

Rehabilitation Services Policy Manual

SECTION Administrative Issues
PART Organizational Structure

SECTION NO. 1-1
PUBLISHED 03/21

Section 1 Administrative Issues

Part 1 Organizational Structure

Rehabilitation Services offers a variety of programs and services to meet the diverse needs of Kansans with disabilities.

- **Vocational Rehabilitation (VR) services** are the cornerstone of our efforts to empower Kansans with disabilities to become gainfully employed and self-sufficient.
- **Pre-Employment Transition Services (Pre-ETS)**, which are part of the VR program, are designed to help students with disabilities prepare for the adult world or work and independent living.
- **Services for people who are blind or visually impaired** - Programs include independent living services for persons who are age 55 or older, and the Business Enterprise Program (BEP).
- **Centers for Independent Living (CILs)**- Services include advocacy, independent living skills training, peer support, information/referral, and deinstitutionalization support.
- **Kansas Commission for the Deaf and Hard of Hearing (KCDHH)** - Services include information/referral, quality assurance screening for sign language interpreters, advocacy.
- **Disability Determination Services (DDS)** - This program determines disability status for Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) claims filed in Kansas.

Unless otherwise specifically noted, the policies in this manual relate to the VR program as authorized through the Rehabilitation Act, Public Law 93-112.

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PART	Purpose of the Rehabilitation Act and Vocational Rehabilitation Services	PUBLISHED	03/21

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Part 2 Purpose of the Rehabilitation Act and Vocational Rehabilitation Services

The purpose of the Rehabilitation Act is to empower persons with disabilities to maximize employment, economic self-sufficiency, independence and inclusion and integration into society.

Reference: PL 93-112, Sec. 2(b)

Synopsis of federal regulation

The purpose of Title I of the Rehabilitation Act is to provide a comprehensive, coordinated, effective, efficient, and accountable program that is designed to assess, plan, develop, and provide vocational rehabilitation (VR) services for individuals with disabilities, consistent with their strengths, resources, priorities, concerns, abilities, capabilities, and informed choice, so that they may prepare for and engage in gainful employment.

Reference: §361.1

Effective Date: May 1, 1998

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SECTION Administrative Issues
PART Mission, Values and Goals

SECTION NO. 1-3
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Part 3 Mission, Values and Goals

Department for Children and Families (DCF)

Mission: To protect children, promote healthy families and encourage personal responsibility.

Rehabilitation Services (RS)

Mission: Working in partnership with Kansans with disabilities to achieve their goals for employment and independence.

Our values and goals:

RS values the worth, rights and contributions of people with disabilities.

Our goals are to:

- Guarantee meaningful participation in planning and obtaining services through informed choice and shared responsibility.
- Deliver rehabilitation services that meet or exceed the expectations of individuals served.
- Achieve high quality rehabilitation outcomes.
- Advocate the rights of persons with disabilities.

RS values competent, facilitative and responsive staff. Our goals are to:

- Use outcome oriented performance standards for all staff.
- Recruit, employ, support, develop and promote qualified staff, and compensate them equitably.
- Practice open communication and participation.
- Celebrate exemplary performance.

RS values a supportive and accountable organization. Our goals are to:

- Promote an organizational climate of trust and consistency.
- Establish management systems that support participation.
- Use management practices that emphasize outcomes.
- Use measures of client satisfaction and other outcomes to improve organization performance.

RS values responsive acquisition and accountable management of resources. Our goals are to:

- Allocate and manage all resources, including staff, in a timely manner according to the changing needs of Kansans with disabilities.
- Increase resources to improve and expand the scope and quality of services.
- Collaborate with others in the public and private sectors to insure that the needs of Kansans with disabilities are addressed.

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RS values public support. Our goals are to:

- Involve persons with disabilities and other consumers in developing agency policy and legislation.
- Obtain the active participation of business and industry.
- Assist Kansas employers in meeting their workforce needs through referral of qualified individuals with disabilities.
- Inform and educate the public.

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SECTION Administrative Issues
PART Public Input for Program Administration

SECTION NO. 1-4
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Section 1 Administrative Issues

Part 4 Public Input for Program Administration

Rehabilitation Services (RS) will seek and consider the views of a variety of stakeholders in matters relating to general policy development and implementation and in administration of the State Plan for vocational rehabilitation (VR) services. The State Plan describes the VR program and the plans and policies to be followed in carrying out the program. The Plan is submitted to the federal Rehabilitation Services Administration.

The stakeholders to be involved in this process include.

- Current and former consumers of VR services, or, as appropriate, their representatives
- Personnel working in the field of VR.
- Providers of VR services.
- The director of the Client Assistance Program (CAP)
- The State Rehabilitation Council
- Others interested in VR, such as legislators, employers, educators, and the general public

Procedures used to obtain and consider stakeholder views include:

- Public forums conducted throughout the State.
- Meetings of advisory councils.
- Regulatory hearings when appropriate.
- Methods to measure client satisfaction, such as surveys, focus groups and problem-solving teams.
- Staff involvement in various special focus commissions or task forces.
- Ongoing consultation with staff in CAP, and with administrative and direct service staff responsible for the VR program.
- Interaction with client advocacy and employer organizations.
- Participation in budget hearings and open meetings conducted by the Kansas Department for Children and Families.

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SECTION Administrative Issues
PART Workplace Violence and Safety

SECTION NO. 1-5
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Section 1 Administrative Issues

Part 5 Workplace Violence and Safety

Synopsis of State of Kansas Workplace Violence Policy

The safety and security of State of Kansas employees and customers are very important. Threats, threatening behavior, acts of violence, or any related conduct which disrupts the organization's ability to execute its mission will not be tolerated.

Any person who makes threats, exhibits threatening behavior, or engages in violent acts on state-owned or leased property may be removed from the premises pending the outcome of an investigation.

Threats, threatening behavior, or other acts of violence executed off state-owned or leased property but directed at state employees or members of the public while conducting official state business will not be tolerated. Off-site threats include, but are not limited to, threats made via the telephone, fax, electronic or conventional mail, or any other communication medium.

Violations of this policy may lead to barring the individual from state-owned or leased premises, termination of business relationships with that individual, and/or prosecution of the individual.

Employees are responsible for notifying the local area management of the Kansas Department for Children and Families (DCF) and Rehabilitation Services (RS) Administration Office of any threats that they have witnessed, received, or have been told that another person has witnessed or received.

Reference: Workplace Violence Policy, Kansas Department of Administration, January 22, 1997

Rehabilitation Services (RS) Policy

When an individual demonstrates by past or present actions that they pose a threat to RS staff, they have forfeited the right to receive vocational rehabilitation (VR) services. The Field Services Administrator in the RS Administration Office should be consulted in all such cases.

- If there is an open case, the case should be closed as "failure to cooperate." The individual should be notified in writing of the closure, the reason for the closure (the individual's behavior which was identified as violent or threatening), the State's workplace violence policy, and the standard rights to appeal.
- Requests to open new cases or reopen previously closed cases should be assessed very carefully. The individual must provide independent evidence that they have received services or therapy to address the previously identified violent or threatening behavior. It is the individual's responsibility to provide such evidence. Independent sources for such evidence and evaluation may be a psychiatrist, psychologist, medical doctor, or other professional whom the counselor deems qualified to assess such situations. Participation in such services or therapy alone does not equate to eligibility for VR services. The individual would still have to be determined eligible according to the standard eligibility policies and procedures. If a case is

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not opened or reopened, the individual should be notified in writing of the RS decision, the reason for the action, the State's workplace violence policy, and the standard rights to appeal.

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SECTION Administrative Issues
PART Appeals – Review of Rehabilitation Counselor Decisions

SECTION NO. 1-6
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Section 1 Administrative Issues

Part 6 Appeals – Review of Rehabilitation Counselor Decisions

Rehabilitation Services (RS) procedures

Applicants, clients or former clients who are dissatisfied with any determination by the rehabilitation counselor regarding the provision or denial of vocational rehabilitation (VR) services may request timely review of those determinations through a mediation process, informal resolution or formal hearing. A client's or applicant's representative may also make such a request. Such requests must be made within 30 days of the agency decision in question.

Applicants and clients are informed of their appeal rights in writing at key stages of the rehabilitation process. Key stages of the rehabilitation process include, but are not limited to, application, determination of eligibility, determination of ineligibility, Individualized Plan for Employment (IPE) development, IPE/service changes and case closure. The information on appeal rights must include the name and address with whom to file requests for reviews. Information about the Client Assistance Program (CAP) must also be provided. One method of providing this information is through the Handbook of Services. This information will be made available in an accessible mode of communication.

When exercising appeal rights, the individual or his/her representative may present evidence or information to support their position. The individual may be represented by an attorney, advocate or any other person selected by the individual if that is his/her choice.

Informal resolution: Individuals are encouraged to discuss any problems directly with their counselor or counselor's supervisor to see if the problem can be resolved. Often CAP facilitates such informal discussions. Or, an administrative review may be conducted by a RS Program Administrator who has not been involved in the case. Use of these informal methods is not required. If the individual chooses not to pursue informal methods, or if the issues were not resolved informally, the next step is a formal hearing which must be conducted within 45 days of the individual's original request for review.

Mediation: Applicants and eligible individuals may resolve disputes through mediation. Mediation services must be presented as an option whenever an individual requests a fair hearing.

- Mediation is voluntary.
- Mediation may not be used to deny or delay the rights of an individual to a fair hearing or to any other rights afforded that individual under Title I of the Rehabilitation Act.
- Mediation must be conducted by qualified and impartial mediators.
- Services, including assessment services and services authorized through an IPE, may not be suspended, reduced or terminated pending the mediation process. Exceptions to this requirement would include situations where the individual requests the change in services, or situations where the individual and/or his/her representative have obtained the services through misrepresentation, fraud or criminal conduct.
- RS will pay for all costs related to mediation.
- If an agreement is reached, the mediator will put the agreement in writing.

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- All information learned during mediation is confidential and cannot be used in subsequent appeal actions.

Formal hearings (fair hearings): These hearings are conducted by Fair Hearing Officers from the Office of Administrative Hearings. These hearings must occur within 45 days of an individual's request for review, unless resolution is achieved, or the parties agree to a specific extension of time. While such a hearing is pending, services being provided under an IPE may not be suspended, reduced or terminated unless requested by the client or unless there is evidence that the services have been obtained through misrepresentation or fraud.

During a fair hearing, the client or his/her representative and the agency have the opportunity to present evidence or witnesses and to question other witnesses and evidence. The client may be represented by an attorney or advocate if that is his/her choice. The hearings officer makes decisions based on the State Plan, the Rehabilitation Act, VR regulations and state policies. Decisions are provided to the individual and RS Director within 30 days of the hearing.

In most situations, if the client is not represented by an attorney during fair hearings or other proceedings, RS will not be represented by an attorney. Exceptions will be made at the discretion of the RS Director. Staff may seek consultation or technical assistance from the DCF Legal Department or local office Attorneys prior to the hearings or proceedings if appropriate.

Review of formal hearings (fair hearings) decisions: Kansas has established the following procedures for the review of decisions of the fair hearings officer.

- The client or the agency may request a review of the fair hearing decision. The authority for this review is vested in the Secretary of the Kansas Department for Children and Families (DCF), the director of the Designated State Agency. Per Kansas Statute 77-527, the Secretary delegates this authority to the State Appeals Committee. Such authority may not be delegated to RS, the Designated State Unit. Parties may submit additional evidence to the State Appeals Committee through legal briefs or presentation of oral arguments. Appeals committee decisions are presented to the Secretary for review, approval and signature.
- The client or the agency must file a petition for a review of the fair hearing decision within 15 days of the date of the decision, if the decision is delivered in person; or within 18 days of the date of the decision, if the decision is mailed.
- After the request for an impartial review, reasonable time extensions may be granted for good cause.
- The State Appeals Committee reviews the decision of the hearings officer to assure consistency with the State Plan, the Rehabilitation Act, VR regulations, and state policies consistent with federal requirements. Any decision of the fair hearings officer that supports the position of the VR applicant or eligible individual can only be overturned or modified by the State Appeals Committee if there is clear and convincing evidence that the decision of the fair hearings officer was erroneous because it was contrary to the State Plan, the Rehabilitation Act, federal regulations, or state policies that are consistent with federal requirements.
- The decision of the State Appeals Committee/Secretary of DCF must be made within 30 days of receipt of legal briefs and oral arguments. A full written report of the decision and the rationale for the decision is provided to the applicant, eligible individual or his/her representative, and to RS.

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District Court: The client may bring a civil action for review of decisions by hearings officers or the State Appeals Committee/Secretary of DCF. The civil action may be brought in any State court of competent jurisdiction or in a district court of the United States of competent jurisdiction without regard to the amount in controversy.

In such actions, the court:

- Shall receive the records related to the hearing and the records related to the state review;
- Shall hear additional evidence at the request of a party to the action; and
- Basing the decision of the court on the preponderance of the evidence, shall grant such relief as the court determines to be appropriate.

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SECTION Administrative Issues
PART Confidentiality – Protection, Use and Release of Personal Information

SECTION NO. 1-7
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Section 1 Administrative Issues

Part 7 Confidentiality – Protection, Use and Release of Personal Information

Rehabilitation Services (RS) will safeguard the confidentiality of all personal information, including photographs and lists of names. All applicants and eligible individuals and, as appropriate, those individuals' representatives, service providers, cooperating agencies, and interested persons are informed through appropriate modes of communication of the confidentiality of personal information and the conditions for accessing and releasing this information.

All applicants or their representatives are informed about the RS need to collect personal information and the policies governing its use, including:

- Identification of the authority under which information is collected.
- Explanation of the principal purposes for which RS intends to use or release the information.
- Explanation of whether providing requested information to RS is mandatory or voluntary and the effects of not providing requested information.
- Identification of those situations in which RS requires or does not require informed written consent of the individual before information may be released.
- Identification of other entities to which information is routinely released.

An explanation of policies and procedures affecting personal information will be provided to each individual in that individual's native language or through the appropriate mode of communication.

The requirements listed above are met using the RS Handbook of Services.

Release to other programs in the Department for Children and Families (DCF)

RS staff may release client information without a signed release from the client to other programs within DCF *on a need-to-know basis*. A signed release is not necessary within DCF since all programs are part of the same state agency.

RS staff may release information without a signed release from the client to DCF contractors and service providers *on a need-to-know basis*. Contracts include assurances that the contractors, who are acting on behalf of RS and DCF, will use the information appropriately and maintain confidentiality standards.

If RS has obtained personal information about a client from another agency, provider or organization, such information may be released within DCF *on a need-to-know basis*. Restrictions on further release do not apply within DCF since all programs are part of the same state agency. In analyzing "need-to-know", counselors shall consider whether entire reports or summary documents should be released, and whether the information is necessary for the purposes of the requesting program.

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Release to programs outside of DCF

When programs outside of DCF which are not contractors of DCF request personal information, informed written consent of the client is required. Upon receiving the informed written consent of the individual or, if appropriate, the individual's representative, RS may release personal information to another agency or organization for its program purposes only to the extent that the information may be released to the involved individual or the individual's representative and only to the extent that the other agency or organization demonstrates that the information requested is necessary for its program.

Release to the Client Assistance Program

Informed written consent is required.

Requirements for release forms

See Forms Part 7, Part 8, Part 9, Part 10 for copies of release of information forms approved by RS. RS staff may also accept release of information forms from other organizations. Whether using RS forms or forms provided by other organizations, the following informed written consent requirements must be met:

- The client's name and identifying information (such as the date of birth or Social Security Number) must be clearly stated.
- The information being requested or released must be specifically identified.
- The person or organization to receive the released information must be specifically identified.
- The purpose for the request or release must be specifically identified.
- The form must be signed, witnessed and dated.
- Specifications of the date, event or condition upon which the release expires must be clearly stated.

Release to applicants and eligible individuals

If requested in writing by an applicant or eligible individual, RS shall release all requested information in that individual's record of services to the individual or the individual's representative in a timely manner. Release may occur by making the record of services available to the individual to view, or by providing copies of information in the record of services, according to the individual's informed choice. There are two exceptions:

1. Release of information that may be harmful to the individual
 - Medical, psychological, or other information that RS determines may be harmful to the individual may not be released directly to the individual. However, this information must be provided to the individual through a third party chosen by the individual. The third

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party may include, among others, an advocate, a family member, or a qualified medical or mental health professional, unless a representative has been appointed by a court to represent the individual, in which case the information must be released to the court-appointed representative.

- In such circumstances, counselors will inform the client and/or the client's representative that specific records contain information which requires professional explanation and interpretation, and in the counselor's judgment, review by or release directly to the client would not be in the client's best interests.
- Counselors should discuss the option of having the client authorize release of the information to a physician or psychologist to facilitate interpretation of the information. If the client agrees with this approach, the counselor may assist the client in arranging such a meeting with the health care professional and in paying for it. If the client does not agree with this option, the counselor shall proceed in a timely manner to release the information to the client's representative.

Note regarding release of such information to other programs: Medical or psychological information that RS determines may be harmful to the individual may be released to another program if the client has provided an informed written consent and if the other program assures RS that the information will be used only for the purpose for which it is being provided and will not be further released to the individual.

2. Further release of information that has been obtained from another agency or organization
 - If RS has purchased a medical/psychological assessment, exam or service on behalf of the client, then RS is considered to be the "owner" of the related records. In such circumstances, RS may further release the records to other appropriate individuals or organizations on a need-to-know basis without other restrictions or conditions.
 - If RS has obtained copies of personal information, such as medical/psychological assessments, exams or services, then such information may be released only by, or under the conditions established by, the other agency or organization.

