CMIS diary note.

- The counselor will obtain official school documentation of successful completion of course work, and/or any financial aid awards and scholarships. This documentation can include: college award letter; Pell grant response letter; on-line Pell printouts; or copies of Pell grant application forms.

- Complete Annual Review, if appropriate, and document any amendments to the IPE by completing the Request for IPE Amendment Form in CMIS and obtain required signatures.

- Update the Individual's Client Financial Participation Form at Annual Review, if appropriate.

- Key authorization into CMIS System once vendor is approved. Refer to Management Support for assistance.

POLICY-- DCRSA FINANCIAL ASSISTANCE

Financial assistance will not be provided for an individual to enroll in a course that is not required for completion of the educational or training program, engage in travel that is not a requirement for completion of the course of study or training or travel outside of the United States, or repeat a course or training program that has already been paid for by DCRSA, unless documentation establishes that exceptional circumstances warranting authorization to repeat the course is provided.

PROCEDURE -- DCRSA FINANCIAL ASSISTANCE

- Documentation of the action to be taken will be made in the CMIS diary notes.

- Submit case to Unit Supervisor with justification approval or disapproval.

- Notify individual in writing within three business (3) days via certified mail of the approval or disapproval.

- Complete Request for Amendment form in CMIS and obtain required signatures.

- Key authorization into CMIS system once vendor is approved. Refer to Management Support for assistance.

POLICY-- UNAUTHORIZED COURSE WITHDRAWAL

An individual shall not withdraw from a course after the institution's drop and add period is over without receiving the counselor's prior approval. Prior approval includes, but is not limited to instances where the individual has a medical certification of incapacitation that prevents further matriculation. An individual who withdraws from a course after the institution's drop and add period without prior approval from the counselor shall be responsible for paying the institution any costs associated with the individual's unauthorized withdrawal.

PROCEDURE – UNAUTHORIZED COURSE WITHDRAWAL

- Documentation of the action to be taken will be made in the case diary notes.

- Counselor will complete letter of denial in CMIS, sign letter, and forward to Unit Supervisor for approval.

- Counselor will mail letter of denial to the individual via certified mail within three (3) days upon counselor notification of the unauthorized withdrawal and Unit Supervisor's approval of the letter of denial.

- A copy of the letter of denial must be filed in the individual's case file.

POLICY- TRAINING MATERIALS

DCRSA shall purchase required computers, books, tools, and other training materials that are necessary to complete training for full-time students who are making satisfactory progress. Requests for computers, books, tools, and training equipment must be submitted to the counselor by the individual no later than one week after the first day of training and must include the cost of each item or supply requested. Authorizations must be submitted to the bookstore in a timely manner by the counselor, preferably prior to the beginning of classes and no later than one week after the first day of classes. The request for payment from the bookstore must be accompanied by a list of books and/or supplies purchased, along with individual book/supply prices. Failure to provide these items may result in a delay of the receipt of any supplies.

PROCEDURES – COLLEGE TEXTBOOKS & SUPPLIES

- Documentation of the action taken will be made in the case diary notes.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Obtain documentation from University personnel (i.e., Chair of the relevant department) to support the necessity for a computer.
- Obtain documentation from University personnel, or a course syllabus, to substantiate the books required for training.
- Complete Annual Review, if appropriate, and document any amendments to the IPE by completing the Request for Amendment form in CMIS and obtaining required signatures.
- Update the Client Financial Participation Form at Annual Review, if appropriate.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- If the billing statement is received by the counselor, counselor immediately forwards to Management Support for payment.
- Refer to Out of State Policy limitations, if necessary.

POLICY-- BUSINESS/COMPUTER SCHOOLS OR COLLEGES

DCRSA may purchase training for qualified individuals in any business school or college capable of providing the training necessary for the individual to attain the vocational objective. Satisfactory performance will be documented by a progress report indicating satisfactory progress in the training program, 34 C.F.R. § 361.48(f).

PROCEDURES – BUSINESS/COMPUTER SCHOOLS OR COLLEGES

- Documentation of the action to be taken will be made in the case notes.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Complete Annual Review, if appropriate, and document any amendments to the IPE by completing the Request for Amendment form in CMIS and obtain required signatures.
- Update the Client Financial Participation Form at Annual Review, if appropriate.
- Key authorization in CMIS once vendor is approved. (Refer to Management Support for Assistance.)
- If the billing statement is received, forward immediately to Management Support.
- Refer to Out of State Policy limitations, if necessary.

POLICY-- VOCATIONAL SCHOOL

DCRSA may purchase training for qualified individuals in any vocational, trade, or technical school capable of providing the training necessary for the individual to attain the vocational objective. If training is available within the State and the individual attends an out-of-state school, the maximum amount payable will be the same as that paid if the individual would be attending an institution within the State as a full-time student, 34 C.F.R. § 361.48(f).

Satisfactory performance in a non-academic program will be documented by a progress report indicating satisfactory progress in the training program.

PROCEDURES – VOCATIONAL SCHOOL

- Documentation of the action to be taken will be made in the case diary notes.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Complete Annual Review, if appropriate, and document any amendments to the IPE by completing the Request for Amendment with required signatures.
- Update the Client Financial Participation Form at Annual Review, if appropriate.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- If the billing statement is received, forward to Management Support immediately.
- Refer to Out of State Policy limitations, if necessary.

ONLINE COURSES

DCRSA may sponsor online vocational courses if needed to reach the IPE vocational goal, 34 C.F.R. § 361.48(f).

POLICY-- COSMETOLOGY/BARBER SCHOOL

DCRSA may purchase training for qualified individuals in cosmetology/barber schools capable of providing training necessary for the individual to attain the vocational objective. DCRSA requires a copy of the school's program costs and Pell grant eligibility or ineligibility be placed in the individual's case file by the time of plan development. Tuition will be authorized and paid at an hourly rate. Billing will be processed only with receipt of a monthly progress report verifying the number of hours the individual attended, 34 C.F.R. § 361.48(f).

The Supervisor's approval is required if extenuating circumstances occur such as changes or expenses beyond the agreed rate, or additional training time to meet the required number of hours.

Satisfactory performance in a non-academic program will be documented by a progress report indicating satisfactory progress in the training program.