Fees for copies provided by RS

RS may establish reasonable fees to cover extraordinary costs of duplicating records or making extensive searches. Questions on current fees should be directed to the Administration Office.

Amending the record of services

An applicant or eligible individual who believes that information in the individual's record of services is inaccurate or misleading may request that RS amend the information. If the information is not amended, the request for an amendment must be documented in the record of services.

Release to authorities

Informed written consent (a signed release of information form) is not required in the following circumstances:

- RS shall release personal information if required by Federal law or regulations. Questions about this standard should be addressed to the Social and Rehabilitation Services (DCF) Attorney in the local office at the time a request for release is received.

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- RS shall release personal information in response to investigations in connection with law enforcement, fraud, or abuse, unless expressly prohibited by Federal or State laws or regulations, and in response to an order issued by a judge, magistrate, or other authorized judicial officer.
- RS also may release personal information in order to protect the individual or others if the individual poses a threat to his or her safety or to the safety of others.

State program use

All personal information in the possession of RS must be used only for the purposes directly connected with the administration of the vocational rehabilitation program. Information containing identifiable personal information may not be shared with advisory or other bodies that do not have official responsibility for administration of the program.

Release for audit, evaluation, and research

Personal information may be released to an organization, agency, or individual engaged in audit, evaluation, or research only for purposes directly connected with the administration of the vocational rehabilitation program, or for purposes that would significantly improve the quality of life for applicants and eligible individuals and only if the organization, agency, or individual assures that:

- The information will be used only for the purposes for which it is being provided.
- The information will be released only to persons officially connected with the audit, evaluation, or research.
- The information will not be released to the involved individual.
- The information will be managed in a manner to safeguard confidentiality.
- The final product will not reveal any personal identifying information without the informed written consent of the involved individual or the individual's representative.

Information in this Part is based on §361.38 and DCF guidance.

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SECTION Administrative Issues
PART Informed Choice

SECTION NO. 1-8
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Section 1 Administrative Issues

Part 8 Informed Choice

Rehabilitation Services (RS) Policy

Informed choice is a decision-making process in which the individual analyzes relevant information and selects, with the assistance of the counselor, vocational goals, intermediate objectives, services and service providers. The concept of informed choice flows through every aspect of the rehabilitation process.

RS will provide each applicant, including persons who are participating in an extended evaluation, and each eligible vocational rehabilitation (VR) client with opportunities to make informed choices throughout the rehabilitation process. Each applicant and eligible client will work as active partners with counselors to select vocational goals, select Individualized Plan for Employment (IPE) intermediate objectives, identify services needed, select providers and choose the methods to secure needed services.

Decisions throughout the rehabilitation process must be consistent with the client's strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice. Staff and clients incorporate the concept of partnership in every step of the rehabilitation process. Both staff and clients bring strengths to this process.

- For example, staff bring skills in rehabilitation, knowledge about work, careers, technology, RS practices and federal regulations. Facilitating informed choice often requires innovative approaches within the rehabilitation process.
- The client brings to this partnership a lifetime of experiences, goals and self-awareness about the impact of disabilities, abilities, strengths and interests.
- Families and others often also contribute to this partnership.

Each client or client's representative will receive information about informed choice as well as their responsibilities and opportunities to participate in decision-making. This information is provided by counselors and through the Handbook of Services. Information is provided through appropriate modes of communication based on the client's needs. Assistance is available for persons with cognitive or other disabilities as needed.

During eligibility, each applicant is asked to identify his/her current medical provider for available information. If additional diagnostic information is needed, each applicant may select which provider is used; in some areas there may be a limited number of providers available, or a limited number of providers who will accept RS fees.

RS will assist the client in accessing the information he or she needs to make an informed choice about services and providers of services. Choice in every aspect of service delivery is not open-ended; rather it is related to what is required, not simply desired, to reach the vocational goal and achieve employment. This information will include data related to cost, accessibility and the duration of services. Qualification of provider personnel, scope of available services and the degree to which services are provided in integrated settings are also important components of informed choice.

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Sources of such information will include lists of service providers; client satisfaction reports; referrals to consumers or groups qualified to discuss options with the individuals; and relevant information related to qualification of providers, such as accreditation or certification credentials. Resource directories developed by local transition councils may also be reviewed, if available.

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SECTION Administrative Issues
PART Consultants

SECTION NO. 1-9
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Part 9 Consultants

Consultants are a valuable source of information, expertise and professional medical opinions. They are available to assist counselors in clarifying medical information or in analyzing recommendations. As a general policy, consultant approval is not required before proceeding with service delivery. Decision-making at the local level is encouraged. Counselors may use their discretion in determining when to seek advice or information from one of the consultants. (EXCEPTION: The State Psychological Consultant must approve psychotherapy plans of 25 sessions or more.)

When requesting information or advice from the consultant, include the recommended course of treatment, physician reports or relevant materials that will help the consultant to analyze the situation.

The State Medical and Psychological Consultants are responsible for establishing a network of local medical and psychological consultants, staff training, review of newly developed medical or psychological treatments, advice on cost-effective procedures and development of effective administrative procedures.

Contact the Administration Office for a listing of current consultants and addresses.

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SECTION Administrative Issues
PART Standards for Facilities and Service Providers

SECTION NO. 1-10
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Section 1 Administrative Issues

Part 10 Standards for Facilities and Service Providers

Synopsis of federal regulations

Accessibility of facilities: Any facility in which vocational rehabilitation (VR) services are provided must be accessible to individuals receiving services and must comply with the requirements of the Architectural Barriers Act of 1968, the Uniform Accessibility Standards and their implementing regulations in 41 CFR Part 101, Subpart 101-19.6, the Americans with Disabilities Act of 1990, and section 504 of the Act.

Personnel standards:

1. Qualified personnel. Providers of VR services shall use qualified personnel, in accordance with any applicable national or state-approved or -recognized certification, licensing, or registration requirements, or, in the absence of these requirements, other comparable requirements (including state personnel requirements), that apply to the profession or discipline in which that category of personnel is providing vocational rehabilitation services.
2. Affirmative action. Providers of VR services shall take affirmative action to employ and advance in employment qualified individuals with disabilities.
3. Special communication needs personnel. Providers of VR services shall:
 - Include among their personnel, or obtain the services of, individuals able to communicate in the native languages of applicants and eligible individuals who have limited English speaking ability; and
 - Ensure that appropriate modes of communication for all applicants and eligible individuals are used.

Fraud, waste, and abuse: Providers of VR services shall have adequate and appropriate policies and procedures to prevent fraud, waste, and abuse.

Reference: §361.51

Rehabilitation Services (RS) policy

Counselors will purchase services for clients only from those community rehabilitation programs approved for use by RS. Approval requires compliance with applicable federal and state statutes and regulations.

Service providers have the following responsibilities:

1. Provide the services described in the written agreement.
2. Keep current any state or local licenses, certifications, registrations or permits required for service providers.
3. Provide service only as authorized in advance by RS and only in the amounts authorized.

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4. Not discriminate against any person served because of race, age, color, sex, national origin, or disability, and to provide reasonable accommodations if necessary to permit the person to fully participate in the service.
5. Receive approval from the RS counselor and client before making any change in the goals, objectives or services being provided.
6. Tell the client about the Client Assistance Program (CAP) if there is a complaint or grievance about the services provided.

RS will use only those professional service providers who meet applicable state licensure or certification requirements.

1. A psychiatric diagnosis can be provided by a Licensed Physician, a Licensed Ph.D. Psychologist, a Licensed Clinical Social Worker and a Licensed Master's Level Psychologist working in a Mental Health Center. Beginning July 1, 2000, all Master's Level Mental Health providers can apply for a Clinical credential, allowing them to diagnose and treat mental disorders. A diagnosis made by any Mental Health professional with this clinical certification may be accepted. The list of accepted providers for psychotherapy is the same as the list of providers who can make psychiatric diagnoses with a few additions. Licensed Family Therapists can provide psychotherapy for RS consumers provided that the main obstacle to employment relates directly to a marriage or family conflict. Certified Drug and Alcohol Treatment Counselors can also provide substance addiction services. When accepting services from these providers, it is important to pay especially close attention that the scope of their treatment does not go beyond the expertise of the treatment provider.
2. Psychological evaluations should be accepted if provided by a Ph.D. or Master's Level Psychologist. Certified School Psychologists can provide psychological testing to document specific learning disabilities. Mental Health professionals other than Psychologists should not be accepted as qualified sources of psychological evaluations.
3. A general health appraisal must be performed or approved by a physician, registered physician assistant, certified school nurse, or advanced registered nurse practitioner who is certified by the Kansas State Board of Nursing to function in the expanded role of nurse clinician or nurse practitioner.
4. Individualized prescription and fitting of telecommunication, sensory and other technological aids and devices must be performed only by individuals licensed in accordance with state licensure laws or by appropriate certified professionals.

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SECTION Administrative Issues
PART Record of Services

SECTION NO. 1-11
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Section 1 Administrative Issues

Part 11 Record of Services

Synopsis of Federal Regulation

Rehabilitation Services (RS) shall maintain for each applicant or eligible individual a record of services that includes, to the extent pertinent, the following documentation:

1. If an applicant has been determined to be an eligible individual, documentation supporting that determination.
2. If an applicant or individual receiving services under an Individualized Plan for Employment (IPE) has been determined to be ineligible, documentation supporting that determination.
3. Documentation that describes the justification for closing an applicant's or eligible individual's record of services if that closure is based on reasons other than ineligibility, including closure prior to eligibility determination.
4. Documentation supporting the determination that an individual has a significant disability or a most significant disability.
5. If an individual with a significant disability requires an exploration of abilities, capabilities, and capacity to perform in realistic work situations through trial work experiences or extended evaluations in order to determine whether the individual is an eligible individual, documentation supporting the need for and the plan for the trial work experience or extended evaluation, documentation supporting the periodic assessments conducted during the trial work experiences or extended evaluations, and the written plan developed during the trial work experience or extended evaluation.
6. The IPE and any amendments to the IPE.
Documentation describing the extent to which the applicant or eligible individual exercised informed choice regarding the provision of assessment services and the extent to which the eligible individual exercised informed choice in the development of the IPE with respect to the selection of the specific employment outcome, the specific VR services needed to achieve the employment outcome, the entity to provide the services, the employment setting, the settings in which the services will be provided, and the methods to procure the services.
7. In the event that an individual obtains competitive employment, verification that the individual is compensated at or above the minimum wage and that the individual's wage and level of benefits are not less than that customarily paid by the employer for the same or similar work performed by non-disabled individuals.
8. Documentation concerning any action and decision resulting from a request by an individual for review of a rehabilitation counselor determination.
9. In the event that an applicant or eligible individual requests that documentation in the record of services be amended and the documentation is not amended, documentation of the request.
10. Documentation regarding referrals made by RS.
11. In the event an individual's record of service is closed as a successful rehabilitation, documentation that demonstrates the services provided under the individual's IPE contributed to the achievement of the employment outcome. In addition, documentation must show that all of the following requirements have been met:
 - o The individual has achieved the employment outcome that is described in the individual's IPE and is consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

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- The individual has maintained the employment outcome for an appropriate period of time, but not less than 90 days, necessary to ensure the stability of the employment outcome, and the individual no longer needs VR services.
 - At the end of the appropriate period, the individual and the qualified rehabilitation counselor employed by RS consider the employment outcome to be satisfactory and agree that the individual is performing well in the employment.
 - The individual is informed through appropriate modes of communication of the availability of post-employment services.
12. In the event that an individual's IPE provides for VR services in a non-integrated setting, a justification to support the need for the non-integrated setting.
13. In the event an individual achieves an employment outcome in which the individual is compensated in accordance with the Fair Labor Standards Act or RS closes the record of services of an individual in an extended employment on the basis that the individual is unable to achieve an employment outcome or that an eligible individual through informed choice chooses to remain in extended employment, documentation of the results of the annual reviews required, of the individual's input into these reviews, and of the individual's (or representative's) acknowledgement that these reviews were conducted. (*Note: Such closures would not meet the requirements for a Status 26 closure.*)

Reference: § 361.47

RS Policy

Documentation is intended to meet, but not exceed, the federal requirements for records of service. RS staff will exercise professional judgment and discretion in determining the nature, scope and extent of relevant information to be included in the record. Information should be limited to that which is necessary and sufficient to show the basis and justification for eligibility decisions, order of selection designations, service decisions and the expenditure of public funds. The IPE should be written with sufficient detail to avoid any misunderstanding about the goal, services and responsibilities. Duplicate and extraneous materials do not need to be kept in the record. Documentation of a decision should be sufficient to show that the decision is reasonable, based on adequate fact and information, correctly applies policy, and that the client participated in the decision. Generally, narratives should address:

- What occurred: (decision made, client reported progress, counseling and guidance occurred, information requested, etc.)
- An explanation of what occurred, if needed.
- A description of the client's involvement in what occurred.
- A brief notation of the next step.

Narratives are necessary only for information that cannot be found in other records. Beyond the minimum documentation requirements, staff should focus time and effort on value-added activities, including counseling and guidance, which lead to quality employment outcomes.

If requested or otherwise necessary, a record of services will be transferred based upon the residence of the individual, the nature of the individual's disability, the availability of services, and the individual's choice. See Section 1 / Part 13.

Effective Date: October 1, 2001

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Data Collection and Use of KMIS

KMIS information is used for program evaluation, state budgeting, and federal reporting. Given the critical nature of these functions, it is essential that accurate and complete data is entered on KMIS. This includes, but is not limited to: accurate entry of application information including the date the application was received; accurate eligibility information and time extensions, when used; complete and accurate IPE development and time extensions, when used; services authorized and paid; status movement; use of comparable benefits; and reasons for case closure. In addition, as a result of the Workforce Innovation and Opportunity Act (WIOA) there are many additional data elements which must be recorded at specific points in the case process. These elements include but are not limited to: barriers to employment; involvement with other workforce programs; credential attainment; measurable skill gains; dates of career services provided; and use of comparable benefits. While implementation of WIOA is ongoing, changes to KMIS data screens have been made, and will continue to be made, to facilitate such data entry. Error reports will be provided so that Counselors and Program Specialists can make corrections prior to submission of federal reports. Each VR staff is responsible to record the required data in a timely, complete and accurate manner. Rehabilitation Managers and Program Administrators have the primary oversight responsibilities to assure that this occurs. The reliability and validity of data reported will be subject to case reviews, performance evaluation monitoring, and audits.

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Section 1 Administrative Issues

Part 12 Documentation Guide

This Documentation guide contains the following sections:

General Requirements
Case File Organization
Referral
Application
Initial Interview
Eligibility
Order of Selection
Comprehensive Assessment
Individualized Plan for Employment
Substantial Counseling and Guidance
Progress Notes
Frequency of Contact
Employment Outcomes (Rehabilitated)
Supported Employment Outcomes
Other Outcomes
Records Retention

IMPORTANT NOTE REGARDING THIS DOCUMENTATION GUIDE

The provision of certain services often requires specific information to be researched and analyzed. The provision of certain services, or services which exceed standard cost caps, may also require exceptions to be approved by the RS Program Administrator for your Region, or by the Administration Office. Policy and procedure on such issues are maintained in the RS Manual, which should be used as a reference by counselors in determining specific documentation requirements for such circumstances.

General Requirements

When viewed as a whole, the case file (record of services) should reflect:

- The quality and substantiality of the services provided by VR.
- Evidence of counseling and guidance provided to promote the client's full involvement and participation in the rehabilitation process, to guide the client in exploration of options, to support and assist with problem solving, to refer to other appropriate services, and to coordinate services.
- Maintenance of appropriate and timely contact with the client, with no undue or unwarranted delays. (See Resources Part 9.)
- Timeliness of services provided with no undue or unwarranted delays. The case file should show evidence that RS Staff responded to individuals in a timely way at each stage of the VR process and that services were delivered as expeditiously as possible.
- Evidence that the Client exercised informed choice throughout every aspect of the VR case. Examples include:

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- Summaries of initial interviews which identify how the client expects to be helped through the provision of VR services and the client's ideas related to employment options.
- Narratives identifying options for vocational objectives, services, or service providers explored in a collaborative partnership between the counselor and the client. Narratives which reflect that the counselor provided information on these subjects and/or that the client conducted his or her own research on these subjects.
- Narratives that reflect information provided or research conducted on the labor market.
- Completion of the "client/Client Guide to Developing the IPE,".
- Completion of KMIS screens related to extension of the timeframe for determining eligibility or developing the IPE. (The KMIS printout must be filed in the service record.)
- Narratives reflecting counseling and guidance provided to help the client consider options and make choices.
- Narratives which provide the counselor's rationale for supporting or denying the client's choice.
- Narratives which document conversations in which the counselor explained state policies related to the parameters of services that can be provided.
- Closure narratives that reflect the client's satisfaction with the job achieved and agreement that additional services are not needed.
- See Section 1/Part 8 of the RS Manual for more information on informed choice.
- That the overall case shows an emphasis on helping the client achieve a high-quality employment outcome.

Any information used to evaluate, or support casework decisions needs to be in the service record. Information must be sufficient to show that decisions were reasonable, were based on adequate fact, were considerate of the individual's circumstances, and correctly applied policy. Unless specified otherwise, documentation may be in the form of narratives, various reports, correspondence, copies of e-mail communications, KMIS printouts, completion of forms, and other sources of information. You must get the client's permission to file TTY printouts.

When necessary to organize and clarify multiple or vague sources of information, the counselor should use the narrative to provide an analysis of the information and a rationale which supports the decisions made. The counselor must provide an explanation of apparent discrepancies. (For example, medical information indicates that the client has difficulty walking across the room without getting out-of-breath. The VO is day care provider. This is an apparent discrepancy in that it is difficult to understand how a person with such a limitation would be able to work as a day care provider. Another example of discrepancies occurs when there are conflicting medical records or when medical and school records are not consistent.)

Narratives are necessary for information that cannot be found or not clearly shown in other records. Narratives are essential to recording the counselor's rationale for actions taken. Generally narratives should address: what occurred; the client's involvement; decisions made; client progress; counseling and guidance; information requested; each client contact; attempted client contacts; other party contacts, such as guardians, agencies, providers, employers; and suggested next steps.

Narrative entries should be dated with the current case status and include the counselor's initials. If other staff add to the narrative, they should sign their full names.

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Care should be taken to assure that other client names aren't inadvertently placed in a service record. For example, if multiple client names appear on an e-mail message to be filed in the service record, black out all names/information that do not relate to the specific client.

Progress notes from vendors (contractors/service providers) need to clearly identify the vendor as the source.

Case File Organization

The information filed in the service record should be organized as follows:

Left section:

- Signed and date stamped application
- Signed and dated IPE and IPE amendments
- Assurance letter for extended ongoing services in supported employment
- PELL information
- Medical and psychological information
- Vocational history and evaluation
- DDS referral and information
- Vocational assessment
- Rehabilitation teacher reports
- Social Security verification
- School IEP

Right section:

- Annual review
- KMIS screen print forms
- Client history (KMIS printout)
- Closure letter
- KMIS printout of closure screens (after implementation of revised screens)
- Case narrative, including determination of eligibility
- KMIS printout of eligibility/OS screens (after implementation of revised screens)
- Functional limitations worksheet
- Initial interview
- Questionnaires (optional)
- Placement information
- Progress reports/service provider reports
- Correspondence, such as referral letters and authorization cover letters
- Release of information forms
- Authorization and payment records
- Materials received reports
- Bid documentation

Counselors have the flexibility to divide each section described above into two parts for ease of handling of lengthy case files.

Information in the case file should be in chronological order, with the most recent information on top.

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Reports of contact should be maintained with the related information. For example, a definitive medical report would be placed with medical information. A specific question answered by a psychologist would be placed with the other psychological information. Every effort should be taken to keep the file folder free of duplicate and unnecessary information. For example, if there are multiple accounts of the same medical information, only one copy is needed. Records received that are not pertinent to the VR case can be destroyed. The counselor should note in the narrative what records are being destroyed and why.

Referral

- For third party referrals, the record of services needs to provide evidence that the counselor responded as soon as possible but not more than 30 days after receiving the referral; evidence that the response included information about VR services and how to apply; copy of response letter in case file; narrative regarding responses if by phone or in person.
- For direct inquiries, the record must provide evidence that the VR staff provided immediate information about how to apply for VR services; evidence that an appointment was scheduled in a timely manner.

See Section 2 / Part 1.

Application

Documentation requirements include:

- Application is signed and dated by the individual (or if appropriate, by the individual's representative), or the individual has otherwise requested services and provided necessary information.
- Application is date stamped when received in the VR office.
- Application is entered on KMIS.
- Evidence that the individual has received the *Handbook of Services*, as shown by the signed application form.

See Section 2 / Part 1.

Initial Interview

In addition to the Rehabilitation Services application form, the following information, to the extent it will impact the VR process or employment, must be collected as part of the application process and recorded in the record of services.

- Applicant's description of the disability and how it impacts the ability to work and to complete daily activities.
- Employment history, such as work performed at home; paid work (employers, dates, wages, duties, job title, reason no longer working there); job duties the applicant can no longer perform; type of work the applicant wants to do; accommodations that may be required.
- Residential, domestic and family information (such as number in family, dependents, typical routine, support available through family, friends and social groups.)
- Medical history, such as names of hospitals, doctors, psychologists, social workers.

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- Current medications.
- Transportation available? Driver's license? Ability to use public transportation, if available.
- Corrections history, including names of probation or parole officers.
- Childcare arrangements.
- Media of choice.
- Does the client have a Ticket-to-Work? Is it available for assignment? Or, if the client has assigned it to another Employment Network (EN), identify the EN.
- How can VR help? What is the applicant's reason for applying?

Documentation must identify the name of the person who conducted the initial interview, if that person was someone other than the VR counselor.

See Section 2 / Part 1.

Eligibility

The determination of an applicant's eligibility for VR services must be based only on the following requirements:

- A determination by qualified personnel that the applicant has a physical or mental impairment.
- A determine by qualified personnel that the applicant's physical or mental impairment constitutes or results in a substantial impediment to employment for that specific individual applicant.
- A determination by the RS VR counselor that the applicant requires VR services to prepare for, secure, retain, or regain employment consistent with the applicant's unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

It is presumed that the applicant can benefit in terms of an employment outcome from the provision of VR services unless there is clear and convincing evidence to the contrary.

Any applicant who has been determined eligible for SSI or SSDI is presumed eligible for VR services and is considered to be an individual with a significant disability. (This means that these individuals are in *at least* Category 2 in the Kansas Order of Selection.)

Related to eligibility, the case file must address the following factors:

- Description of the applicant's primary and secondary impairments. [A physical or mental impairment means: any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological, musculo-skeletal, special sense organs, respiratory (including speech organs), cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin, and endocrine; or any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.
 - Descriptions of impairments are usually found in medical or psychological records and may be enhanced by information in vocational assessments and/or the counselor's narrative description.
 - If the individual has a disability that can be verified by counselor observation or by information provided by the individual or family, they meet this first part of the eligibility criteria. In such cases, Part 1 of eligibility should not be delayed while medical or

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psychological information is gathered. Such information, however, may be necessary to develop an appropriate plan of services.

- If the individual is not receiving SSI/SSDI and does not have an impairment that can be verified by counselor observation or information from the individual or family, then request medical information. The case must show that such requests were made in a timely manner. Delays must be explained in the narrative.
- Documentation must show that existing information was used to the extent available, timely and adequate for eligibility determination. Information used must show the *current* functioning of the individual.
- A description written by the counselor that explains how the applicant's impairment constitutes or results in a substantial impediment to employment for that specific individual. The description should specify the impediment, how it results from the impairment, how it hinders employment, and why it is substantial for the individual. [Substantial impediment to employment means that a physical or mental impairment (in light of attendant medical, psychological, vocational, education and other related factors) hinders an individual from preparing for, entering into, engaging in, or retaining employment consistent with the individual's abilities and capabilities.]
- Documentation from the counselor that explains why the applicant requires VR services to prepare for, secure, retain or regain employment consistent with the applicant's unique strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice. (The counselor must presume that a person who has a disability which has been determined to constitute an impediment to employment can benefit from VR services in terms of an employment outcome unless there is clear and convincing evidence to the contrary.)
- Evidence that an applicant who has already been determined eligible for SSI or SSDI, or who has a Ticket-to-Work, is presumed to be eligible for VR. Notation of how this status was verified is required. Verification of this status may include a Ticket, an SSA award letter, a current check stub, the KMIS interface, or other verifiable evidence. Eligibility should be completed as soon as receipt of benefits is verified.
- Evidence that the eligibility determination was made as soon as possible, but no later than 60 days from the date of application (date stamped date). If the determination was not made within 60 days, there must be documentation of the reason for the delay, and evidence that the applicant agreed to a specific time extension. The KMIS time extension screens must be completed and the KMIS printout filed in the service record. Evidence of the individual's agreement may include a completed and signed form, or a counselor's narrative of a conversation. The extension must be completed, including the applicant's agreement, prior to expiration of the original 60 days.

Order of Selection

Documentation requirements include:

- Completion of the functional limitation's worksheet, including the counselor's rationale for identifying each limitation selected. List services that will address the limitations in terms of employment.
- Appropriate documentation supporting that the individual has a significant or most significant disability.

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- Evidence that the individual was informed of their category designation. This may be conveyed in person or by phone, followed up with the appropriate brief narrative entry. This information may also be conveyed in writing, with a copy placed in the service record.
- Evidence that individuals receiving SSI/SSDI, or individuals with a Ticket, are automatically in at least Category 2.
- Documentation of referrals made on behalf of individuals who are placed on a waiting list. This may be conveyed in person or by phone, followed up with the appropriate brief narrative entry. This information may also be conveyed in writing, with a copy placed in the service record.

See Section 2 / Part 5.

Comprehensive Assessment

- Documentation of any additional impairments and associated substantial impediments to employment that were not described during determination of eligibility and Order of Selection category.
- Information from a strengths-perspective which describes the assets (skills and abilities, interest in working, etc.), and resources the individual brings to the employment arena.

Individualized Plan for Employment

- The IPE and amendments have been signed and dated by the individual (or if appropriate, by the individual's representative) and the counselor. A copy of the original IPE and any amendments have been given to the individual.
- Evidence that the plan was developed as soon as possible, but no later than 90 days from the date of eligibility (Status 10). If the IPE was not signed within 90 days, there must be documentation of the reason for the delay, and evidence that the applicant agreed to a specific time extension. The KMIS time extension screens must be completed and the KMIS printout filed in the service record. Evidence of the individual's agreement may include a completed and signed form, or a counselor's narrative of a conversation. The extension must be completed, including the applicant's agreement, prior to expiration of the original 90 days.
- Narratives which clearly document how the client was involved in developing the IPE. Notes that describe the client's interests and employment goals. Evidence that the individual had informed choice in selecting the vocational objective. Information regarding availability of employment related to the VO. Evidence that the individual had sufficient information regarding alternatives to make informed choices about services and providers.
- The service record must support that the vocational objective is consistent with the assessment of the individual and his/her primary employment factors.
- A narrative discussion of how the services on the IPE address the individual's needs and relate to the individual's vocational objective. (This should result in evidence that all services listed on the IPE are necessary to achieve the employment goal.)
- Identification of the criteria that will be used to evaluate progress.
- Evidence that comparable benefits were considered and used as appropriate.
- IPE amendments are completed whenever a service was added or deleted. IPE amendments are also required whenever the vocational objective is changed. However, no amendment would be required if the individual accepts a job during the placement phase that is different

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than the job listed on the IPE. Such a change should be documented specifically in the closure letter. The letter must be labeled "IPE Amendment."

- Were annual reviews of the IPE conducted? Is there evidence that the individual took part in such reviews?
- Documentation that the individual's progress is regularly updated/reviewed, and that sufficient contact is maintained with the client according to the individual circumstances of the case.
- Documentation of the Ticket-to-Work assignment process and outcome.
- For students receiving special education services, notation that the IPE is consistent with the transition portion of the student's Individualized Education Plan (IEP).

For supported employment cases, the record of services must include:

- Description of the time limited services, not to exceed 18 months, to be provided by VR.
- Description of the ongoing services needed by the individual and identification of the provider of ongoing support. In the event that identification of the source of ongoing services is not possible at the time the IPE is written, a statement explaining the basis for concluding that there is a reasonable expectation that such ongoing services will become available.
- A provision for periodic monitoring to ensure satisfactory progress toward meeting the work goals by the time of transition to extended ongoing services.
- The client's goal for the number of hours to work.
- The criteria for job stabilization. Job stabilization shall be individually determined for each client. This criteria should describe the methodology that will be used to determine when VR funding should cease and ongoing support should take over.
- Projection of the number of hours of job coaching needed for the client to reach stabilization and case closure.

See Section 3 / Part 14.

Substantial Counseling and Guidance

Documentation of substantial counseling and guidance (Service Code 370) must address specific, substantial counseling services provided directly by the VR counselor. These services must be vocational in nature and specifically designed to assist the individual in participating in the rehabilitation process or in reaching an employment outcome.

Documentation must show multiple sessions, and show that issues such as the following were addressed:

- Vocational exploration.
- Career decision-making.
- Establishment of a career path, including short- and long-term goals.
- Self-advocacy in the workplace.
- Development of problem-solving skills.
- Use of community resources related to employment.

Documentation should address outcomes achieved as a result of such counseling and guidance.

See Section 3 / Part 4.

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Progress Notes

Documentation must include identification of client's progress, and interventions or action plans used to address issues or concerns, if any. Progress notes may be found in counselor narratives or in reports from service providers.

Frequency of Contact

Frequency of contact should be determined by individual circumstances and at critical points in the rehabilitation process. As a general rule, contact on a monthly basis is appropriate. More frequent contact should typically happen during assessment for eligibility, IPE development, initiation of services, and when employment begins. Less frequent contact might reasonably occur after the client has stabilized in longer term services, such as when an individual has established good performance in a training program.

If services are interrupted or there is a loss of contact, the reasons must be entered in case narrative. The narrative should also reflect what is being done to resume the rehabilitation process.

Employment Outcomes (Rehabilitated)

Documentation must address the following questions and issues:

- Did the services provided contribute significantly to achieving the employment outcome? (What substantial services were provided? Did the services provided by the agency make it possible for the person to be employed or achieve the specific job they have?)
- Was the employment outcome consistent with the individual's primary employment factors (strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice)?
- Did the individual maintain the employment outcome for an appropriate period of time, but not less than 90 days, necessary to ensure the stability of the employment outcome? (The date when employment began must be clearly identified.)
- Is there evidence that the individual no longer needs VR services?
- Was the employment in the most integrated setting possible, consistent with the individual's informed choice?
- Did the individual and the counselor agree that the employment outcome was satisfactory and the individual was performing well on the job?
- Discussion of the need for post-employment services.
- Evidence of the individual's wage, that the wages/benefits were comparable, that the work was in an integrated setting, and the work was the choice of the client.
- Closure letter is titled IPE Amendment, and specifically states the services provided, individual's dates of employment, wage, benefits, place of employment, views regarding closing the case, appeal rights including Client Assistance Program (CAP) services.

See Section 5 / Part 1

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Supported Employment Outcomes

In addition to the employment closure requirements described previously, such closures should be based upon the following factors:

- The client was provided appropriate and substantial services in accordance with the IPE.
- The client is in paid employment.
- The client has made substantial progress toward working the number of hours per week specified in the IPE.
- The client's workplace offers opportunities for integration with non-disabled persons (not paid service providers) who may be supervisors, co-workers or customers.
- The community service system has assumed the responsibility for funding and providing the extended ongoing support services necessary to maintain employment.
- The client's performance meets the criteria for job stabilization defined in the IPE. Stabilization must be based on the following factors:
 - The client has reached a maximum level of work performance.
 - The agreed upon hourly work goal has been reached.
 - Job coaching and related support services have decreased to a level necessary to maintain the individual in employment through ongoing support.
 - If the individual is stabilized in employment at a level of hourly work that is less than the goal established on the IPE, the client and counselor agree that the situation may be considered substantial and suitable employment.
- Placement is maintained for at least 90 days after making the transition to extended ongoing services. The ongoing supports being provided are adequate to meet the client's needs with respect to maintaining employment.

See Section 5 / Part 1

Other Outcomes

- The counselor has provided a rationale for closing the record of services.
- Rationale for ineligibility decisions. If ineligibility was based on severity of disability, was there clear and convincing evidence (based on more than assessments or testing) that the individual is incapable of benefiting from VR services in terms of an employment outcome.
- The client was given a written notice of case closure, which included reference to appeal rights and CAP services.
- The client has been referred to other appropriate services which then are documented in the case narrative.

See Section 5 / Part 2 and Section 5 / Part 3.

Records Retention

Service records will be retained for five years after the closure of the case. Service records containing HIPAA information will be retained for six years.

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At the end of each month and each calendar year, the Administration Office will send the Field Office Records Retention Officers a list of cases closed during that period. These lists should be retained for future reference in determining which files can be destroyed.

At the end of each calendar year, the Field Office Records Retention Officers should prepare a list of records they intend to destroy. This list will be sent to the RS Administration Office Records Retention Officer for approval prior to destroying any records.

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Section 1 Administrative Issues

Part 13 Miscellaneous Administrative Issues

This section contains the following topics:

Kansas Residency
Non-Discrimination
Out-of-State Services
Prior Authorization
Reporting Child Abuse and Neglect
Transfer of Cases
Use of Toll-Free Numbers (in lieu of accepting collect calls)
Acceptance of Verbal/Electronic Signatures

Kansas residency

Consistent with federal regulations, RS may not impose any duration of residence requirements as part of determining eligibility for VR services or that exclude from services any individual who is present in the state. In addition, per a federal directive, RS may not require eligible individuals receiving out-of-state services through an IPE to maintain or verify Kansas residency status.

Non-Discrimination

All services shall be provided without regard to sex, race, age, creed, color, national origin or type of disability.

Out-of-State Services

Prior to including any out-of-state services in an IPE, the counselor must complete an analysis which:

- Identifies the specific rehabilitation need to be addressed by the services.
- Compares the ability of in-state and out-of-state services to meet the identified rehabilitation needs.

Before an out-of-state service to be funded by RS is included in the IPE, the Comparative Analysis Worksheet must be completed by the Counselor and forwarded for approval according to the Region's procedures. Each RS Program Administrator will establish a procedure for routing such exception requests through the RS Managers, RS Program Administrator or both. The worksheet indicating final action taken should be filed in the record of services.

If the analysis shows that comparable services are available in-state, the client may choose out-of-state services with the additional cost to be paid by the client. RS Regional Program Administrator approval is not required in this circumstance.

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Prior Authorization

Prior approval/authorization is required before RS will pay for any goods or services. After the IPE is in place (Status 12) and in very limited circumstances, such as medical emergencies when it was not feasible for the client to get prior approval and no other source of funding is available, an exception may be approved. Each RS Program Administrator will establish a procedure for routing such exception requests through the RS Managers, RS Program Administrator or both.