PROCEDURES -- COSMETOLOGY/BARBER SCHOOL

- Documentation of the action to be taken will be made in the case notes.
- A copy of the school's program costs will be placed in the case file by the time of plan development.
- The case record must document the school's Pell eligibility or ineligibility.
- The award/denial letter will be obtained and placed in the case file.
- Complete Annual Review, if appropriate, and document any amendments to the IPE by completing the Request for Amendment form in CMIS and obtaining required signatures.
- Update the Client Financial Participation Form at Annual Review, if appropriate.
- Refer to DCRSA Vendor List or secure W-9 from a new vendor.
- The tuition will be authorized at an hourly rate.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- Billing statement will not be processed without receipt of a monthly progress report verifying the number of hours in attendance.
- Counselor will memo Supervisor with justification, requesting approval for additional services for extenuating circumstances.
- Refer to Out of State Policy limitations, if necessary.

POLICY-- ON-THE-JOB TRAINING

Vendors used for on-the-job training must be reputable, established firms that can supply the individual training in the selected job. The counselor must choose only those training sites that have: (34 C.F.R. § 361. 48(t))

1) proper equipment;
2) sufficient work to ensure adequate practice for the individual to reach proficiency;
3) the trainer must possess the knowledge, skill, and ability to train the individual; and

4) a daily training period long enough for the individual to acquire the necessary skills.

The counselor will consider:

1) the personality and skill of the trainer;
2) attitude toward rehabilitation and the individual;
3) past success in training individuals; and
4) The willingness of the employer to hire the individual when trained.

The D.C. Rehabilitation Services Administration will pay an On-the-Job training fee to the vendor for providing instruction to the individual to help them reach a skilled proficiency level in the work area selected. **DCRSA does not pay the individual's salary or wages**. DCRSA pays a training fee to the vendor or employer for on-the-job training services.

The vendor must put the individual on the payroll and pay the same starting wage that is paid to other new employees. The individual must be offered the same benefits as other employees. The trainee has the same responsibilities as all other employees.

Satisfactory performance in a non-academic program will be documented by a progress report indicating satisfactory progress in the training program.

PROCEDURES – ON-THE-JOB-TRAINING

- The counselor will negotiate with the vendor the training fee and the length of On-the-Job program. The fee and time period should be kept to a minimum.
- Documentation of the action to be taken will be made in the case diary notes.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Key authorization in CMIS system once vendor is approved. Refer to Management Support for assistance.

- If the billing statement is received, forward immediately to Management Support.
- The training vendor will provide a progress report to the counselor. The counselor will not authorize payment for On-the-Job training without proper progress reports.

POLICY-- ADJUSTMENT TRAINING

This is training which will help the individual adjust to a particular situation hindering his/her ability to work. Included would be work conditioning, developing work tolerance, mobility training, remedial training, literacy training, lip reading, Braille, etc.

PROCEDURES – ADJUSTMENT TRAINING

- Documentation of the action to be taken will be made in the case notes.
- Complete applicable vendor referral form.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- The training vendor will provide a progress report to the counselor. The counselor will not authorize payment for the adjustment training without proper progress reports.

NOTE: Training in the use of Rehabilitation Technology Devices would be coded Rehabilitation Technology Services.

POLICY-- MISCELLANEOUS TRAINING

This category includes academic training on secondary education level or lower, as well as, specialized academic schools for persons who are blind or deaf. It also includes training not listed in the above categories, such as correspondence study. Only a few individuals are able to satisfactorily pursue a correspondence study course; therefore, DCRSA personnel regard this method as impractical in most cases. There may be exceptions if justified by specific conditions, 34 C.F.R. § 361.48(f).

The correspondence method may be used if:

1) Training cannot be arranged by any other method;
2) The individual needs preliminary training, which may be obtained more practically and efficiently by correspondence, prior to entering another training method; or
3) Satisfactory living arrangements cannot be made to secure training by any other method.

The following criteria will be used for those individuals considered for correspondence training:

1) An intense interest in the chosen work field;
2) Sufficient intelligence indicated by standardized tests or past academic performance;
3) Some previous knowledge of, or experience in, the chosen field;
4) Adequate time to devote to course study; and
5) Full-time must be 12 hours and maintain a GPA of 2.0 per semester.

For college correspondence training, fees will be determined by the number of "credit hours" and the institution's rate. The published fees of the selected college will be the maximum paid by DCRSA. Fees will be paid when the college submits a bill.

In paying for correspondence courses other than college, the total cost of the training will be divided by the number of lessons. **DCRSA payment will be made as lessons are completed.** Counselors are responsible for negotiating with correspondence study vendors to ensure agreement with this payment plan.

If correspondence training is selected, the counselor must obtain the Supervisor's approval.

PROCEDURES – MISCELLANEOUS TRAINING

- Documentation of the action to be taken will be made in the case diary notes.
- Complete Annual Review, if appropriate, and document any amendments to the IPE by completing the Request for Amendment form in CMIS and by obtaining the required signatures.
- Update the Client Financial Participation Form at Annual Review, if appropriate.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Refer to K Drive for College and University Folder.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- Refer to Out of State Policy limitations, if necessary.
- The training vendor will provide a progress report to the counselor with appropriate billing forms. The counselor will not process payment for the training without proper progress reports.
- If the billing statement is received, forward to Management Support for payment.

POLICY-- BOOKS AND TRAINING MATERIALS

Books and training materials will be limited to required textbooks. DCRSA will not furnish office supplies such as paper, pencils, pens, glue and file folders, 34 C.F.R. §361.48(f).

POLICY-- TRANSPORTATION

Transportation costs for VR services may be paid at the usual rates not to exceed the State allowed rate. Transportation costs can only be paid as an auxiliary service to **core VR services**. **Transportation is not a stand-alone service,** 34 C.F.R. §361.48(h).

If public transportation is not available for the individual because of disability, cannot travel by public transportation, the counselor should make every effort to negotiate an estimated cost of gas only if it is the least expensive travel cost.

This does not apply to taxicab fares within the city, which will be paid at the prevailing rates when necessary and authorized.

NOTE: Transportation for diagnostic services will be coded as diagnostic.

The case record will document justification for the need for the service and include the method of calculating the cost of the service. Receipts or other documentation showing the individual received the service is required before the payment is processed.

POLICY-- TRANSPORTATION FOR PHYSICAL RESTORATION SERVICES

Transportation for physical restoration services may be paid. Transportation may be paid for checkup visits to a doctor or hospital only when the counselor has prior notice of the necessity of the visit and has authorized each trip, 34 C.F.R. § 361.48(h).