Reporting Child Abuse and Neglect

RS staff that has reason to suspect that a child has been injured as a result of physical, emotional, or sexual abuse or neglect shall report such situations. Reason to suspect means that there is credible evidence or a discrepant or inconsistent history in explaining a child's injury. Reporting is a request for an assessment into the condition of a child. The determination of whether abuse or neglect has actually occurred is the responsibility of DCF or appropriate law enforcement agencies. The report may be made orally and followed by a written report if requested by DCF or law enforcement agencies. Reports should include the name and address of the child, the child's parents or other individuals responsible for the child's care; the child's location; the child's condition, including the nature or extent of the injury; whether the alleged perpetrator has access to the child; and any other helpful information. Reports should be made to DCF or to a law enforcement agency if DCF is not open for business. Reports may also be made to the Child Abuse Hotline at 1-800-922-5330 or the Attorney General's Office at 785-296-2215.

Reference: KSA 38-1522

Transfer of Cases

A record of services may be transferred to another office or counselor with the approval of the RS Regional Program Administrators/Managers for the offices involved. Among the factors to be considered are:

- Residence of the client.
- The nature of the client's disability.
- The availability of services.
- The client's choice.

Prior to requesting a transfer, the transferring counselor must document recent contact with the client, the client's views on the transfer, the client's intention to continue VR services, and the client's new address, phone and contact information. The transferring counselor should also document counseling and guidance provided to the client related to the possibility that all current IPE services may not be available in the new community.

Use of Toll-free Numbers (in lieu of accepting collect calls)

With the availability of the Kansas Department for Children and Families (DCF) toll-free number, 1-888-369-4777 and the toll-free relay center number for persons with speech and hearing impairments, 1-800-766-3777, Rehabilitation Services (RS) will not accept collect calls from clients or applicants.

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Acceptance of Verbal/Electronic Signatures

Due to social distancing and provision of virtual services as a result of the COVID-19 pandemic, physical signatures may not be readily obtainable from clients/students in a timely manner for the provision of services. We have expanded this to allow verbal signatures at this time and will continue to review this allowance.

Email signatures from clients/students will be allowed. Detailed case narratives must accompany such signatures. If a client/student is giving approval through an approval/agreement statement by email, the email must be clear and specific about what document is referenced. If the original request for approval is specific, and then forwarded as part of the approval response, then it is considered part of the record and does not have to be repeated.

Signatures obtained by fax, photo, electronic keypad, etc. are considered to be physical signatures and not subject to the requirements applicable to verbal or virtual/email signatures.

Rehabilitation Services Policy Manual

SECTION Administrative Issues
PART Internal Controls

SECTION NO. 1-14
PUBLISHED 03/21

Section 1 Administrative Issues

Part 14 Internal Controls

RS will implement a wide range of internal controls to assure the integrity of fiscal, program, compliance, and service documentation requirements. Internal controls are designed to assure quality, prevent deficiencies in these critical areas, promote accountability, improve operational efficiency and implement corrective actions if necessary. Training of staff is an essential component of the RS internal control practices. RS will also consult with technical assistance centers and/or RSA to assure that the agency implements best practices consistent with Rehabilitation Act requirements.

Internal control practices implemented by RS include:

- Comprehensive case (service record) reviews.
- Review of expenditures.
- Participation in the state's single audit process.
- Monitoring compliance with timeliness standards.
- Performance evaluation procedures.
- Monitoring achievement of outcomes.
- Service authorization policies requiring tracing of expenditures from the IPE, to service authorization (purchase order), to verification of receipt of goods and services, invoicing, and payments.

RS also complies with the accounting and purchasing requirements implemented by the Department for Children and Families (the DSA) and the Kansas Department of Administration. The DSA fiscal unit collaborates with RS to assure the tracking of VR funds, including the Pre-ETS set-aside.

Internal control practices/findings are discussed and evaluated regularly at management team meetings.

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SECTION Administrative Issues
PART Credential Attainment & Measurable Skill Gains

SECTION NO. 1-15
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Section 1 Administrative Issues

Part 15 Credential Attainment & Measurable Skill Gains

The Workforce Innovation and Opportunity Act (WIOA) Common Performance Measures, outlined in Section 116, for Credential Attainment (CA) and Measurable Skill Gains (MSG) rates are reported to the Rehabilitation Services Administration (RSA) quarterly, as they are achieved. VR Counselors will record CAs and MSGs that occur in conjunction with a training goal agreed to in the Individual Plan for Employment (IPE). Third party documentation of CA and MSGs must be included in the client record in conjunction with updating the appropriate documentation in KMIS.

DEFINITION:

1. **Participant:** In accordance with 34 C.F.R § 361.150(a)(1), a “Participant” is a reportable individual who has an approved and signed Individualized Plan for Employment (IPE) and has begun to receive services.
2. **Program Year:** The Program Year (PY) is the reporting period for WIOA performance. It begins on July 1 and ends on June 30. For example, PY 19 is July 1, 2019 to June 30, 2020.
3. **Measurable Skills Gains (MSG):** MSG are milestones that participants achieve on the path toward attainment of an educational credential or employment training goal as indicated in an Individualized Plan for Employment (IPE).
4. **MSG Rate:** The percentage of program participants who, during a program year, are in an education or training program that leads to a recognized credential or employment and who are achieving documented academic, technical, occupational, or other forms of progress towards such a credential or employment.
5. **Credential Attainment (CA):** Credential Attainment is a WIOA Common Performance Measure (CPM) that documents the successful completion of an industry recognized diploma, degree, certificate, certification or licensure during participation in **or** within one year after exit from the program.
6. **CA Rate:** The percentage of those participants enrolled in an education or training program (excluding those in On-the-Job Training (OJT) and customized training) who attained a recognized post-secondary credential or a secondary school diploma, or its recognized equivalent, during participation in, or within one year after exit from, the program. *Note: OJT and customized training cannot be counted toward CA rate but can be an MSG.*
 - a. A participant who has attained a secondary school diploma or its recognized equivalent is included in the percentage of participants who have attained a secondary school diploma or its recognized equivalent only if the participant also is employed or is enrolled in an education or training program leading to a recognized postsecondary credential within one year after exit from the program.

REPORTING CA:

The Credential Attainment Rate measures attainment of two types of credentials: either a recognized **postsecondary credential**, or a **secondary school diploma or its recognized equivalent**. A credential should be recorded as soon as it is achieved, and the counselor has the documentation of the CA. Appropriate documentation should be inputted into KMIS and hard copy filed in case file.

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KRS accepts third party verification of Credential Attainment from entities including:

1. State Educational Agency, including Public Career and Technical Education Facilities
2. Higher Education Institutions and programs eligible to participate in the Federal student financial aid programs. This includes community colleges and universities both public and private and programs that are FAFSA eligible.
3. Higher education institutions that are formally sanctioned or chartered by the governing bodies of Native American Tribes.
4. A professional industry, employer organization or product manufacturer/developer using a valid reliable assessment of an individual's knowledge, skill and abilities. Examples include Microsoft It Professional (MCITP), National Institute for Metalworking Skill, Inc., Machining Level I credential.
5. The Office of Apprenticeship (State and Federal)
6. A public regulatory agency which awards a credential or license that is necessary to obtain employment in a particular profession or occupation. For example, licenses awarded by the Kansas State Board of Technical Professions (<https://www.ksbtp.ks.gov/>) or the Kansas State Board of Nursing (<https://ksbn.kansas.gov/>).
7. Programs approved by the Department of Veterans Affairs to offer education benefits
8. Job Corps, which issues certificates for completing career training programs that are based on industry skills standards and certification requirements

When documenting credentials:

- Credentials attained should correspond to the training goals identified on the IPE even if comparable benefit.
- Input Enrollment date.
- The date of Credential Attainment should correspond to the date the credential was awarded or the last date of attendance (if credential award date is not available).
- Record of Credential Attainment should be documented on the Tracking Education Completion Page in KMIS (Figure 1.1) as the credentials are achieved.
- Credentials can be attained during program participation or within one year following exit from the program. If a Counselor receives verification of a credential attained post-exit, notify KMIS Data through supervisory channels.
- Credential Attainment includes the following:

Types of Accepted Credentials	Example
Secondary School diploma or recognized equivalent	<ul style="list-style-type: none"> • High School Diploma • GED • High School Equivalency Test
Associate Degree	<ul style="list-style-type: none"> • AS in Marketing
Bachelor's Degree	<ul style="list-style-type: none"> • BS in Social Work
Graduate Degree	<ul style="list-style-type: none"> • MS Rehabilitation Counseling

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<p>Occupational Licensure</p> <p>License refers to a credential awarded by a licensing agency based on predetermined criteria. Occupational Licensure is awarded by a public regulatory agency that awards a credential or license necessary to obtain employment in a particular profession or occupation. The criteria for licensure may include some combination of degree attainment, certifications, certificates, assessment, apprenticeship programs, or work experience. Licenses are time-limited and must be renewed periodically.</p>	<ul style="list-style-type: none"> • Registered Nurse • Barbering License
<p>Occupational certificate, including Registered Apprenticeship and Career and Technical Education educational certificates</p> <p>Occupational certificates are awarded by an education institution based on completion of all requirements for a program of study, including coursework and test or other performance evaluations.</p>	<ul style="list-style-type: none"> • Welding Certificate • Plumbing Registered Apprenticeship
<p>Occupational certification</p> <p>Occupational certification is a credential awarded by a certification body based on an individual demonstrating through an examination process that he or she has acquired the designated knowledge, skill, and abilities to perform a specific job. The examination can be either written, oral, or performance based.</p>	<ul style="list-style-type: none"> • Automotive Service Excellence Certification • Job Corps – Career Technical Training Certification
<p>Other recognized certificates of industry/occupational skills completion sufficient to qualify for entry-level or advancement in employment</p>	<ul style="list-style-type: none"> • Other

WHO IS EXCLUDED FROM CA CALCULATIONS?

- Participants who exited a program and who were enrolled in the following are excluded from the credential attainment rate:
 - OJT
 - Customized training

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- Participant who is enrolled in a special education program, under an Individualized Education Program (IEP), leading toward a Certificate of Completion.
- Participants not enrolled in education or training leading to a recognized credential.

Examples that Do NOT Meet the WIOA Definition of Credential
Special Education Certificate of Completion
Work/Career Readiness Certifications (workforce development boards)
Completion of Orientation and Mobility Training
OSHA 10, CPR, First Aid – Other common job-related safety and health hazard training certifications
VRS sponsored On-the-Job Training (OJT) or Customized Training
Transportation skills attainment
Soft skills training
General computer and security certificates
Comprehensive transition programs (CTP) that may not lead to a recognized post-secondary credential

Note: Certificates awarded by workforce development boards (WDBs), and work readiness certificates are not included in this definition because neither type of certificate is recognized industry-wide nor documents the measurable technical or industry/occupational skills necessary to gain employment or advance within an occupation. Certificates must recognize technical or industry/occupational skills for the specific industry/occupation rather than general skills related to safety, hygiene, etc., even if such general skills certificates are broadly required to qualify for entry-level employment or advancement in employment.

REPORTING MSG:

Measurable Skill Gains (MSG) are interim progress participants achieve on the path toward attainment of an educational credential or employment training goal. An MSG should be recorded as soon as it is achieved, and counselor has documentation. Appropriate documentation should be inputted into KMIS and a hard copy filed in case file.

Documenting MSG:

- An MSG shall only be recorded if training, including OJT, is listed as a goal in the IPE even if comparable benefit.

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- Input enrollment date. The MSG Enrollment date entered should correspond to the actual enrollment date of the education or training program (or IPE date if already enrolled at time of initial IPE).
- MSG is not exit based.
- Once documented, the Tracking Education Completion Page in KMIS (Figure 1.1) should be updated and the MSG recorded as an Educational Goal Outcome or Skill Gain, as appropriate. The MSG Date entered (Figure 1.3) should correspond to the date the MSG was completed, and file in hard copy file.
- The MSG description should be recorded (Figure 1.3) as one of the five major categories, described below:

Five Types of Measurable Skill Gains

To receive an MSG, one of the following needs to occur:

1. Educational Functioning Level (EFL) Gain (refer to [Adult Basic Education](#) for assistance in this MSG) is the documented achievement of at least one educational functioning level of a participant who is receiving instruction below the postsecondary education level. An EFL can be documented in three ways:
 - a. Documenting an EFL gain through a pre and post-test showing the participants measured progress (such as an increased Reading Level measured through a TABE, ABLE, or BEST);
 - b. Documenting an EFL gain while enrolled in adult high school programs that lead to a secondary school diploma or its recognized equivalent may measure and report educational gain through the awarding of credits or Carnegie units; or
 - c. Documenting an EFL gain for participants who exit a program below the postsecondary level and enroll in postsecondary education or training during the program year. This applies to participants enrolled in a basic education program. *Note: Concurrent enrollment in post-secondary training and adult education does not meet the definition of increase in educational functioning level.*
2. Secondary High School Diploma or Recognized Equivalent:
 - a. Documented achievement of High School diplomas and General Education Diplomas (GED) awarded by secondary schools as well as Adult Education Programs. *Note: Special Education certificates are not considered a Credential, therefore MSG are not applicable and should not be recorded.*
3. Secondary and Postsecondary Transcript or Report Card
 - a. Secondary Education
 - i. Successful completion of a semester in a secondary school program: This includes only students who are seeking a high school diploma or General Education Diploma (GED). VRS should review the participant's transcript/report card to ensure that the student has successfully passed all courses. Passing refers to the minimum grade required to receive credit hours for completion of a course. The minimum grade required to pass a course with the Kansas Department of Education is a "D." If the report card indicates the participant dropped out of school, was removed from the institution, or any other conditions that indicate removal on academic or conduct grounds, then the individual does not receive an MSG.
 - b. Postsecondary Education
 - i. Full-time students must complete at least 12 hours/credits for one semester at a 2.0 GPA or higher.

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- ii. Part-time students must complete at least 12 hours/credits over the course of two consecutive semesters at a 2.0 GPA or higher. (i.e., 6 credits received during the Fall 2017 semester and 6 credits received during the Spring 2018 semester) For a part-time student, the achievement of a MSG occurs in the program year that the 12th credit hour is obtained.
- iii. Other recognized education program in which the participant is enrolled including, but not limited to, semesters quarters, and clock hours for the calculation of credit hours when they achieve the equivalent of this MSG.
- 4. Employer based training milestone achieved by satisfactory performance:
 - a. Examples include an apprenticeship program or OJT. *Note: Pre-Employment Transition Services Work Based Learning Experiences are excluded from this measure.*
 - b. Documentation includes progress reports by the employer/trainer validating the skills attained by the participant. Must use KRS forms where applicable.
 - i. Progress reports may include training reports on milestones completed as the individual masters the required job skills, or steps to complete an OJT or apprenticeship program. Increases in pay resulting from newly acquired skills or increased performance also can be used to document progress.
- 5. Skills Progression by completion of occupational exam or trade-related benchmarks:
 - a. Documentation includes exam results indicating a passing score on a certification or licensure exam. Successful passage of an exam that is required for a particular occupation, or progress in attaining technical or occupational skills as demonstrated through a trade-related benchmark such as knowledge-based exams.

Types of Accepted MSG	Example
1. Educational Functioning Level (EFL)	<ul style="list-style-type: none"> • Increased Reading level from 8th grade to 9th grade documented by TABE Pre and Post Test
2. Secondary High School Diploma or its Recognized Equivalent;	<ul style="list-style-type: none"> • High School Diploma • High School Equivalency Test • GED
3. Secondary and Postsecondary Transcript or Report Card	<ul style="list-style-type: none"> • Secondary Report Card (passing semester) • Postsecondary Transcript (12 credits)
4. Training Milestone Achieved by Satisfactory Performance	<ul style="list-style-type: none"> • OJT Successful Completion • Registered Apprenticeship Progress Report
5. Skills Progression	<ul style="list-style-type: none"> • NCLEX Exam Results • HVAC Exam Results

WHO IS EXCLUDED FROM MSG CALCULATIONS?

- Participants not enrolled in education or training leading to a recognized credential or employment.
- Participant who is enrolled in a special education program, under an Individualized Education Program (IEP), leading toward a Certificate of Completion. Do not enroll them for either MSG or Credential Attainment.
- Potentially Eligible (PE): Students with disabilities receiving Pre-Employment Transition Services (Pre-ETS).

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Examples that Do NOT Meet the Definition of a WIOA MSG

Yearly progression in Special Education while working toward a Certificate of Completion

Transportation Skill Attainment (e.g., Mastering use of public transportation)

Mastery of Orientation and Mobility Skills

General skills gained as part of the Individualized Plan for Employment (IPE) for activities that do not relate to training and education

Vocational Evaluation Assessments and Aptitude Tests

Documentation of attainment of Microsoft Office skills in JAWS

Soft skills training

Vocational Rehabilitation Counselors are responsible for ensuring the following items are completed:

- Input all required information on tracking education completion page (Figure 1.1), education/training page and measurable skill gains page in KMIS (Figure 1.3)
- Document an educational or training goal in the IPE to list all necessary training and education services that leads to a recognized secondary or postsecondary credential or employment before inputting Credential Attainment and MSG data into KMIS (Figure 1.3).
- Education information is complete, accurate, and up to date in KMIS on Tracking Education Completion Page (Figure 1.1). *Note: Highest educational accomplishment in the Tracking Education Completion page (Figure 1.1) at Plan must be entered prior to the first IPE to reflect the participant's highest level of education completed at the time of IPE.*
- For a new Educational Goal, the "Begin Date" is the date that the participant enrolls in education or employment training after the IPE is created. *Note: If the individual was already enrolled in an education or training program leading toward a postsecondary credential or employment PRIOR to the development of the IPE, the "Begin Date" of that Educational Goal should be the same as the IPE date.*
- When a MSG is achieved, VRS shall:
 - Obtain the documentation to confirm successful completion.
 - Record in KMIS (Figure 1.3) and file in hard copy case file *Note: Report MSG attainment date accurately by inputting the actual "Skill Gain Date" in the MSG record. Data should be entered as soon as a MSG is attained and documentation has been received.* Once documents are received, update the Measurable Skills Gain record in the applicable Educational Goal by entering the "Skill Gain Date". *Note: MSG should be counted using the date on which they occur, not the date on which they are recorded, or documentation is received.*
 - Document MSG in case notes to provide specific details about the participant progress and the reason for the update to the MSG.
 - Ensure Tracking Education Completion page (Figure 1.1) and MSG (Figure 1.3) are completed before providing support for the next service.

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IMPORTANT REMINDER: Although it is highly recommended that MSGs are recorded as soon as it is attained and documentation has been received or within 3 days, VRS staff should make it a common practice to ensure that, on a monthly basis, all MSGs are recorded.

Note: VRS shall be aware of the educational and training status of all participants at the time of initial enrollment, during participation and at closure.

- Credential Attainment:
 - When the participant enrolls in an education or training program that leads to a credential, document enrollment and in the IPE even if comparable benefit;
 - When the participant achieves a credential,
 - Complete all MSG information as stated above
 - Update the applicable Educational Goal with the “Actual End Date”, “Outcome”, “Degree/Certificate Earned”, and “Degree/Certificate Title”.
 - Documentation shall be recorded in KMIS and hard copy case file.
- Closure:
 - Complete the Closure Checklist to ensure all information is in KMIS and documentation in the case file prior to closing the case.
 - Tracking Education Completion page (Figure 1.1) information in KMIS is complete and accurate for each participant who is closed in competitive integrated employment or closed unsuccessfully.

Quality Assurance

- On a quarterly basis, monitor the number of data entries for CA and MSG into KMIS. This will be sent out to the regions for the statewide number of CA’s and MSG to provide a reminder to complete the data entries.
- Maintain an FAQ of questions, with answers, related to MSG and CA.
- Quality Assurance will be monitored through case reviews of random sample of pulled files to ensure include questions to determine the data entry is correct for CA and MSG compliance. Review results will be documented in QA report and information provided to VRS, Rehabilitation Managers, and Program Administrators.

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Figure 1.1

EDUCATION COMPLETION DATES

```
*****
RSIPES05                KANSAS REHABILITATION SERVICES                RSIPEM20
USERID                  INDIVIDUAL PLAN FOR EMPLOYMENT                January 25, 2021
037F                   TRACKING EDUCATION COMPLETION                00:00:01 AM

CLIENT: JOHN           J JINGLEHEIMER           AMEND: XX CSLD: XXXX SSN: XXX-XX-XXXX

LEVEL OF EDUCATION - ENTER DATES AS: MM/DD/YYYY
HIGH SCHOOL DIPLOMA:                DATE:  __ / __ / ____
HIGH SCHOOL EQUIVALENCY (GED):      DATE:  __ / __ / ____
SPECIAL ED CERTIFICATE OF COMPLETION:  DATE:  __ / __ / ____
VOCATIONAL/TECHNICAL LICENSE (NON-DEGREE):  DATE:  __ / __ / ____
VOCATIONAL/TECHNICAL CERTIFICATE (NON-DEGREE):  DATE:  __ / __ / ____
COMPLETED SOME POSTSECONDARY NO DEGREE/CERTIFICATE):  (X)  -
ASSOCIATES DEGREE:                DATE:  __ / __ / ____
BACHELOR'S DEGREE:                DATE:  __ / __ / ____
MASTER'S DEGREE:                 DATE:  __ / __ / ____
GRADUATE (PH.D., ED.D., J.D., M.D. ETC):  DATE:  __ / __ / ____
PARTICIPANT COMPLETED/ENDED EDUCATION/TRAINING PROGRAM LEADING TO
  RECOGNIZED POSTSECONDARY CREDENTIAL/EMPLOYMENT:  DATE:  __ / __ / ____
OTHER RECOGNIZED CREDENTIAL:       DATE:  __ / __ / ____
                                     PRESS ENTER TO CONTINUE

F1 =          F2 = NEXT          F3 =          F4 =          F5 =
F6 =          F7 =              F8 =          F9 = SUB MENU  F10= MAIN MENU
*****
```

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Figure 1.2

EDUCATION

```
*****
RSIPES04          KANSAS REHABILITATION SERVICES          RSIPEM14
USERID           INDIVIDUAL PLAN FOR EMPLOYMENT          January 25, 2021
037F             EDUCATION/TRAINING (SCREEN 1 OF 2)        00:00:01 AM

CLIENT: JOHN      J JINGLEHEIMER          AMEND: xx  CSLD: xxxx
DATE COMPLETED ON: xx/xx/xxxx  COMPLETED BY: <counselor name>
DATE ORIGINAL IPE COMPLETED:  xx / xx / xxxx

HIGHEST GRADE COMPLETED AT APPLICATION (GRADES 1-12)
NO GRADES COMPLETED?                                     (x)  _

IS EDUCATION A GOAL ON HIS/HER IPE? (REQUIRED FOR ENROLLMENT DATES) (Y/N)  _

ENROLLED IN SECONDARY EDUCATION:
INDIVIDUAL IS ENROLLED IN SECONDARY EDUCATION AT OR ABOVE THE
9TH GRADE LEVEL?                                         (Y/N)  _
ENROLLMENT DATE IN SECONDARY EDUCATION: (MM/DD/YYYY)  _ / _ / _
INDIVIDUAL IS ENROLLED IN A RECOGNIZED SECONDARY EQUIVALENCY
PROGRAM AT OR ABOVE THE 9TH GRADE LEVEL?                 (Y/N)  _
ENROLLMENT DATE IN RECOGNIZED SECONDARY: (MM/DD/YYYY)  _ / _ / _
PRESS ENTER TO CONTINUE

F1 =          F2 = NEXT          F3 =          F4 =          F5 =
F6 =          F7 =          F8 =          F9 = SUB MENU  F10= MAIN MENU
*****
```

```
*****
RSIPES04          KANSAS REHABILITATION SERVICES          RSIPEM15
USERID           INDIVIDUAL PLAN FOR EMPLOYMENT          January 25, 2021
037F             EDUCATION/TRAINING (SCREEN 2 OF 2)        00:00:01 AM

CLIENT: JOHN      J JINGLEHEIMER          AMEND: xx  CSLD: xxxx
DATE ORIGINAL IPE COMPLETED:  xx / xx / xxxx

* PLEASE NOTE:  WHEN ENTERING DATES ON THIS SCREEN THEY MUST BE ON
OR AFTER THE DATE THE ORIGINAL IPE WAS COMPLETED AND
MUST BE A GOAL ON HIS/HER IPE

ENROLLED IN A POSTSECONDARY EDUCATION PROGRAM THAT LEADS TO A
CREDENTIAL OR DEGREE FROM AN ACCREDITED INSTITUTION OR PROGRAM? (Y/N)  _
ENROLLMENT DATE: (MM/DD/YYYY)  _ / _ / _

ENROLLED IN A CAREER OR TECHNICAL TRAINING PROGRAM? (Y/N)  _
LEADS TO A RECOGNIZED POSTSECONDARY CREDENTIAL? (Y/N)  _
ENROLLMENT DATE: (MM/DD/YYYY)  _ / _ / _

PRESS ENTER TO CONTINUE

F1 = PREV SCRIN  F2 = NEXT          F3 =          F4 =          F5 =
F6 =          F7 =          F8 =          F9 = SUB MENU  F10= MAIN MENU
*****
```

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Figure 1.3

MEASURABLE SKILL GAIN

```
*****
RSKP2000          KANSAS REHABILITATION SERVICES          RSRDEM01
USERID           INDIVIDUAL PLAN FOR EMPLOYMENT          January 25, 2021
037F             MOST RECENT DATE OF MEASURABLE SKILL GAIN          00:00:01 AM

CLIENT: JOHN          J JINGLEHEIMER          CSLD: XXXX          SSN: XXX-XX-XXXX
DATE ORIGINAL IPE COMPLETED:  XX / XX / XXXX

ADULT ED EDUCATIONAL FUNCTIONING LEVEL:
  (TEST RESULTS/CREDITS AWARDED)          DATE:  00 / 00 / 0000

SECONDARY SCHOOL DIPLOMA OR RECOGNIZED EQUIVALENT:          DATE:  00 / 00 / 0000

SECONDARY AND POST-SECONDARY TRANSCRIPT/REPORT CARD:          DATE:  00 / 00 / 0000

EMPLOYER BASED TRAINING MILESTONE ACHIEVED BY SATISFACTORY
  PERFORMANCE: (OJT, APPRENTICESHIP, ETC.)          DATE:  00 / 00 / 0000

SKILLS PROGRESSION BY COMPLETION OF OCCUPATIONAL EXAM
  OR TRADE-RELATED BENCHMARKS:          DATE:  00 / 00 / 0000

                                           PRESS ENTER TO CONTINUE
F1 =          F2 = NEXT          F3 =          F4 =          F5 =
F6 =          F7 =          F8 =          F9 = SUB MENU          F10 = MAIN MENU
*****
```


Rehabilitation Services Policy Manual

SECTION Applications and Eligibility
PART Referrals and Applications

SECTION NO. 2-1
PUBLISHED 03/21

2-1 Referrals and Applications

Synopsis of Federal Regulation

Rehabilitation Services (RS) will assure the prompt and equitable handling of referrals of individuals for vocational rehabilitation (VR) services. RS must make good faith efforts to inform these individuals of application requirements and to gather information necessary to initiate an assessment for determining eligibility and priority for services.

RS must assure that once an individual has submitted an application for VR services, an eligibility determination will be made within 60 days, unless-

- Exceptional and unforeseen circumstances beyond the control of the agency preclude a determination within 60 days and the agency and the individual agree to a specific extension of time; or
- An extended evaluation is necessary.

An individual is considered to have submitted an application when the individual or the individual's representative, as appropriate:

- Has completed and signed an agency application form or has otherwise requested services; and
- Has provided information necessary to initiate an assessment to determine eligibility and priority for services; and
- Is available to complete the assessment process.

RS shall ensure that its application forms are widely available throughout the State.

Reference: §361.41

RS Policy Regarding Referrals

RS will assure the prompt and equitable handling of referrals of individuals for VR services. The maximum time frame for responding to third party referrals by providing information about VR and application procedures will be 30 days.

Referral sources can help make appropriate referrals to VR by considering the following information:

- VR is an employment program, and individuals who participate are expected to become employed as a result of services received through an Individualized Plan for Employment (IPE). Individuals must be available to pursue employment.
- Individuals who have disabilities or health conditions that hinder their employment should be referred for application and assessment to determine eligibility. Such individuals may be unemployed, underemployed or in need of services to maintain employment.

Rehabilitation Services Policy Manual

SECTION Applications and Eligibility
PART Referrals and Applications

SECTION NO. 2-1
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- To be eligible for VR services, an individual must:
 - Have a physical or mental impairment that results in a substantial impediment to employment;
 - Be able to benefit, in terms of an employment outcome, from VR services; and
 - Require VR services to prepare for, secure, retain or regain employment.
- VR counselors analyze a variety of information to determine eligibility. Such information may include existing medical and school records; work history; determinations made by other organizations that provide services for people with disabilities; Social Security records; information provided by the individual and family; and counselor observations. Counselors may also authorize additional diagnostics or assessment if needed to help determine eligibility. Counselors have 60 days from the time of application to determine eligibility. Referral sources can assist the eligibility process by assisting applicants in providing records, such as those listed above, if that is the applicant's informed choice.
- The VR program serves individuals with all different types of disabling conditions. The primary disabilities of individuals served include, but are not restricted to the following:
 - Mental Illness
 - Orthopedic
 - Mental Retardation
 - Learning Disabilities
 - Blindness or Visual Impairment
 - Deaf or Hard of Hearing
 - Traumatic Brain Injury
 - Cancer/Blood/Allergy Conditions
 - Alcohol/Drug Abuse
 - Amputation
 - Epilepsy
 - Deaf-blindness
- Individuals who have temporary health conditions, such as broken limbs or pregnancy, are not eligible for VR services on the basis of those conditions alone.
- Referrals should be made for individuals rather than entire families. However, it is possible for the VR program to provide individualized services for more than one individual in a family. In addition, RS staff will collaborate with other sections of Kansas Department for Children and Families (DCF) to assure coordinated, integrated services for families.
- The functional limitations an individual experience must be related to the disability in order to be eligible for services. Functional limitations caused by cultural issues, legal issues, lifestyle,

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primary languages other than English, lack of education or poor work history - in the absence of a disability - would not be sufficient to determine eligibility for VR services.

- If the VR program does not have sufficient resources to serve all eligible individuals who apply, an Order of Selection procedure and access list will be implemented which gives priority to serving individuals with the most significant disabilities. In the event of such a situation, counselors analyze the individuals' functional limitations, number of services needed, and length of services needed to assign them to the appropriate priority category level.
- VR is not a source for emergency medical or medical insurance coverage.

Referral sources are encouraged to contact the VR staff in their local communities directly to discuss specific referrals. Three quick questions to consider when discussing referrals are:

- Is the disability a long-term or permanent condition that impacts the person's ability to get or keep a job?
- Is the individual interested in pursuing employment?
- Are the functional limitations an individual experience related to the disability?

RS Policy Regarding Applications

Requested services means that the basic information required by the federal Rehabilitation Services Administration for data reporting has been obtained. This information includes: name, Social Security number, date of birth, date of application, sex, race, marital status, Hispanic origin, referral source, highest grade completed, type of institution, work status, weekly earnings, hours worked, Social Security Disability Insurance (SSDI) status, primary source of support, medical insurance coverage, insurance available on the job, farmer status, veteran status, migratory worker status, work for profit, and year last employed. The individual's address and phone number should be provided. This information may be provided through a variety of methods, including by phone or mail or in person. One of the easiest ways to assure that all federally required information elements are collected is to complete the RS application form.

What information is needed to initiate an assessment? Medical records or documentation pertinent to the disability or a release of information to obtain disability documentation; work history; educational background; and the applicant's description of the impediment to employment.

How is "available to complete an assessment" defined? The individual can attend planned or scheduled activities required to determine eligibility.

When all three conditions of submitting an application have been met, the 60-day timeframe for determining eligibility begins. To assure that the standard releases on the application form are in effect, a signed application should be included in the service record at the earliest opportunity. However, determination of eligibility may not be delayed pending receipt of a signed application form if the three conditions of application have been met.

Each local office is responsible for developing outreach plans to referral sources, minorities and members of unserved or underserved disability groups in their communities.

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Documentation (record of service) Requirements for the Application Process

In addition to the Rehabilitation Services application form, the following information, to the extent it will impact the VR process or employment, must be collected as part of the application process and recorded in the record of services.

- Applicant's description of the disability and how it impacts the ability to work and to complete daily activities.
- Employment history, such as work performed at home, and paid work (employers, dates, wages, duties, job title, reason no longer working there). Job duties the applicant can no longer perform. Type of work the applicant wants to do. Accommodations that may be required.
- Residential, domestic, and family information (such as number in family, dependents, typical routines, support available through family, friends and social groups).
- Medical history, such as names of hospitals, doctors, psychologists, social workers.
- Current medications.
- Transportation available? Driver's license? Ability to use public transportation, if available.
- Corrections history, including names of probation or parole officers.
- Does the client have a Ticket-to-Work? Is it available for assignment? Or, if the client has assigned it to another Employment Network (EN), identify the EN.
- Media of choice.
- How can VR help? What is the applicant's reason for applying?

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2-2 Eligibility

Synopsis of Federal Regulations

To determine whether an individual is eligible for vocational rehabilitation (VR) services and the individual's priority under an Order of Selection for services (if the State is operating under an Order of Selection), Rehabilitation Services (RS) will conduct an assessment for determining eligibility and priority for services. The assessment must be conducted in the most integrated setting possible, consistent with the individual's needs and informed choice, and in accordance with the following provisions:

Eligibility requirements

Determination of eligibility may be based only on the following requirements:

1. A determination by qualified personnel that the applicant has a physical or mental impairment.
2. A determination by qualified personnel that the applicant's physical or mental impairment constitutes or results in a substantial impediment to employment for the applicant.
3. A determination by a qualified VR counselor employed by RS that the applicant requires VR services to prepare for, secure, retain or regain employment consistent with the applicant's unique strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice.

Presumption of benefit

RS must presume that an applicant who meets the eligibility requirements in Numbers 1 and 2 above can benefit in terms of an employment outcome unless it demonstrates, based on clear and convincing evidence, that the applicant is incapable of benefiting in terms of an employment outcome from VR services due to the severity of the applicant's disability.

Presumption of eligibility for Social Security recipients and beneficiaries

Any applicant for VR services who has been determined eligible for Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) is presumed eligible for VR services. Such an applicant is also considered to be an individual with a significant disability. If an applicant for VR services asserts that he or she is eligible for SSI or SSDI but is unable to provide appropriate evidence, such as an award letter, RS must verify SSI or SSDI eligibility by contacting the Social Security Administration. This verification must be made within a reasonable period of time that enables RS to determine the applicant's eligibility for VR within 60 days of application.

Prohibited factors

- No duration of residence requirements as part of determining eligibility for VR services or that exclude from services any individual who is present in the state.

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- No applicant or group of applicants is excluded or found ineligible solely on the basis of the type of disability.
- The eligibility requirements are applied without regard to the age, gender, race, color, creed, or national origin of the applicant.
- The eligibility requirements are applied without regard to the particular service needs or anticipated cost of services required by an applicant or the income level of an applicant or applicant's family.