POLICY- TRANSPORTATION FOR TRAINING SERVICES INCLUDING COLLEGE

If the training location is where the individual cannot live at home, transportation costs may be paid for a direct, one-way trip at the beginning of the training session.

At the session's conclusion, transportation from the training location to the job site may be paid. DCRSA may pay bus fare, or if justified by the individual's physical condition, may pay taxi fare to and from the boarding house and training site. Transportation may be paid if the individual lives at home and daily transportation is required, 34 C.F.R. § 361.48(h).

POLICY-- TRANSPORTATION FOR PLACEMENT

Transportation may be paid for placement or self-employment when necessary for up to 30 days, 34 C.F.R. § 361.48(h).

POLICY-- AMBULANCE

DCRSA will pay for ambulance service only when the attending physician or other health authorities certify the individual cannot safely travel by other public or private transportation or if ambulance service can be secured as cheaply as other transportation, 34 C.F.R. § 361.48(h).

POLICY-- TRANSPORTATION FOR DIAGNOSIS INCLUDING SUBSISTENCE WHILE IN TRANSIT

Transportation and meals may be paid for transit when required for out of town diagnosis, 34 C.F.R. § 361.48(h).

PROCEDURES -- TRANSPORTATION

- Documentation of the action to be taken with justification for the service will be made in the case notes.

- Documentation of the method used to calculate the cost of the service will be made in the case notes.
- Receipts or other documentation verifying the individual received the service will be made in the case notes.
- Client invoice will be submitted by the counselor to Management Support for processing.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Case must be in a service status before the authorization can be written. Refer to Unit Supervisor for assistance.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- If the billing statement is received, forward to Management Support for processing payment.

POLICY-- MAINTENANCE

Maintenance includes payment to cover the individual's basic living expenses such as food, shelter, clothing, health maintenance, and other subsistence expenses essential to determine the individual's rehabilitation needs or to achieve the VR objective, 34 C.F.R §361.48(g).

Maintenance may be provided at any time while in a Trial Work Experience or EE program or an IPE is in effect.

After job placement, maintenance will only be paid until the individual receives their first paycheck. If the individual is self-employed, maintenance is limited to 30 days. **For an exception refer to Appendix G.**

Maintenance payments for training will be reimbursed at the end of a stated period (two weeks, four weeks, one month, or other). Authorization will be made in accordance with the IPE and may be paid to the client's boarding house, landlord, school, etc.

Note: Maintenance for diagnostic services will be coded as diagnostic.

The case record will document justification for the need for the service and include the method of calculating the cost of the service. Receipts or other documentation showing the individual received the service is required before the payment is processed.

PROCEDURES -- MAINTENANCE

- Documentation of the action to be taken with justification for the service will be made in the case notes.
- Documentation of the method used to calculate the cost of the service will be made in the case notes.
- Receipts or other documentation verifying the individual received the service will be made in the case notes.

- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Case must be in a service status before the authorization can be written. Refer to Unit Supervisor for assistance.
- Key authorization in CMIS System once vendor is approved. Refer to Management Support for assistance.
- If the billing statement is received, forward to Management Support for processing payment.

POLICY-- PHYSICAL RESTORATION SERVICES

An individual receiving physical restoration services may be eligible for maintenance while away from home, 34 C.F.R. §361.48(f).

POLICY-- MAINTENANCE FOR VOCATIONAL PROGRAMS

COLLEGE TRAINING

Note: An outside substantial source of support must be documented prior to beginning a college program.

DCRSA may pay college maintenance costs to those individuals eligible under order of selection, provided: (34 C.F.R. §361.48(g))

1) The assessment for vocational needs indicates that college training is the most feasible training option; and
2) A comprehensive search of similar benefits and alternative funding sources has been completed.

FULL-TIME VOCATIONAL TRAINING

Maintenance may be paid for an individual in business, trade, technical, or other schools, on - the - job training, and apprenticeship training, 34 C.F.R. §361.48(g).

REHABILITATION CENTERS AND FACILITIES

Maintenance will be paid based on the State VR Agency's prevailing rate. 34 C.F.R. §361.48(g).

PLACEMENT

After job placement, maintenance may be paid until the individual receives the first paycheck. Maintenance will not continue for more than 30 days after placement unless approved by the Unit Supervisor. **For an exception refer to Appendix G.** 34 C.F.R. §361.48(g).

PROCEDURES – MAINTENANCE FOR VOCATIONAL PROGRAMS

- Documentation of the action to be taken with justification for the service will be made in the case notes.
- Documentation of the method used to calculate the cost of the service will be made in the case notes.
- Receipts or other documentation verifying the individual received the service will be made in the case notes.
- Complete Annual Review, if appropriate, and document any amendments to the IPE by completing the Request for Amendment form in CMIS and obtaining required signatures.
- Update the Financial Resource Form at Annual Review, if appropriate.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Case must be in a service status before the authorization can be written. (Refer to Supervisor for assistance)
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- If the billing statement is received, forward to Management Support for processing of payment.

POLICY-- OTHER SERVICES

Other goods and services include tools, equipment, and initial stock and supplies for vending stands, business and occupational licenses, 34 C.F.R. 361.48(p).

PROCEDURES – OTHER SERVICES

- Documentation of the action to be taken will be made in the case notes.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Case must be in a service status before the authorization can be written. Refer to Supervisor for assistance.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- If the billing statement is received, forward to Management Support.

POLICY-- SUPPORTED EMPLOYMENT SERVICES (SES)

DCRSA will provide Supported Employment Services to any individual who is certified as having a most significant disability and for whom competitive employment has not traditionally occurred or has been interrupted or intermittent as a result of that disability; has been determined eligible under Title I; and has been determined by an assessment of rehabilitation needs to have:

1) The ability or potential to engage in a training program leading to Supported Employment;

2) A need for on-going support services in order to perform competitive work; and
3) The ability to work in a supported employment setting in competitive employment in an integrated setting, or employment in integrated settings in which individuals are working toward competitive employment.

Supported Employment involves full- or part-time employment averaging at least 15 hours per week for each pay period. It may be less than 15 hours with Supervisor's approval.