Review and assessment of data for eligibility determination

RS shall base its determination of each of the basic eligibility requirements on:

- A review and assessment of existing data, including counselor observations, education records, information provided by the individual or the individual's family, information used by the Social Security Administration, and determinations made by officials of other agencies; and
- To the extent existing data do not describe the current functioning of the individual or are unavailable, insufficient, or inappropriate to make an eligibility determination, an assessment of additional data resulting from the provision of VR services, including assistive technology devices and services and worksite assessments, that are necessary to determine whether an individual is eligible.

Extended evaluation for individuals with severe disabilities

Prior to any determination that an individual with a severe disability is incapable of benefiting from VR services in terms of an employment outcome because of the severity of that individual's disability, RS shall conduct an extended evaluation to determine whether or not there is clear and convincing evidence to support such a determination.

During the extended evaluation period, which may not exceed 18 months, VR services must be provided in the most integrated setting possible, consistent with the informed choice of the individual.

During the extended evaluation period, RS shall develop a written plan for determining eligibility and for determining the nature and scope of services required to achieve an employment outcome. RS may provide during this period only those services that are necessary to make these two determinations.

RS shall assess the individual's progress as frequently as necessary, but at least once every 90 days, during the extended evaluation period.

RS shall terminate extended evaluation services at any point during the 18-month extended evaluation period if it is determined that:

- There is sufficient evidence to conclude that the individual can benefit from the provision of VR services in terms of an employment outcome; or

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- There is clear and convincing evidence that the individual is incapable of benefiting from VR services in terms of an employment outcome.

Reference: §361.42

Regulatory Guidance

"Clear and convincing evidence" means that RS must have a high degree of certainty before it can conclude that an individual is incapable of benefiting from services in terms of an employment outcome. The "clear and convincing" standard constitutes the highest standard used in the civil system of law and is to be individually applied on a case-by-case basis. The term "clear" means unequivocal. Given these requirements, a review of existing information generally would not provide clear and convincing evidence. For example, the use of an intelligence test result alone would not constitute clear and convincing evidence. Clear and convincing evidence might include a description of assessments, including situational assessments and supported employment assessments, from service providers who have concluded that they would be unable to meet the individual's needs due to the severity of the individual's disability. The demonstration of "clear and convincing evidence" must include, if appropriate, a functional assessment of skill development activities, with any necessary supports (including assistive technology), in real life settings.

Reference: Note following §361.42

RS Policy

Existing records

Because of the time limitation for eligibility determination, the initial contacts with the applicant, significant others and/or referral source are especially important to determine what usable information is readily available and what other diagnostic procedures will need to be started immediately. If appropriate and possible, the applicant should assist in the information gathering process.

Eligibility certificate

The counselor must complete, sign and date a Certificate of Eligibility which documents that the applicant meets the eligibility criteria. In addition, the KMIS Certificate should be printed and filed in the record of services. The record of service must include information that supports the eligibility decision.

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Determination of Impairment for Individuals with Learning
Disabilities

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2-3 Determination of Impairment for Individuals with Learning Disabilities

The first element of establishing eligibility for vocational rehabilitation services is a determination by qualified personnel that the applicant has a physical or mental impairment. (See Section 2/Part 2 for additional information about eligibility determination.)

There are two options for determining that an applicant's impairment is a specific learning disability.

Option 1 - A written statement and explanation/analysis is provided by a licensed psychologist or certified school psychologist verifying that all three of the following criteria are met:

- A full scale IQ, greater than or equal to 75.
- A 22 point or more scaled score difference between IQ and Academic Achievement (i.e., at least a 1 ½ standard deviation difference).
- A statistically significant (.05) difference (usually about 10 scaled score points) between different cognitive abilities (e.g., verbal IQ and performance IQ).

When using Option 1, the following requirements must be met:

- The statement from the psychologist must include an explanation and analysis, rather than merely asserting that the individual has a learning disability.
- This statement and analysis should be based on a review of existing records to the greatest extent possible. However, if existing records are not sufficient for this analysis, RS may purchase the psychological evaluations necessary to verify these three criteria.
- If such a statement and analysis cannot be obtained from the licensed psychologist or certified school psychologist, but raw assessment/testing scores are available, such evidence should be sent to the regional or state psychological consultant for analysis. RS counselors will not interpret testing or assessment scores to verify that these criteria are met.

Option 2 - Option 2 is available only when all three criteria in Option 1 are not specifically met. In such cases, certification from a licensed psychologist, certified school psychologist, or an RS psychological consultant may be used in lieu of Option 1 if a reasonable rationale is provided. This rationale must include a description and analysis of the individual's characteristics which are related to the presence of a learning disability.

Consideration must be given to the following additional factors when assessing presence of a specific learning disability:

- Use of determinations made by schools
Because of the variance in practices among diverse school districts, Rehabilitation Services will not presume the presence of a learning disability based only on the local education authority's identification of learning disability for special education purposes.

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- **Preferred assessment methods**
When purchasing a learning disability assessment, the preferred measure of intellectual functioning is the Wechsler Adult Intelligence Scale-III (WAIS-III). The Woodcock-Johnson psycho-educational battery (WJ-R) is the preferred measure of academic achievement. It is considered best practice for RS staff to request that the school provide updated academic achievement test results. Other standardized IQ and achievement tests are acceptable provided that they are well standardized and widely used. State or local psychological consultants may assist counselors in determining whether such other tests are acceptable. The Adult Learning Disabilities Screening Instrument may be used only to determine if additional diagnostic or assessment services are needed. This screening tool may not be used to establish a diagnosis.
- **Qualified personnel**
For VR purposes, only licensed psychologists or certified school psychologists are qualified to diagnose a specific learning disability.

Determining eligibility for VR services

The presence of a specific learning disability alone does not establish VR eligibility. VR eligibility for a specific learning disability is established in the same manner that VR eligibility is determined for any other disability. There must be clear evidence that a learning disability interferes with the client's ability to achieve or maintain employment that is commensurate with their abilities. Specific learning disabilities often impose impairments in addition to academic delays. These deficits often can be more impairing and more difficult to accommodate than academic delays.

Deficits in the following areas may be the result of a learning disability and cause significant functional limitations: visual perception, attention, memory, motor skills, information processing, verbal expression, spatial orientation and social skills.

Recent testing

The testing should be recent enough to describe current functioning. As a general rule, academic achievement scores should be done within the past two years. IQ testing should be done within two years of VR eligibility determination or after the age of 16. With reasonable explanation, counselors may make exceptions to this guideline. For example, it may be appropriate to waive the above requirements for current testing, if the learning disability is extremely pronounced and/or if there is other current evidence of functional limitations (e.g., teacher report, job placement, or Individualized Education Plan) that are very descriptive.

Consultation

Counselors who have questions regarding determination of impairment for individuals with learning disabilities, the need for current testing, or related issues may contact the State or Regional psychological consultant for technical assistance.

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PART Procedures for Ineligibility Determination

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2-4 Procedures for Ineligibility Determination

Synopsis of Federal Regulation

If Rehabilitation Services (RS) determines that an applicant is ineligible for vocational rehabilitation (VR) services or determines that an individual receiving services under an Individualized Plan for Employment (IPE) is no longer eligible for services, RS shall:

- Make the determination only after providing an opportunity for full consultation with the individual or, as appropriate, with the individual's representative;
- Inform the individual in writing, supplemented as necessary by other appropriate modes of communication consistent with the informed choice of the individual, of the ineligibility determination, including the reasons for that determination, and the means by which the individual may express and seek remedy for any dissatisfaction, including the standard appeal procedures;
- Provide the individual with a description of services available from the Client Assistance Program (CAP) and information on how to contact the program; and
- Review within 12 months and annually thereafter if requested by the individual or, if appropriate, by the individual's representative any ineligibility determination that is based on a finding that the individual is incapable of achieving an employment outcome. This review need not be conducted in situations in which the individual has refused it, the individual is no longer present in the State, the individual's whereabouts are unknown, or the individual's medical condition is rapidly progressive or terminal.

Reference: §361.43

Effective Date: May 1, 1998

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2-5 Order of Selection

Synopsis of Federal Regulation

An Order of Selection must be based on a refinement of the three criteria in the definition of individual with a severe disability.

Individual with a severe disability means an individual with a disability:

- Who has a severe physical or mental impairment that seriously limits one or more functional capacities (such as mobility, communication, self-care, self-direction, interpersonal skills, work tolerance, or work skills) in terms of an employment outcome;
- Whose vocational rehabilitation (VR) can be expected to require multiple VR services over an extended period of time; and
- Who has one or more physical or mental disabilities resulting from amputation, arthritis, autism, blindness, burn injury, cancer, cerebral palsy, cystic fibrosis, deafness, head injury, heart disease, hemiplegia, hemophilia, respiratory or pulmonary dysfunction, mental retardation, mental illness, multiple sclerosis, muscular dystrophy, musculoskeletal disorders, neurological disorders (including stroke and epilepsy), spinal cord conditions (including paraplegia and quadriplegia), sickle cell anemia, specific learning disability, end-stage renal disease, or another disability or combination of disabilities determined on the basis of an assessment for determining eligibility and VR needs to cause comparable substantial functional limitation.

An Order of Selection may not be based on any other factors, including:

- Any duration of residency requirement, provided the individual is present in the State;
- Type of disability;
- Age, gender, race, color, creed, or national origin;
- Source of referral;
- Type of expected employment outcome;
- The need for specific services or anticipated cost of services required by an individual; or
- The income level of an individual or an individual's family.

Reference: § 361.36

Rehabilitation Services (RS) Policy

If there are insufficient resources to provide VR services to all eligible individuals who apply, RS will assure that those individuals with the most severe disabilities are selected for service before other individuals with disabilities. RS will ensure that its funding arrangements, including grants, contracts, or cooperative agreements, are implemented consistent with the Order of Selection.

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RS will periodically determine whether there are sufficient funds to serve all eligible persons who apply. Factors to consider in this determination include:

- Availability of state general funds to match available federal VR funds.
- Application, referral and caseload trends.
- Adequacy of staff coverage.
- Costs of purchased services, such as diagnostics, medical, restoration and training.
- Estimated costs of continuing services under existing Individualized Plans of Employment (IPEs).
- Emphasis on serving persons with severe disabilities.
- Timeliness of determination of eligibility and provision of services.
- Outreach efforts.
- Unserved or underserved groups.

RS will not delay, through waiting lists or other means, determinations of eligibility, the development of IPEs for individuals determined eligible, or the provision of services for eligible individuals for whom IPEs have been developed in order to avoid closing categories of services in Order of Selection.

After eligibility has been determined and before the IPE is written, each client is assigned to a category group. The client will be assigned to the highest priority category for which he or she is qualified and a rationale will be documented in the case file. If the client's circumstances change or new information is acquired, the category designation can be changed to a higher priority category. Category designation changes will not be made if the change would place the individual in a lower priority category. Clients will be notified of the right to appeal their category assignment.

Eligible individuals who cannot be served under the Order of Selection will be advised that their record will be placed on a waiting list. They will be notified should funding become available to provide the services.

If there is a need to close one or more categories for services:

- RS will set aside sufficient funds to purchase services necessary to determine eligibility. Applications for services will be accepted without restriction.
- The closure of one or more categories will not affect individuals who already have signed IPEs. IPE services will continue.
- Eligible individuals, regardless of their Order of Selection category designation, who only require specific services or equipment to maintain employment will not be affected. 34 CFR 361.36.

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- Implementation of the closure will be made statewide.
- Except for additional assessment or diagnostic services needed to analyze whether an individual can be moved to a higher category, VR services (purchased or provided by Staff) may not be provided for individuals on the waiting list. Exceptions to this provision are not allowed.

Category 1: Eligible individuals with a most severe physical or mental impairment that seriously limits two or more functional capacities (such as mobility, communication, self-care, self-direction, interpersonal skills, work tolerance or work skills) in terms of an employment outcome, whose VR can be expected to require multiple VR services over an extended period of time. In the event that VR services cannot be provided to all eligible individuals in Category 1, a waiting list based upon the date of application will be activated.

Category 2: Eligible individuals with a severe physical or mental impairment that seriously limits one or more functional capacities (such as mobility, communication, self-care, self-direction, interpersonal skills, work tolerance or work skills) in terms of an employment outcome; whose VR can be expected to require multiple VR services over an extended period of time; and who has one or more physical or mental disabilities resulting from amputation, arthritis, autism, blindness, burn injury, cancer, cerebral palsy, cystic fibrosis, deafness, head injury, heart disease, hemiplegia, hemophilia, respiratory or pulmonary dysfunction, mental retardation, mental illness, multiple sclerosis, muscular dystrophy, musculoskeletal disorders, neurological disorders (including stroke and epilepsy), spinal cord conditions (including paraplegia and quadriplegia), sickle cell anemia, specific learning disability, end-stage renal disease, or another disability or combination of disabilities determined, on the basis of an assessment for determining eligibility and VR needs, to cause comparable substantial functional limitation. In the event that VR services cannot be provided to all eligible individuals in Category 2, a waiting list based upon the date of application will be activated.

Category 3: Eligible individuals with non-severe disabilities. In the event that VR services cannot be provided to all eligible individuals in Category 3, a waiting list based upon the date of application will be activated.

Multiple services means more than one service as listed on the IPE. Support services (maintenance, transportation, and services to family members) may not be counted toward multiple services. Routine counseling and guidance to facilitate participation in the VR process may not be counted toward multiple services. Significant services which are not provided by RS but which are related to the disability and employment outcome, and which are essential to the accomplishment of the IPE may be counted toward multiple services.

Extended period of time means at least four months of services between Status 12 and closure.

Information and Referral

In the event that one or more categories of services are closed through Order of Selection and a waiting list for services is established, RS shall provide information and referral services for those eligible individuals who cannot be served. The information and referral service provided should be

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adequate to ensure that the individual with a disability is provided accurate VR information and guidance, using appropriate modes of communication, to assist them in preparing for, securing, retaining or regaining employment.

An appropriate referral shall be to federal, state or other programs, including programs carried out by other components of the statewide workforce investment system, best suited to address the specific employment needs of the individual with a disability. For each referral, the individual shall be given:

- A copy of the notice of referral that RS will send to the other program, including a specific point of contact within the other program.
- Information and advice regarding the most suitable services to assist the individual to prepare for, secure, retain or regain employment.

Referrals should be documented in the record of services.

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Section 3 Service Delivery

Part 1 Individualized Plan for Employment (IPE)

Synopsis of Federal Regulation

Rehabilitation Services (RS) must assure that an IPE is developed and implemented in a timely manner for each individual determined eligible for vocational rehabilitation (VR) services or, if RS is operating under an Order of Selection, for each eligible individual who can be served. *(RS policy: The IPE shall be developed as soon as is reasonably possible, but no later than 90 days after determination of eligibility. This timeline may be extended with the agreement of the client.)*

Services will be provided in accordance with the provisions of the IPE.

RS must conduct an assessment for determining VR needs for each eligible individual or, if operating under an Order of Selection, for each eligible individual for whom RS is able to provide services. The purpose of this assessment is to determine the employment outcome, and the nature and scope of VR services to be included in the IPE.

The IPE must be designed to achieve a specific employment outcome that is selected by the individual consistent with the individual's unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

- Employment outcome means entering or retaining full-time, or if appropriate, part-time competitive employment in the integrated labor market, supported employment, or any other type of employment in an integrated setting, including self-employment, telecommuting or business ownership.
- Competitive employment means work in the competitive labor market that is performed on a full-time or part-time basis in an integrated setting, and for which an individual is compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals who are not disabled.

The eligible individual, or as appropriate, the individual's representative, may develop all or part of the IPE without assistance from RS or any other entity, or with assistance from a qualified VR counselor employed by RS, a qualified VR counselor not employed by RS, or other resources.

RS must provide the following information to each eligible individual (or representative) in the appropriate mode of communication:

- Information to assist the individual or representative in developing the IPE.
- Information describing the full range of components that must be included in the IPE.
- An explanation for determining the individual's financial commitments under the IPE.
- Information on assistance to complete the required forms.

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- Additional information that the individual or representative requests.
- A description of the individual's rights and the appeal process.
- Information about the availability of the Client Assistance Program (CAP).

RS must assure that:

- The IPE is a written document.
- The IPE is developed and implemented in a manner that gives the eligible individual opportunity to exercise informed choice in selecting the employment outcome, the settings in which services will be provided, the entity or entities that will provide VR services and the methods for procuring services.
- The IPE is agreed to and signed by the eligible individual, or as appropriate, by the individual's representative.
- The IPE is approved and signed by a qualified VR counselor employed by RS.
- A copy of the IPE and a copy of any amendments to the IPE are provided to the eligible individual, or the individual's representative if appropriate. Copies are provided in the native language or mode of communication of the individual or representative.
- The IPE is reviewed at least annually by a qualified VR counselor and the eligible individual (or representative) to assess the individual's progress in achieving the identified employment outcome.
- The IPE is amended as necessary by the individual (or representative) in collaboration with a qualified VR counselor employed by RS if there are substantive changes in the employment outcome, the VR services to be provided, or the providers of the VR services.
- Amendments to the IPE do not take effect until agreed to and signed by the individual (or representative) and by the qualified VR counselor employed by RS.
- An IPE for a student with a disability receiving special education services is developed in consideration of the student's Individual Education Plan.

Data for preparing the IPE

1. Preparation without comprehensive assessment:

- To the extent possible, the employment outcome and the nature and scope of rehabilitation services to be included in the individual's IPE must be determined based on the data used for assessment of eligibility and priority for services.