The individual is placed in an integrated work setting with no more than eight persons with disabilities. Ongoing support services are provided at least twice monthly at the work site (except for LTMI) after DCRSA case closure throughout the term of employment.

The 18-month limitation on the provision of supported employment services has been amended to permit extension of this service on a case-by-case basis as determined and documented on the IPE.

Primary job coach components of supported services are:

1) Job development involving matching the individual to the job, communicating with family and employers where needed on behalf of the individual, and assisting in the arrangement of transportation;
2) Placement, job-site training and support to assist the individual in both acquiring the production skills and general worker traits needed by the employer and in developing positive work relationships with the employer and co-workers; and
3) Promoting job retention through building employer and co-worker supports for the client, maintaining a job site presence consistent with the individual's needs, and assuring support is accessible to the employer, family or individual where needed.

Choosing the Supported Employment Service Model: Supported Employment Services can be provided through individual, e.g. individual placement, job coach, or evidence based models. For an extensive discussion of these models, counselors are directed to the DCRSA Guide to Supported Employment Services.

Supported Employment individuals may not be considered for post-employment services.

When a job is lost prior to 90 days, the counselor will re-evaluate case for additional support services and will move case into appropriate status (e.g. 18, 20 etc). When a job is lost after 90 days, the counselor should take a new referral. The counselor can re-initiate Supported Employment Services for a former individual in instances of job destabilization or potential upgrade, 34 C.F.R. 361.48(m).

All DCRSA requirements related to the provision of services will apply in the provision of supported employment services.

DCRSA funding will cease when an individual meets the supported employment service objectives on the IPE and is stable in employment.

Job stability measures in the Individual Competitive Employment Model are:

1) Employer satisfaction with job performance;
2) Completion of the skill training, adjustment, and fading activities of the employment specialist; and
3) An average intervention time by the employment specialist of less than 20 percent of the individual's working hours over a 90-day period.

Job stability measures for the Group Models are:

1) Employer satisfaction with job performance;
2) Completion of the skill acquisition and work site adjustment phase of the individual's training plan by on-site trainer; and
3) Intervention on the part of the on-site trainer or Supervisor over a 90-day period is directed at maintaining or improving level of production and not at major barriers to successful integration into the host company.

PROCEDURES – SUPPORTED EMPLOYMENT SERVICES (SES)

- Complete the Certificate of Eligibility. (See Appendix E)
- Complete the IPE utilizing informed choice. The counselor will indicate the extended service provider on the IPE at plan development.
- DCRSA will purchase services on a fee-for-service basis as follows:
  - to be paid at time of referral by counselor to the provider Agency;
  - upon job placement as agreed by the counselor, individual and provider;
  - at point of stabilization Status 22 (stabilization is to be determined by 20 percent intervention by the job coach in comparison to total number of hours worked or the individual reaches a plateau of intervention greater than 20 percent and maintaining that level for 120 days;
  - In addition, the individual and the employer must be satisfied with the job placement performance; and
  - after remaining in Status 22 for 90 days and eligible for a successful Status 26 closure.

POLICY-- SUPPORTED EMPLOYMENT SERVICES (SES) -- TRANSITIONAL EMPLOYMENT SERVICES (TES)

Transitional Employment is provided in an integrated setting for individuals with the most significant disabilities due to mental illness. The service must include continuing job placement until permanent employment is achieved. 34 C.F.R. §361.55(r).

PROCEDURES – SES TRANSITIONAL EMPLOYMENT SERVICES

- Complete the Certificate of Eligibility. (See Appendix E.)
- Complete the IPE utilizing informed choice.
- DCRSA will purchase services on a fee-for-service basis as follows:
  - to be paid at time of referral by counselor to the provider Agency;
  - upon job placement as agreed by the counselor, individual and provider;
  - at point of stabilization Status 22 (stabilization is to be determined by 20 percent intervention by the job coach in comparison to total number of hours worked or the individual reaches a plateau of intervention greater than 20 percent and maintaining that level for 60 days. In addition, the individual and the employer must be satisfied with the job placement performance; and
  - after remaining in Status 22 for 90 days and eligible for a successful Status 26 closure.

Primary Agency Fund Codes and their appropriate use for authorizing SE and TES are as follows:

1) Use Title VI-C, Program Code 34 Federal Supported Employment funds to purchase direct and ancillary services for persons who meet all of the criteria for supported employment relating to hours worked, integration, group size, need and availability of post-closure follow along, and severity of disability. Examples of when to use this code are:

   A. Supported Employment services for persons with an intellectual disability who meet the above criteria; and
   B. Supported Employment Services and Transitional Employment Services for persons with LTMI who meet the above criteria.

2) Supported employment services for secondary students. The Agency may plan with and sponsor SES for students who are classified as most significantly disabled and are completing their last year of "formal" education. To provide these services:

   A. The SES must be identified on the IPE, IEP, and ITP, if appropriate, and it results in full/part-time employment;
   B. Vocational awareness/job readiness services, if appropriate, should be identified on the IEP and/or ITP, are considered academic in nature and will not be sponsored by DCRSA;
   C. During the last 60 days, prior to the student's exit from school, SES as identified on the IPE, IEP, and ITP, if appropriate, may be provided by DCRSA;
   D. The vendor of follow-along services must be identified on the IPE, IEP, and ITP, if appropriate; and
   E. If transportation is needed for the SES, the provider must be identified on the IEP and ITP, if appropriate.

POLICY-- PROVISION, IMPACT AND SCOPE OF SERVICES TO FAMILY MEMBERS

Services may be provided to an individual's family when necessary for the individual to attain the vocational objective. These services must substantially contribute to the individual's rehabilitation. The necessity of service provision to an individual's family should be based on a study of the individual's needs. This includes problems faced by the family in support of the individual's rehabilitation. Substantial impact services are those that allow or increase the opportunity for an individual's use of VR services. Without these services, the individual would be unable to begin or continue the IPE, which may result in delayed employment or unachievable employment. The individual and their family member(s) must be jointly involved in deciding if services to a family member can contribute to the individual's rehabilitation program. In developing the IPE, it is important that both the individual and family members understand the basis for provision of family services, i.e., such services must be necessary to the individual's adjustment or vocational rehabilitation, 34 C.F.R. §§ 361.48(i) and 361.5(b) (23).

While the counselor often sees family members during the preliminary or thorough diagnostic study, these interviews and any incidental advice provided during such sessions are not considered a service to a family member. Rather, such interviews and counseling are part of the process of determining the individual's eligibility for VR or the scope of services to be provided.

Services may include childcare, training, transportation, relocation of the family to an area where work is available for the individual, and any other necessary support services for the individual. These services may include any VR services and may be provided without age restriction of the family members. **Services to family members must be included on the IPE.**

Educating the family on the importance of using personal resources, family support, and other available community resources is essential to the successful completion of the rehabilitation program. Appropriate and available resources should be fully utilized in the provision of services to an individual's family when necessary to the individual's adjustment or rehabilitation. Any contribution by family members to the cost of these services is regarded as participation by the individual.

Although these services are intended for the individual's benefit, the family member(s) will also benefit. A family member with a disability that might qualify the individual for VR services should be considered a prospective DCRSA individual.

PROCEDURES – SERVICES TO FAMILY MEMBERS

- The counselor must document in the case notes why services are needed, which family member needs services, what services are needed, how the services will

contribute to the individual's adjustment or rehabilitation, and how services will be secured in accordance with informed choice.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Key CMIS data for appropriate Status. Refer to Unit Supervisor for assistance.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- If the billing statement is received, forward to Management Support.

POLICY-- TERMINATING SERVICES TO FAMILY MEMBERS

Services to family members can be an integral part of the individual's VR, Trial Work Experience or EE program, service termination should be considered when the service no longer substantially contributes to the individual's program or when the individual is rehabilitated.

When the individual has been placed in employment and the case is ready for closure, but services to the family members have not been completed and are still expected to substantially contribute to the individual's rehabilitation program, the case should not be closed until services to family members are completed or terminated.

POLICY-- POST- EMPLOYMENT SERVICES TO FAMILY MEMBERS

Post-employment services to family members may be provided after the individual is rehabilitated if services are necessary to help the individual maintain employment. Post-employment services to family members must be included on an IPE.

POLICY-- POST- EMPLOYMENT SERVICES

Post-employment services may be provided after the individual has been closed as Rehabilitated (Status 26) and needs services to maintain, regain or advance employment. Post-employment services may only be provided to individuals in Status 32. Cases that are closed in Status 26 can only be placed in Status 32, 34 C.F.R. § 361.48(o).

These services are available to meet rehabilitation needs that do not require a complex and comprehensive provision of services and thus, should be limited in scope and duration. If more comprehensive services are required, then a new rehabilitation effort should be considered. Post-employment services are to be provided under an amended Individualized Plan for Employment; thus, a re-determination is not required.

NOTE: Procedures to develop a Status 32 closure are covered in the Closure Section VIII.

NOTE: Post-employment services will not exceed 18 months; however, an extension of time can be requested from the Unit Supervisor and Chief of Vocational Rehabilitation Services Division.

PROCEDURES – POST- EMPLOYMENT

- Case must be in Status 32 to provide post-employment services.
- The counselor must maintain contact with the individual, employer, and vendors who may be involved in the provision of services.
- Document in the case notes the justification for post-employment services and the individual's progress in maintaining employment.
- Refer to DCRSA Vendor List or secure W-9 from new vendor, if needed.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- If the billing statement is received, forward to Management Support.

POLICY-- TOOLS, EQUIPMENT, INITIAL STOCK, AND CONSTRUCTION

Tools, equipment, initial stock and occupational licenses may be provided for an individual if: 34 C.F.R. §361.48 (p)

1) They are necessary for placing the individual in a job or occupation best suited to that individual's abilities and skills;
2) The employer does not ordinarily furnish these articles;
3) They are for the individual's exclusive use; and
4) If the individual is self-employed, self-employment is the most suitable method of placing the individual in a remunerative occupation.

These articles must be for the individual's own use in work performance and must remain in the individual's possession and control as long as the individual remains in the job or occupation. However, the individual may dispose of initial stock in the ordinary course of business.

A threshold of $5000 has been established for the purchasing of Tools, Equipment, Initial Stock, and Construction related services. **For an exception refer to Appendix G.**

POLICY-- PURCHASING (State Purchasing Guidelines)

A request for purchase for goods and services in an amount of five thousand dollars ($5,000) or less can be made without obtaining competitive quotations. All requests for non-competitive small purchases shall be distributed equitably among suppliers.

For each procurement of goods and services in an amount greater than five thousand dollars (5,000) and less than or equal to twenty-five thousand dollars ($25,000), the contracting officer shall obtain at least three (3) oral quotations with documentation from vendors for the goods and services to be purchased. For goods and services more than twenty-five thousand dollars ($25,000) and less than or equal to one hundred thousand dollars ($100,000), at least three (3) written quotations from vendors for goods and services to be purchased is required. The vendor providing the lowest price

quotation will be used to purchase the goods or services; unless concerns other than price or price-related factors are considered. Quotations from more or fewer vendors than required may be necessary depending upon factors other than price.

Exemption: Surgery, treatment, hospitalization; prosthetic devices; professional, technical, and other personal services; room and board; transportation charges; books, manuals; periodicals; and copyrighted educational aids.

PROCEDURES – PURCHASING (State Purchasing Guidelines)

NOTE: Prior approval by the supervisor is required for all services initiated by new counselors.

Supervisory approval is required for all counselors in amounts exceeding $25,000.00.

If the cost of one item or the total cost of like items amount to:

- $2500.01 or more but less than or equal to $25,000 the counselor may submit their request for the purchase of goods and services to the designated requester who will then enter the specification details into the PASS system. Quote specification details will be consistent to all vendors. A copy of the approved purchase order will be returned to the counselor. Management Support will arrange for the purchase;
- 25,000.01 or more but no more than $40,000.00 will require the approval of the Unit Supervisor. The counselor may submit their request for the purchase of goods and services to the designated requester who will then enter the specification details into the PASS system. If unable to obtain three written quotations, a statement of explanation must accompany the purchase request. Quote specification details will be consistent to all vendors. A copy of the approved purchase order will be returned to the counselor. Management Support will arrange for the purchase;
- 40,000.01, or more but less than $50,000. 00 will require approval from the Special Assistant. If unable to obtain three written quotations, a statement of explanation must accompany the purchase request. Quote specification details will be consistent to all vendors. Brand names may be used as a means of identification and as the basis of specifications only. A copy of the approved purchase order will be returned to the counselor. Management Support will arrange for the purchase;
- 50,000.00 or more will require approval from the Division Chief. The counselor may submit their request for the purchase of goods and services to the designated requester who will then enter the specification details into the PASS system. If unable to obtain three written quotations, a statement of explanation must accompany the purchase request. Quote specification details will be consistent to all vendors. A copy of the approved purchase order will be returned to the counselor. Management Support will arrange for the purchase.