2. Preparation based on comprehensive assessment:

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- If additional data are necessary to determine the employment outcome and the nature and scope of services to be included in the IPE of an eligible individual, RS must conduct a comprehensive assessment of the unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice, including the need for supported employment services, of an eligible individual, in the most integrated setting possible, consistent with the informed choice of the individual.
- In preparing the comprehensive assessment, RS must use, to the maximum extent possible and appropriate, existing information that is current as of the date of the development of the IPE, including: information available from other programs and providers, particularly information used by education officials and the Social Security Administration; information provided by the individual and individual's family; and information obtained under the assessment for determining the individual's eligibility and VR needs.

Content of the IPE

The IPE must include:

1. A description of the specific employment outcome that is chosen by the eligible individual that is consistent with the individual's unique strengths, resources, priorities, concerns, abilities, capabilities, career interests, and informed choice.
2. A description of the specific rehabilitation services that are needed to achieve the employment outcome, including, as appropriate, the provision of assistive technology devices or services and personal assistance services, including training in the management of these services. Services must be provided in the most integrated setting that is appropriate for the services involved and is consistent with the informed choice of the individual.
3. Timelines for the achievement of the employment outcome and for initiation of services.
4. A description of the entity or entities chosen by the individual (or representative) that will provide the VR services, and the methods used to procure these services.
5. A description of the criteria that will be used to evaluate progress toward achievement of the employment outcome.
6. The terms and conditions of the IPE, including the rights and responsibilities of RS and the individual, the extent of the individual's financial participation in paying for the cost of services, the responsibility of the individual regarding applying for and securing comparable benefits, and the responsibility of other entities.

Supported Employment Requirements

The IPE for individuals with the most significant disabilities for whom an employment outcome in a supported employment setting has been determined to be appropriate will also contain:

1. A description of the specific supported employment services to be provided by RS.

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2. A description of the specific extended services needed, which may include natural supports.
3. Identification of the source of extended services, or, to the extent that it is not possible to identify the source of extended services at the time the IPE is developed, inclusion of a description of the basis for concluding that there is a reasonable expectation that those sources will become available.
4. A provision for periodic monitoring to assure that the individual is making satisfactory progress toward meeting the weekly work requirement established in the IPE by the time of transition to extended services.
5. A provision for the coordination of services provided under an IPE with services provided under other individualized plans established under other federal or state programs.
6. To the extent that job skills training is provided, a verification that the training will be provided on site.
7. A provision indicating that placement will be in an integrated setting for the maximum number of hours possible based on the unique strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice of an individual with a most significant disability.

RS Policy

Development of the IPE: Counselors will promote the individual's full involvement and participation in the development of the IPE. The counselor's role in providing information about and guiding the individual in exploration of options is critical to supporting informed choice of the individual. The employment outcome will be emphasized throughout the IPE development and the rehabilitation process.

Timelines for prompt development of an IPE: Client follow through is a determining factor in the time needed to develop an IPE. The IPE shall be developed as soon as is reasonably possible, but no later than 90 days after determination of eligibility. This timeline may be extended with the agreement of the client.

Revisions to the IPE: In keeping with federal regulatory guidance stated above, minor changes to an individual's program of services do not have to be recorded in a revision to the IPE. If the client and counselor agree to a substantive revision of the IPE by phone, the counselor may note this in the case record and proceed with providing services under the revised IPE. The client may sign the revised IPE during the next visit to the office or the revised IPE may be mailed to the client for signature.

Vocational objectives: The vocational objective should be stated with sufficient specificity to be meaningful to the client considering his or her level of vocational development and the employment opportunities available to the person in the local labor market or labor market to which the person is willing to relocate. Initial goals, particularly for transition students, may be stated in terms of a particular type of career or industry, such as clerical work, and subsequently revised as the person focuses on specific employment goals. If more than one choice is appropriate, list a vocational objective that is as close as possible. In the narrative list the other vocational objectives being

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considered. As the case develops, if a different vocational objective is more appropriate, the IPE may be amended. General vocational objectives such as “to be determined” or “competitive employment” may not be used. If an individual is interested in a vocational objective which requires a license, background check or drug screening test, the ability of the client to meet those requirements must be addressed periodically at appropriate stages of the rehabilitation process, including when the vocational objective is being selected, before development of the IPE is completed (Status 12) and when the client is ready for job placement.

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PART Scope of Available Services

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Part 2 Scope of Available Services

Synopsis of Federal Regulation

The following vocational rehabilitation (VR) services are available:

1. Assessment for determining eligibility and priority for services by qualified personnel, including if appropriate an assessment by personnel skilled in rehabilitation technology.
2. Assessment for determining VR needs by qualified personnel, including if appropriate an assessment by personnel skilled in rehabilitation technology.
3. VR counseling and guidance, including information and support services to assist an individual in exercising informed choice.
4. Referral and other services necessary to help applicants and eligible individuals secure needed services from other agencies, including other components of the state workforce system, and to advise those individuals about the Client Assistance Program (CAP).
5. Physical and mental restoration services, to the extent that financial support is not readily available from a source other than RS (such as through health insurance or a comparable benefit/service).
6. Vocational and other training services, including personal and vocational adjustment training, books, tools, and other training materials, except that no training or training services in an institution of higher education (universities, colleges, community or junior colleges, vocational schools, technical institutes, or hospital schools of nursing) may be paid for with funds under this part unless maximum efforts have been made by Rehabilitation Services (RS) and the individual to secure grant assistance in whole or in part from other sources to pay for that training.
7. Maintenance for additional costs incurred while participating in rehabilitation.
8. Transportation in connection with the provision of any VR service.
9. VR services to family members of an applicant or eligible individual if necessary to enable the applicant or eligible individual to achieve an employment outcome.
10. Interpreter services, including sign language and oral interpreting for individuals who are deaf or hard of hearing, and tactile interpreting services for individuals who are deaf-blind.
11. Reader services, rehabilitation teaching services, and orientation and mobility services for individuals who are blind provided by qualified personnel.
12. Job-related services, including job search and placement assistance, job retention services, follow-up services and follow-along services.

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13. Supported employment services.
14. Personal assistance services.
15. Post-employment services.
16. Occupational licenses, tools, equipment, initial stocks, and supplies
17. Rehabilitation technology, including vehicular modification, telecommunications, sensory, and other technological aids and devices. Rehabilitation technology must be discussed and provided, if needed, at each stage of the rehabilitation process.
18. Transition services.
19. Technical assistance and other consultation services to conduct market analyses, develop business plans, and otherwise provide resources to eligible individuals who are pursuing self-employment or telecommuting or who are establishing a small business operation as an employment outcome.
20. Other goods and services determined necessary for the individual with a disability to achieve an employment outcome.

Reference: § 361.48

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Section 3 Service Delivery

Part 3 Limits, Nature and Scope of Services

Synopsis of Federal Regulations

The provision of services is based on the rehabilitation needs of each individual as identified in that individual's Individualized Plan for Employment (IPE) and is consistent with the individual's informed choice. Arbitrary limits on the nature and scope of vocational rehabilitation services to be provided to the individual to achieve an employment outcome may not be established.

Reference: §361.50

Rehabilitation Services (RS) Policy

Services shall be provided in the most cost-effective manner in order to prepare the client for employment that is consistent with his or her strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice.

Out-of-state and private services:

- RS has established a preference for in-state services, provided that the preference does not effectively deny the client a necessary service. If the client chooses an out-of-state service at a higher cost than an in-state service, if either service would meet the client's rehabilitation needs, RS is not responsible for those costs in excess of the cost of the in-state service.
- Approval is required for out-of-state services funded by RS. Each RS Program Administrator will route such exception requests through the RS Managers, RS Program Administrator or both. Approval must be given before including such services on the IPE. See Section 1/Part 13, Miscellaneous administrative issues for a comparative analysis worksheet.
- See Section 3, Part 17 for more information on training.

Duration of services: The duration of each service needed by an individual must be determined on an individual basis and reflected in that individual's IPE.

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PART Service Codes and Spending Authorities

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Section 3 Service Delivery

Part 4 Service Codes and Spending Authorities

Rehabilitation Services (RS) Policy

Expenditures should be individually negotiated in all cases based on the client's needs and the Individualized Plan for Employment (IPE), reasonable cost and prudent use of public funds. Spending authorities were established for every service code. The concept of a "spending authority" should not be viewed as a cost cap or limitation on services. Rather, spending authorities are a common method of fiscal oversight on expenditures.

This Section lists the Counselor's spending authority for specific categories of services. Counselors or clients may initiate requests for exceptions. Approvals above the Counselor's spending authority must be reasonable and based on individual circumstances, an identified vocational rehabilitation need, and IPE services.

- Rehabilitation Managers have the authority to approve expenditures of no more than \$1,999 above the Counselor's spending authority.
- RS Regional Program Administrators have the authority to approve expenditures of no more than \$4,999 of the total cost. Each RS Regional Program Administrator will route such exception requests specifying whether the request must first go through the RS Manager or whether the request can be made directly to the RS Program Administrator.
- Requests for approval of higher amounts should be directed to RS Administration Office. Such requests must include the RS Program Administrator's recommendation. Exceptions to established rates must be approved by the Administration Office.

In all circumstances, the Exceptions Request Form must be completed. Upon final action (approval or denial) at the Regional level, the form must be routed to the Administration Office. This information will be used for an ongoing review of the appropriateness of the spending authority levels, statewide consistency, and for program evaluation.

Key to Abbreviations:

LOC = Life of Case

PA = Per Authorization

SC = Service Codes

RM = Rehabilitation Manager

AO = Administration Office

In order to comply with state purchasing requirements, any individual purchases of \$5,000 or more must go through DCF, State, RS purchasing procedure. In addition, if accumulated purchases total more than \$5,000 to the same vendor in the same state fiscal year, these purchases must also be

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referred to DCF, State, RS purchasing procedure. Components of the same item or same purchase may not be split to avoid these requirements.

Please see additional notes in the chart below for special circumstances.

Service code and title	Examples	Counselor spending authority
001 Customer service	See service description Hourly fee only. Use service code 801 for mileage.	Negotiated hourly fee; may be authorized by PA only.
025 IPE research #1: Referral	See service description 30% of negotiated total fee for IPE research.	\$150 LOC
026 IPE research #2: Research	See service description 30% of negotiated total fee for IPE research.	\$150 LOC
027 IPE research #3: IPE/signed	See service description 40% of negotiated total fee for IPE research.	\$200 LOC
028 Case Coordination #1: Referral	See service description Negotiated fee.	\$200 LOC
029 Case Coordination #2: Qtrly intervals	See service description Negotiated fee.	\$2,000 LOC
030 Purchasing Support #1: Referral	See service description 30% of negotiated total fee for Purchasing Support.	\$150 LOC
031 Purchasing Support #2: Purchase authorized	See service description 30% of negotiated total fee for Purchasing Support.	\$150 LOC

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Service code and title	Examples	Counselor spending authority
032 Purchasing Support #3: Item delivered	See service description 40% of negotiated total fee for Purchasing Support.	\$200 LOC
110 Driver Assessment <i>Does not include driver's ed training. See SC 545.</i> <i>May be used only if on IPE.</i>	Driver evaluation Evaluation for driver accommodations Evaluation for zero-effort steering	\$2,000 LOC
120 Radiology & Laboratory	Blood tests CAT scans Chemical profiles CT scans Dental X-rays EKG Imaging services Lab work MRI Myelogram Panoramic X-ray TB test Urinalysis X-rays	\$500 PA

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Service code and title	Examples	Counselor spending authority
<p>130 Medical/Physical/Dental Assessment</p>	<p>Audiological exam Dental exam ENT exam Eye exam Functional capacity evaluation General medical exam Hearing assessment Low vision exam Neurological exam Occupational therapy evaluation Optical exam Physical exam Physical therapy evaluation Specialized medical exams Tympanometry</p>	<p>\$500 PA</p>
<p>140 Records</p> <p><i>Best practice: Define the date range of the records you want to receive.</i></p>	<p>Addiction recovery summary Addiction treatment records Alcohol and drug treatment records Copy charges Court records Definitive medical summary Doctor's notes Hospital records Medical history Medical records Mental health center information Patient records Police report Post-secondary school records Probation or parole reports Psychiatric hospitalization records Psychologist's notes or records Psychotherapy reports</p>	<p>\$100 LOC</p>

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Service code and title	Examples	Counselor spending authority
	Transcripts Treatment records Written medical summary	
150 Vocational Evaluations	Vendor mileage, if approved, goes in SC 801	\$750 LOC
155 Community Based Work Assessment	Provider fee EACH is the unit	\$750 LOC
156 CBWA client compensation	COMP is the unit	80 hours \$580
160 Independent Living Assessment		\$150 LOC
170 Psychological/Alcohol/Drug Assessment		\$850 LOC
180 Assistive Tech Assessment		\$2,200 LOC
200 Health Insurance Premium		\$2,400 LOC
210 Drugs & Supplies	Prescriptions must be on file.	\$1,500 LOC
220 Surgery	Surgeon fees Assistant surgeon Cataract surgery Laser surgery	\$4,999 LOC combined authority with SC 250 (220 and 250 may not exceed \$4,999 counselor spending authority for LOC)
230 Anesthesia	Anesthesiologist fees and charges Dental anesthesia under SC 280 for dental services	\$1,000 LOC
240 Medical Treatment	Follow up eye exam Follow up doctor visit	\$500 LOC

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Service code and title	Examples	Counselor spending authority
<i>(Related to the disability, as opposed to general medical treatment under intercurrent illness)</i>	Physician's office visit	
245 Intercurrent Illness Treatment <i>Policy regarding authorization—requires PA approval if was an emergency that wasn't authorized in advance of the treatment occurring.</i>	Medical care for acute conditions arising during rehabilitation and constituting a barrier to employment.	\$6,750 LOC
250 Hospital Care (In/Out Patient)		\$4,999 LOC combined authority with SC 220 (220 and 250 may not exceed \$4,999 counselor spending authority for LOC)
260 Chiropractic Services		\$500 LOC
270 Visual Aids/Optical Devices	Large print measuring cups and liquid level indicators Braille labeler Braille Cane, folding White cane CCTV Digital voice recorder Dome magnifier Large print overlay Low vision magnifier Recorder Speaking dictionary Talking calculator Talking compass Talking watch Video magnifier	\$4,999 LOC

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Service code and title	Examples	Counselor spending authority
	Visual aids CCTV repair Digital notetakers	
271 Glasses and contact lenses	Eye glass frames and lenses Contact lenses Glasses Lens Tinted lenses	\$250 LOC
280 Dental Services	Anesthesia associated with dental services Dental services Bridges – moved from SC 380 (prosthetics) Crowns Dentures– moved from SC 380 (prosthetics) Caps Partial dentures Fillings Root canal Teeth cleaning Tooth extraction Oral surgery	\$3,000 LOC
290 Hearing Aids/Audiological Devices <i>Does not include hearing aid dispensing fee due to federal distinction between the device and services to help acquire the device – see SC 417</i>	Amplifier Batteries for hearing aids Doorbell amplifier Ear molds Flasher alarm Hearing aids Signalers Sonic boom alarm clock TTD TTY Hearing aid repair Hearing aid reprogramming	\$3,000 LOC
320 Psych Treatment (Not Assessment)	Psychiatric medication checks Psychiatric therapy sessions	\$1500 LOC

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Service code and title	Examples	Counselor spending authority
330 Alcohol/Drug Services (Not Assess)		\$300 LOC
340 Psychological Services (Not Assess)		\$1500 LOC
350 Physical/Occupational Therapies		\$500 LOC
360 Speech/Hearing Therapies		\$1,000 LOC
365 Counseling & Guidance-General <i>Includes information and referral.</i>	Provided by the VR counselor	
370 Counseling & Guidance-Substantial		
375 Benefits Counseling <i>This must now be included on the IPE if it is anticipated that it will be provided, per federal requirements.</i> <i>This service is provided to individuals who are interested in employment but who are uncertain of the impact of work income on benefits and entitlements being received. This service typically involves an analysis of current benefits, financial situation, and the effect of different income levels. It is intended to provide the individual with the opportunity to make an informed choice regarding the pursuit of employment.</i>	Consultation with Working Healthy Benefits Specialist or other qualified benefits counselors	No cost, or provided as a comparable benefit
380 Prosthetics <i>Does not include fitting fee – see SC 417</i>	Prosthesis	\$4,999 LOC
390 Orthotics	Braces Cane (for support, not white or folding cane) Compression stocking Crutches Orthotic shoes Shoe inserts Sit/stand stool Support stockings Walker	\$500 LOC

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Service code and title	Examples	Counselor spending authority
410 Other Assistive Devices, Not Otherwise Listed	Back cushion (not for WC) Communication boards	\$4,999 LOC
411 Wheelchairs	Custom seating Jay or Roho cushions WC Power WC Footplates Three-wheel scooter WC parts WC repair	\$20,000 LOC Use state contract.
412 Vehicle Modification	Vehicle modifications for accessibility Repairs to vehicle modification equipment	\$13,500 LOC Use state contract.
413 Computer Equipment <i>All computer equipment uses this service code. KMIS will have an additional field on the Service Authorization to indicate if the computer or software is being purchased for training, reasonable accommodations, business establishment, job placement or other (specify). This will allow all computers to be purchased under one code, but then correlated correctly to the RSA category.</i>	<i>Would NOT include internet which would be included under maintenance (except internet tied specifically to business establishment).</i> Computers Disks Hardware Docking stand Keyboard Mouse Power supply Printer Scanner Software Tablets Wrist rest JAWS or other screen reading software Zoom text	\$2,500 LOC Use state contract.