Note: The Vendor selected must provide proof of liability insurance, license, and worker's compensation coverage or exemption to comply with the District of Columbia Building Services regulations.

POLICY-- TITLE RETENTION, RELEASE, AND REPOSSESSION

The individual who is provided occupational tools and/or equipment by DCRSA will sign a Title Agreement listing the tools and/or equipment provided and specifying that DCRSA will retain the title. The individual may not sell, mortgage, give away, or dispose of tools and/or equipment provided during the time that DCRSA retains title. The individual upon receipt of the authorized goods will sign an Equipment Purchase Agreement in duplicate with a list of all articles. It is the counselor's responsibility to secure the Equipment Purchase Agreement required in §§125.2 and 125.3.

PROCEDURES – TITLE RETENTION

- Complete the Receipt for Occupational Tools and/or Equipment and Title Agreement form and/or Equipment Purchase Agreement. (See Forms Appendix E).
- Copies of the Title Agreement and/or Equipment Purchase Agreement with signature will be placed in the case file and a copy given to the individual.

POLICY--TITLE RELEASE

The counselor may release the title of occupational tools and/or equipment when the case is closed rehabilitated. However, in the counselor's judgment, if it is in the best interest of the individual or DCRSA, the title may be retained indefinitely.

When the title is relinquished, the counselor will submit the original Release of Title Form to the individual. A copy of this form will also be placed in the record of services.

PROCEDURES – TITLE RELEASE

- Complete the Release of Title for Tools and/or Equipment
- The original will be placed in the file and copy will be given to the individual.

POLICY-- REPOSSESSION

The Counselor must arrange for repossession through a qualified vendor, all occupational tools and/or equipment purchased for an individual if the case does not result in a rehabilitated closure.

PROCEDURES – REPOSSESION

- The counselor will arrange to reclaim the tools or equipment listed on the Title Retention form or the Equipment Purchase Form.
- The case notes should reflect the action taken.
- The counselor will be responsible for storage of the equipment.
- The counselor will be responsible for listing the equipment on the K Drive in the Tools and Equipment folder.

POLICY-- RETURNED OR DONATED ITEMS

Returned or donated equipment will be made available for counselors in other units to use for other cases.

PROCEDURES – RETURNED OR DONATED ITEMS

- The counselor will list the returned or donated item on the K Drive in the Tools and Equipment folder.
- A counselor who has a need for any of the items will contact the counselor listed on the folder.
- The counselor listed on the K Drive will remove the item from the list once arrangements for the exchange have been made.
- The counselor will document in the case record the disposition of the item even if the individual's file has been closed.

POLICY-- REHABILITATION TECHNOLOGY SERVICES

Assistive technology services must be considered for each individual and if appropriate, referred for an assistive technology evaluation/assessment through the National Rehabilitation Hospital or the Assistive Technology Resource Center.

Rehabilitation Technology Services is the systematic application of technologies, engineering methodologies or scientific principles to meet the needs of and address the barriers confronted by individuals with disabilities in areas which include education, rehabilitation, employment, transportation, independent living and recreation. The term includes Rehabilitation Engineering, Assistive Technology Devices, and Assistive Technology Services, 34 C.F.R. § 361.48(q).

POLICY-- REHABILITATION ENGINEERING

Rehabilitation engineering is the systematic application of engineering sciences to design, develop, adapt, test, evaluate, apply, and distribute technological solutions to problems confronted by individuals with disabilities in the functional areas, such as mobility, communications, hearing, vision, and cognition, and in activities associated with employment, independent living, education, and integration into the community.

PROCEDURES – REHABILITATION ENGINEERING

- Documentation of the action to be taken will be made in the case notes.
- Complete referral procedures for Assistive Technology Program evaluation/assessment. (See Forms Appendix E and.)
- Counselor will meet with individual to discuss findings of assistive technology evaluation in accordance with informed choice and with similar benefits.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Key authorization in CMIS once vendor is approved. (Refer to Supervisor for assistance.)
- When device/service is received, verify the individual received device/service and can use device. Document in case file.
- If the billing statement is received, forward to Management Support for payment.
- Refer to Out of State Policy limitations, if necessary. (See Services VI Index)

POLICY-- ASSISTIVE TECHNOLOGY SERVICES

Assistive Technology Services are services that directly assist an individual in the selection, acquisition, or use of an assistive technology device. Services included are:

1) Evaluation of the needs of individuals including a functional evaluation in his/her customary environment;
2) Purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices;
3) Selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing of assistive technology devices;
4) Coordinating and using other therapies or interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs;
5) Training or technical assistance for the individual or, where appropriate, the individual's family; and
6) Training or technical assistance for professionals (including individuals providing education and rehabilitation services), employers, or others who provide services to, employ, or are otherwise substantially involved in the major life functions of individuals with disabilities, to the extent that training or technical assistance is necessary to the achievement of an employment outcome by an individual with a disability.

PROCEDURES – ASSISTIVE TECHNOLOGY SERVICES

- Check for appropriate status in CMIS.
- Documentation of the action to be taken will be made in the case notes.
- Complete referral procedures for NRH or Assistance Technology Resource Center Assistive Technology evaluation/assessment. (See Forms Appendix E.)

- Counselor will meet with individual to discuss findings of assistive technology evaluation in accordance with informed choice and with similar benefits.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- When device/service is received, verify the individual received device/service and can use device. Document in case file.
- If the billing statement is received, forward to Management Support.
- Refer to Out of State Policy limitations, if necessary.

POLICY-- ASSISTIVE TECHNOLOGY DEVICES

These are devices that enable the individual to participate in a rehabilitation program, to complete necessary assessments, or make it possible for the person to work or become more productive. These devices include any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve functional capabilities of individuals with disabilities, 34 C.F.R. § 361.48(q).

PROCEDURES – TECHNOLOGY DEVICES

- Check for appropriate status in CMIS.
- Documentation of the action to be taken will be made in the case notes.
- Complete referral procedures for NRH or Assistive Technology Resource Center evaluation/assessment. (See Forms Appendix E.)
- Counselor will meet with individual to discuss findings of assistive technology evaluation in accordance with informed choice and with similar benefits.
- Medical Consultant review if required. (See Form Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- When device/service is received, verify the individual received device/ service and can use device. Document in case file.
- If the billing statement is received, forward to Management Support.
- Refer to Out of State Policy limitations, if necessary.

POLICY-- PROSTHETIC AND ORTHOTIC DEVICES

Prosthesis means an artificial substitute for a missing body part such as an arm or leg, eye or teeth, contact lenses, and heart valves used for functional or corrective reasons, or both. Orthotics means an orthopedic appliance or apparatus used to support, align, prevent, or correct deformities or to improve the function of movable parts of the body. These items include braces, hearing aids, glasses, belts, trusses, corsets and supports,

orthopedic shoes, crutches and wheelchairs. For an original or first device, the purchase must be based on the recommendation of a specialist in the appropriate field. In cases of replacement and repair of devices, for individuals with a history of satisfactory device use, and in which the basic examination report indicated no pathological change, this report may be sufficient medical basis for rendering the service,34 C.F.R. §361.48(e).

All new or initial wearers and individuals who have had difficulty wearing a limb may be referred to the NRH Amputee Clinic for evaluation. (See Appendix C)

DCRSA will purchase prosthetic and orthotic devices from vendors certified by the American Board of Certification on Orthotics and Prosthetics in accordance with informed choice. Artificial arms, legs, and components must be purchased through certified prosthetists. A list of approved prosthetists will be maintained by DCRSA. Payments will be made according to the established DCRSA Fee Schedule.

In selecting the vendor, the counselor will consider:

1) The individual's wishes based on informed choice;
2) The proximity of the vendor to the individual (the vendor should be accessible to the individual for measurements, fittings, adjustments, maintenance and repair); and
3) The referral source, if the source is an appropriate vendor.

PROCEDURES – PROSTHETIC AND ORTHOTIC DEVICES

- Check for appropriate status in CMIS.
- Documentation of the action to be taken will be made in the case notes.
- Complete referral procedures for National Rehabilitation Hospital's evaluation/assessment. (See Forms Appendix E)
- Counselor will meet with individual to discuss findings of National Rehabilitation Hospital's evaluation in accordance with informed choice and with similar benefits.
- Medical Consultant review is required. (See Forms Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Refer to DCRSA Fee Schedule for fees and select appropriate code.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- When device/service is received, verify the individual received device/service and can use device. Document in case file.
- If the billing statement is received, forward to Management Support.
- Refer to Out of State Policy limitations, if necessary.

POLICY-- HEARING AIDS

DCRSA will purchase hearing aids for individuals from licensed dealers or physicians skilled in diseases of the ear after a hearing evaluation by a physician and a hearing aid evaluation by an audiologist. The audiologist's hearing aid evaluation report must specify the type of hearing aid (i.e., behind-the-ear, or eyeglass), the specific brand name, and model. When applicable, the internal and/or external adjustment for a hearing aid purchased by DCRSA must also be specified. The individual must indicate vendor choice in accordance with informed choice by signing the application, or IPE, 34 C.F.R. §361.48(e).

PROCEDURES – HEARING AIDS

- Documentation of the action to be taken will be made in the case notes.
- Refer individual to audiologist from DCRSA Vendor list for hearing aid evaluation.
- Counselor will meet with individual to discuss audiologist recommendations in accordance with informed choice and with similar benefits.
- Medical Consultant review is required. (See Forms Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Select appropriate DCRSA Procedure code. (See Codes Appendix A)
- Key authorization in CMIS. Refer to Management Support for assistance.
- When device/service is received, verify the individual received device/service and can use device. Document in case file.
- If the billing statement is received, forward to Management Support.
- Refer to Out of State Policy limitations, if necessary.

POLICY-- WHEELCHAIRS

DCRSA may purchase electric and manual wheelchairs and necessary repairs for the individual to proceed through the rehabilitation process. Wheelchairs will be purchased by prescription. The counselor is required to obtain three bids and will purchase wheelchairs from the lowest bidder. Purchases for lightweight/sports model chairs may be made from the vendor recommended by the therapist, physician, or other professional completing the prescription if it is the lowest of three bids, 34 C.F.R. §361.48(e).

PROCEDURES – WHEELCHAIRS

- Documentation of the action to be taken will be made in the case notes.
- Complete referral procedures for NRH Assistive Technology evaluation/assessment. (See Forms Appendix E)
- Counselor will meet with individual to discuss findings of the assistive technology evaluation in accordance with informed choice and with similar benefits.
- Medical Consultant review is required. (See Forms Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Key CMIS data for appropriate Status. Refer to Supervisor for assistance.

- When device/service is received, verify the individual received device/service and can use device. Document in case file.
- Key authorization in CMIS once vendor approved. Refer to Management Support for assistance.
- If the billing statement is received, forward to Management Support.

REPAIR OF WHEELCHAIRS

Repairs of wheelchairs present numerous problems and it will not be possible to provide detailed procedures to cover every possibility. Decisions on where repairs may be made will depend upon resources for repairs in the Washington D.C Metropolitan Area. Usually, it will be more convenient to the individual for minor repairs to be made locally. The counselor and individual will make the decision based on resources and immediacy of the situation in accordance with informed choice.

PROCEDURES -- REPAIR OF WHEELCHAIRS

- Documentation of the action to be taken will be made in the case notes.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- Refer to Out of State Policy limitations, if necessary.

POLICY-- BRACES

Braces will be purchased in accordance with informed choice, upon the recommendation of the specific specialist in charge, i.e., an orthopedist in orthopedic cases; a neurologist in neurological cases. Shoes are standard accessories for all leg braces, if the braces attach to the shoes, 34 C.F.R. §361.48(e).

These shoes must be included in the brace purchase. Repairs may be authorized for any eligible applicant upon a basic examination only, unless the basic examination indicates other consultations are necessary.

PROCEDURES – BRACES

- Documentation of the action to be taken will be made in the case notes.
- Complete referral procedure for NRH Assistive Technology evaluation/assessment. (See Forms Appendix E)
- Counselor will meet with individual to discuss findings of the assistive technology evaluation in accordance with informed choice and with similar benefits.
- Medical Consultant review is required. (See Forms Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Key CMIS data for appropriate Status. Refer to Unit Supervisor for assistance.

- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- When device/service is received, verify the individual received device/service and can use device. Document in case file.
- If the billing statement is received, forward to Management Support.

POLICY-- GLASSES AND ARTIFICIAL EYES

Glasses, artificial eyes and other visual services may be purchased if recommended by a current eye examination performed by an Ophthalmologist or Optometrist, in accordance with informed choice. Glasses may be purchased only when necessary for the individual to complete evaluation, enter or complete a rehabilitation service planned training program, or to enter employment. Glasses, ornamental and/or expensive frames will not be purchased for cosmetic reasons, 34 C.F.R. §361.48(e).

Prosthetic eyes may be purchased for either cosmetic effect or functional use. Plastic eyes should be purchased unless there are justifiable reasons for another type.

PROCEDURES – GLASSES/ARTIFICIAL EYES

- Documentation of the action to be taken will be made in the case notes.
- Refer individual to an ophthalmologist from DCRSA Vendor list for an eye examination.
- Counselor will meet with individual to discuss findings of examination in accordance with informed choice and with similar benefits.
- Medical Consultant review is required. (See Forms Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Key CMIS data for appropriate Status. Refer to Unit Supervisor for assistance.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- If the billing statement is received, forward to Management Support.

POLICY-- PERSONAL ASSISTANCE SERVICES

Personal Assistance Services is a range of services provided by one or more persons, designed to assist an individual with disabilities to perform daily living activities on or off the job that the individual would typically perform if the individual did not have the disability, 34 C.F.R. § 361.48(n).

These services may be provided to an individual at any time during the rehabilitation process and may include: 1) Attendant; 2) Interpreter; and 3) Reader.

POLICY-- ATTENDANT

DCRSA will purchase attendant services in accordance with informed choice provided by one or more persons, designed to assist an individual with disabilities to perform daily living activities on or off the job that the individual would typically perform if the individual did not have the disability. These services may be provided to an individual at any time during the rehabilitation process when prescribed by an attending physician. Family members are other qualified individuals eligible to become vendors through the DC/RSA vendor system.

PROCEDURES – ATTENDANT

- Documentation of the action to be taken will be made in the case notes.
- Medical Consultant review is required. (See Forms Appendix E)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Key CMIS data for appropriate Status. Refer to Unit Supervisor for assistance.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- If the billing statement is received, forward to Management Support.

POLICY-- INTERPRETER SERVICES

DCRSA will purchase interpreter services for deaf or hearing-impaired individuals involved in a rehabilitation program in accordance with informed choice, 34 C.F.R. 361.48(j).

PROCEDURES – INTERPRETER SERVICES

- Documentation of the action to be taken will be made in the case notes.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Key CMIS data for appropriate Status. Refer to Unit Supervisor for assistance.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- If the billing statement is received, forward to Management Support for assistance.

POLICY-- READER

DCRSA will purchase reader services for deaf or hearing impaired individuals and visually impaired individuals involved in a rehabilitation program in accordance with informed choice, 34 C.F.R. 361.48(k).

PROCEDURES – READER

- Documentation of the action to be taken will be made in the case notes.
- Refer to DCRSA Vendor List or secure W-9 from new vendor.

- Key CMIS data for appropriate Status. Refer to Unit Supervisor for assistance.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- If the billing statement is received, forward to Management Support for assistance.

POLICY-- MOTOR VEHICLES

It is DCRSA policy not to purchase motor vehicles for an individual or groups of individuals.

POLICY-- SPECIAL EQUIPMENT AND MODIFICATION FOR MOTOR VEHICLES

Purchase and installation of special equipment and/or vehicle modification may be provided to enable the individual to drive their vehicle or an immediate family member or a designated attendant to provide the individual transportation if: 34 C.F.R. 361.48(q).

1) The individual or vehicle operator has a current operator license, proof that insurance will cover equipment and proof of vehicle ownership.
2) Equipment is purchased from an approved vendor.
3) Equipment purchase and/or vehicle modification is made to enable an individual to participate in an approved VR training program or employment. Needed equipment must be established as a criterion for evaluation of progress toward the employment outcome or covered in an IPE amendment.
4) A vehicle more than five (5) years old and/or a vehicle with more than 50,000 miles has been determined in good condition by a qualified mechanic. This requirement does not apply to vehicles less than five (5) years old or with less than 50,000 miles.
5) An Assistive Technology evaluation from NRH has been completed upon a counselor's request. The evaluation must include equipment description or specifications.
6) The individual has been instructed in safe operation and/or use of equipment by the vendor.
7) A threshold of $5,000 has been established for van modifications, including lift. **For an exception refer to Appendix G.**

The counselor will follow the State Purchasing guidelines.

DCRSA will purchase **one** van lift and/or van modification per individual regardless of the times a case is reopened. DCRSA retains title to special equipment until the case is closed. The agency will cover maintenance contracts up to 2 years. It is the individual and/or family's responsibility to repair the lift and other adaptive equipment after warranty expiration. Driver's training is available at the NRH or DCRSA may purchase driver training from an approved instructor or Agency.

PROCEDURES – SPECIAL EQUIPMENT AND MODIFICATION FOR MOTOR VEHICLES

- Documentation of the action to be taken will be made in the case notes.
- Complete referral procedures for NRH's Assistive Technology Evaluation Program. (See Forms Appendix E)
- Secure a NRH Assistive Technology Evaluation/Assessment recommendation.
- Counselor will meet with individual to discuss findings of assistive technology evaluation in accordance with informed choice and with similar benefits.
- The counselor will follow the District of Columbia purchasing guidelines. (See VI-Services Table of Contents)
- Refer to DCRSA Vendor List or secure W-9 from new vendor.
- Key CMIS data for appropriate Status. Refer to Unit Supervisor for assistance.
- Key authorization in CMIS once vendor is approved. Refer to Management Support for assistance.
- When device/service is received, verify the individual received device/service and can use device. Document in case file.
- If the billing statement is received, forward to Management Support.

NOTE: THIS SERVICE CANNOT BE PLANNED ON THE IPE OR AMENDMENT UNTIL THE ASSISTIVE TECHNOLOGY EVALUATION HAS BEEN PERFORMED.

NOTE: Prior approval by the supervisor is required for all services initiated by new counselors.