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Service code and title	Examples	Counselor spending authority
<p>414 Home Modification</p> <p><i>Home modifications are intended to remove barriers to access and functioning as needed to achieve the employment outcome. All home modification requests require Administration office approval. If modification of rental property is being considered, the following issues must be addressed: portability of the modification, the property owner's agreement to the modification, the client's rent history (frequency of moves), and evidence that the client intends to remain at the residence for a reasonable period of time.</i></p> <p><i>Requires consultation and approval with Administration Office prior to authorization for purchase to assure compliance with DCF, State, RS requirements.</i></p>	<p>Accessible remodeling Door widening Grab bar installation Ramp Bath lift</p>	<p>Approval at RS Admin Office</p>
<p>415 Worksite Modification</p> <p><i>Requires consultation and approval with Administration Office prior to authorization for purchase to assure compliance with DCF/State requirements.</i></p>		<p>Approval at RS Admin Office</p>
<p>417 Assistive Technology Services</p> <p><i>Does not include assistive tech training. See SC 591.</i></p>	<p>Hearing aid dispensing fee Prosthetic fitting WC analysis and recommendations Evaluation of the need for AT equipment Assistance in acquiring AT equipment Selecting, designing, fitting, customizing, adapting, repairing AT devices</p>	<p>\$1,500 LOC</p>
<p>510 4-Year College and University</p>	<p>Tuition and fees only</p>	<p>Indexed to the Board of</p>

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Service code and title	Examples	Counselor spending authority
<i>Academic training leading to a bachelor's degree.</i>		Regents rate per semester
511 Graduate-Level College or University <i>Academic training leading to a degree beyond the bachelor's level, such as a master's degree, Ph.D., or JD.</i>	Tuition and fees only	Indexed to the Board of Regents rate per semester
512 Junior College, Community College, Technical College <i>Academic training above the high school level leading to an associate's degree, a certificate or other recognized educational credential.</i>	Tuition and fees only	Indexed to the Board of Regents rate per semester
520 Basic Academic or Remedial Training	Remedial training Literacy training	\$300 PA
530 Occupational or vocational training <i>Occupational, vocational or job skill training provided by a community college and/or business/vocational/trade school to prepare individuals for employment in a recognized occupation. Does NOT lead to an associate's degree, a certificate or other recognized credential.</i>	Tuition and fees only Computer training Office skills training Peer specialist training	\$1,600 LOC
535 Tutors <i>When this service is provided to individuals in post-secondary education, it is subject to the Memorandum of Agreement with Institutions of Higher Education. See: http://www.dcf.ks.gov/services/RS/Pages/RSpArtners.aspx</i>		Up to \$20 per hour not to exceed \$4,000 LOC "Up to" means the counselor negotiates the lowest rate available not to exceed \$20 per hour

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Service code and title	Examples	Counselor spending authority
540 Training books	Would not include computers – moved to SC 413. Would not include parking permits – moved to SC 800. Would not include supplies	\$750 per semester
541 Supplies for training	Paper supplies Pens, pencils Ink cartridges	\$50 PA (per semester)
545 Training services not otherwise listed	GED training Training leading to high school diploma CPR training Driver education	\$500 LOC
550 Job readiness training <i>Training provided to prepare an individual for the world of work on issues such as appropriate work behaviors, getting to work on time, appropriate dress and grooming, increased productivity.</i>		\$500 LOC
555 Job Preparation		\$1,700 LOC
560 On-the-Job Training <i>Training in specific job skills by an employer. The trainee is paid and will remain in the same or similar job upon successful completion. Usually VR pays the employer for a share of the trainee's salary during the on-the-job training time period.</i>		\$1,500 LOC

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Service code and title	Examples	Counselor spending authority
<p>561 Apprenticeship Training</p> <p><i>This is a work-based training program that combined hands-on, on-the-job work experience in a skilled occupation with related classroom instruction. The following factors are associated with apprenticeships: includes supervision and structured mentoring; provides for wage increases as skills increase; based on an employer-employee relationship; and provides an industry-recognized certification of completion.</i></p>		<p>\$1,500 LOC</p>
<p>575 Job Coaching – short term</p> <p><i>On-the-job supports provided to an individual who has been placed in employment. Services are intended to stabilize the placement and enhance retention. Such services include short-term job coaching for persons who do not have a supported employment IPE.</i></p>		<p>\$1,200</p> <p>30 hours @ \$40 per hour</p>
<p>576 Job Coaching – supported employment</p> <p><i>On-the-job supports needed to support and maintain an individual with a most significant disability in supported employment. Individuals have a supported employment IPE.</i></p> <p><i>May be used when all five components of Customized Employment are authorized, or for Discovery/Supported Employment cases.</i></p>		<p>\$2,000 LOC</p> <p>50 hours @ \$40 per hour</p>
<p>590 Independent living Skills Training</p>		<p>\$1,000 LOC</p>
<p>591 Assistive technology training</p>	<p>Service provider agreement</p>	<p>\$1,200 LOC</p>
<p>593 Comprehensive Blind Skills Training (facility-based).</p>	<p>Service provider agreement</p>	<p>Approval at RS Admin Office</p>

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Service code and title	Examples	Counselor spending authority
<p>Refer to provider agreements.</p> <p><i>Requires consultation and approval with Administration Office prior to authorization for purchase to assure compliance with DCF, State, RS requirements.</i></p>		
594 Orientation & Mobility (community-based)	Service provider agreement	\$3,000 LOC
595 Rehabilitation Teaching (community-based)	Service provider agreement	\$3,000 LOC
596 Communication skills training for persons who are blind or visually impaired	Service provider agreement	\$3,000 LOC
609 Guided Placement	Service provider agreement	\$1,700 LOC
610 Self-Directed Placement		No cost
614 Job Development-Action Plan	Service provider agreement	\$500 LOC
615 Job Development-Placement	Service provider agreement	\$700 LOC
616 Job Development-Stabilization	Service provider agreement	\$700 LOC
617 Job Development-45 Days	Service provider agreement	\$800 LOC
618 Job Development-Extended Plan	Service provider agreement	\$500 LOC
619 Job Development-Closure	Service provider agreement	\$1,300 LOC
<p>620 Occupational Tools</p> <p><i>All tool purchases must use this service code. KMIS will an additional field on the Service Authorization to indicate if the tools were purchased for training, job placement or other (specify).</i></p> <p><i>Does not include initial stocks and supplies, see SC 623</i></p>	<p>Mechanic tools Drafting tools</p>	\$3,000 LOC
621 Licenses	<p>Commercial driver's license Driver's license</p>	\$125 LOC

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Service code and title	Examples	Counselor spending authority
<i>Reinstatement fees are not allowed.</i>	Nursing license Occupational license SW license Real estate license	
622 Business Establishment Use Kansas Correctional Industries for office furniture.	Accounting services Advertising Business start-up expenses Deposit on business rental property Liability insurance for business Office supplies for business	\$2,000 LOC
623 Internet for business establishment if necessary, on approved business plan		\$150 LOC
624 Technical Assistance for business establishment	Review of feasibility of business plan Service provider agreement/\$60 per hour	\$180 LOC
625 Initial stocks and supplies		\$1,000 LOC
655 Community-Based Job Tryout	Provider fee Unit is EACH	\$175 LOC
656 CBJT client compensation	Unit is COMP	80 hours \$580
700 Maintenance/Basic Subsistence <i>Increased costs due to participation in VR for basic subsistence (food, shelter, clothing)</i> <i>Maintenance analysis worksheet is required.</i>	Rent Housing Utilities Natural gas Electricity Propane Trash Water Cable Internet Cell phones Telephone	\$450 per month

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Service code and title	Examples	Counselor spending authority
	College room and board (dorm or off-campus housing)	
<p>725 Maintenance/Interview/Work Clothing</p> <p><i>On Service Authorizations, be specific regarding the type of clothing, for example: "khaki pants for uniform," rather than "work clothing."</i></p>		\$300 LOC
<p>726 Maintenance/Enrichment Activities (during post-secondary education or facility-based training)</p>	<p>Supplementary activities and programs that contribute to the learning objectives of the courses being taken or the degree being pursued.</p> <p>Field trips Weekend seminars Excludes club memberships and out-of-state activities</p>	\$50 per semester
<p>800 Client transportation</p> <p>Rate: Mileage rate is indexed to 50% of the current state rate.</p> <p><i>Parking fines are not an allowable expense.</i></p>	<p>Mileage Bus coupons Taxi tickets Parking (not in SC 540) Turnpike fees Parking fees</p>	\$450 per month
<p>801 Vendor transportation</p> <p>Rate: Mileage rate is indexed to 65% of the current state rate.</p> <p><i>KMIS will have an additional field to identify the core service code that this vendor mileage supports – such as vocational evaluation, interpreting, customer service, personal assistance, etc.</i></p>	<p>Mileage</p> <p>Hotel costs for personal assistants or drivers when travel with client is necessary as reasonable accommodation</p> <p>Personal assistant or driver meals</p>	\$200 PA

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Service code and title	Examples	Counselor spending authority
<p>802 Client airfare <i>One round trip per semester if comparable training is not available in Kansas</i></p>		\$600 PA
<p>803 Relocation expenses <i>If more than 25 miles from current residence. Only one relocation per training is permitted.</i></p>	<p>Relocation expenses related to job placement or approved IPE services</p> <p>Relocation for training if comparable training is not available in the home community</p> <p>Moving truck Movers Mileage</p>	\$1,500 LOC
<p>805 Bicycles and scooters for transportation <i>Must be necessary for transportation for IPE activities or employment. Includes scooters when used for transportation as opposed to scooters used for indoor & outdoor accommodations for individuals with mobility impairments. For the latter, see SC 411. May be used only one-time during the life of the case.</i></p>	<p>Mopeds Scooters Bicycles</p>	\$500 LOC
<p>810 Vehicle Purchase <i>Excludes Sales Tax or fees. Check Kelly Blue Book value.</i></p>		\$3,500 LOC

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Service code and title	Examples	Counselor spending authority
<p><i>Requires Rehabilitation Manager or PA approval of analysis and rationale. If RM or PM authority is used for the cost over \$4,999 or more DCF prior authorization is required through DCF purchasing.</i></p>		
<p>811 Vehicle purchase sales tax</p> <p><i>Must be comparable to the purchase price provided by VR</i></p>		\$300 LOC
<p>820 Vehicle Insurance</p> <p><i>Allowable only if the IPE created the need for this service. Not allowed when this was a client responsibility prior to the IPE.</i></p>		\$750 LOC
<p>821 Vehicle property tax</p>		\$100 LOC
<p>822 Vehicle tags/registration</p> <p><i>Allowable only if the IPE created the need for this service. Not allowed when this was a client responsibility prior to the IPE.</i></p>	Includes 60-day tag with vehicle purchase	\$30 LOC
<p>830 Vehicle Repair</p>	Add vehicle inspection (prior to purchase and for repair estimates)	\$1,000 LOC
<p>910 Foreign Language Interpreter</p>	Use State Contract	\$500 LOC
<p>915 Accommodations for persons who are deaf or hard of hearing</p> <p>Rate for notetakers: Current minimum wage and not to exceed 30 hours per week.</p>	Sign language interpreting Captioning Notetaking	\$4,999 LOC See rate schedule for sign language interpreters

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Service code and title	Examples	Counselor spending authority
<p><i>When this service is provided to individuals in post-secondary education, it is subject to the Memorandum of Agreement with Institutions of Higher Education. See:</i> http://www.dcf.ks.gov/services/RS/Pages/RSp artners.aspx</p>		<p>established by state contract.</p> <p>Hourly fee not to exceed \$52 for level IV and V level certification without exception approval through administration office for interpreters not on state contract.</p>
<p>916 Sign language interpreter travel time</p>	<p>Hourly professional fee for travel time.</p> <p>Mileage would be in SC 801</p>	<p>\$150 PA</p>
<p>920 Accommodations for persons who are blind or visually impaired</p> <p>Rate for readers: Current minimum wage and not to exceed 30 hours per week.</p> <p><i>When this service is provided to individuals in post-secondary education, it is subject to the Memorandum of Agreement with Institutions of Higher Education. See:</i> http://www.dcf.ks.gov/services/RS/Pages/RSp artners.aspx</p>	<p>Reader services Reading aloud Sound recording of print Audio books Transcription of regular print to Braille or large print</p>	<p>\$500 LOC</p>
<p>930 Personal Attendant Services</p> <p>Rate: Not to exceed \$7.45 per hour and not to exceed 30 hours per week.</p>	<p>Hourly fee for services provided</p> <p>Use service code 801 for travel related expenses</p>	<p>\$500 LOC</p>

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Service code and title	Examples	Counselor spending authority
<p>935 Other Personal Assistance Services</p> <p>Rate for drivers: Current minimum wage for drive time only.</p> <p><i>Use service code 801 for travel related expenses.</i></p>	<p>Drivers (drive time only)</p> <p>Guide dogs</p> <p>Service dogs</p> <p>Companion dogs</p> <p>Note-taking for consumers with cognitive impairments</p>	<p>\$500 LOC</p>
<p>955 Child Care</p>		<p>\$4,999 LOC</p> <p>DCF rate structure</p>
<p>970 Discovery/SE action plan ONLY FOR GEI DEMONSTRATION SITES</p>	<p>Service provider agreement</p>	<p>\$100 LOC</p>
<p>971 Discovery completed ONLY FOR GEI DEMONSTRATION SITES</p>	<p>Service provider agreement</p>	<p>\$1,600 LOC</p>
<p>972 Discovery/SE job development action plan ONLY FOR GEI DEMONSTRATION SITES</p>	<p>Service provider agreement</p>	<p>\$150 LOC</p>
<p>973 Discovery/SE on-the-job 10 days and instructional plan ONLY FOR GEI DEMONSTRATION SITES</p>	<p>Service provider agreement</p>	<p>\$1,500 LOC</p>
<p>974 Discovery/SE stabilization achieved ONLY FOR GEI DEMONSTRATION SITES</p>	<p>Service provider agreement</p>	<p>\$100 LOC</p>
<p>975 Discovery/SE plan for extended services ONLY FOR GEI DEMONSTRATION SITES</p>	<p>Service provider agreement</p>	<p>\$100 LOC</p>
<p>976 Discovery/SE successful employment ONLY FOR GEI DEMONSTRATION SITES</p>	<p>Service provider agreement</p>	<p>\$1,000 LOC</p>
<p>999 One-time emergency service necessary to start or keep a job.</p>		<p>\$250 LOC</p>

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Service code and title	Examples	Counselor spending authority
<p><i>This service will automatically print on all IPEs. The IPE will include this statement: This service will be provided only for emergencies necessary to start or keep a job. This service will not be provided in all case.</i></p> <p><i>Requires Status 20, 22 or 32 to issue a service or payment authorization.</i></p> <p><i>Requires an additional field on the authorization form for the customary service code for the goods or services provided to be noted (necessary to assure proper tracking back to federal reporting).</i></p>		

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Part 5 Economic Need

Rehabilitation Services does not require a client to share in the cost of VR services. In other words, there is no financial participation requirement and an economic need analysis is not necessary.

Note about Comparable Benefits: Prior to providing any VR services, Rehabilitation Services must first determine whether comparable services and benefits exist under any other program and whether those services and benefits are available to the individual. See Section 3, Part 6

Note about Maintenance: Clients are still responsible for their normal expenses. RS will pay for the excess expenses and there is no financial participation required for the **excess expenses**.

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Part 6 Comparable Services and Benefits

Synopsis of Federal Regulation

Prior to providing any vocational rehabilitation (VR) services to an eligible individual, or to members of the individual's family, Rehabilitation Services (RS) shall determine whether comparable services and benefits exist under any other program and whether those services and benefits are available to the individual.

If comparable services or benefits exist and are available to the eligible client at the time needed to achieve the rehabilitation objectives in the individual's Individualized Plan for Employment (IPE), RS shall use those comparable services or benefits to meet, in whole or in part, the cost of vocational rehabilitation services.

If comparable services or benefits exist under any other program, but are not available to the client at the time needed to satisfy the rehabilitation objectives in the individual's IPE, RS shall provide VR services until those comparable services and benefits become available.

Exceptions: The following services are exempt from a determination of the availability of comparable services and benefits:

1. Assessment for determining eligibility and priority for services.
Assessment for determining VR needs.
2. VR counseling, guidance, and referral services.
3. Vocational and other training services, such as personal and vocational adjustment training, books (including alternative format books accessible by computer and taped books), tools, and other training materials. Exception: No training or training services in an institution of higher education (universities, colleges, community or junior colleges, vocational schools, technical institutes or hospital schools of nursing) may be paid for with VR funds unless maximum efforts have been made by RS and the client to secure grant assistance in whole or in part from other sources to pay for that training.
Reference: §361.48(a)(6)
4. Job-related services, including job search and placement assistance, job retention services, follow-up services, and follow-along services.
5. Rehabilitation technology.
6. Post-employment services consisting of the five services listed above.

It is not necessary to complete a search for comparable benefits if the determination of the availability of comparable services and benefits under any other program would interrupt or delay:

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- The progress of the individual toward achieving the employment outcome described in the IPE.
- An immediate job placement.
- The provision of VR services to any individual who is determined to be at extreme medical risk, based on medical evidence provided by an appropriate qualified medical professional.

Reference: §361.53

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Part 7 Small Business and Self-Employment

Small businesses are a significant component of the economy and can provide gainful opportunities for employment of people with disabilities. Self-employment is a legitimate vocational rehabilitation (VR) objective.

Self-employment or small business entrepreneurship may be appropriate for a client when he or she has experience operating a business; when he or she requires a work setting or schedule under his or her own control; when the client has a marketable business idea with sound prospects for success; or when the competitive labor market is tight and placement is otherwise unlikely.

If a client is interested in such an employment opportunity, the following steps are required:

- Assess the client's business potential. Assessments may include vocational and psychological testing. Informal assessments include observations of the client's planning skills, ability to formulate a marketing and business plan, degree of enthusiasm, initiative and the ability to meet deadlines.
- Develop the business idea, explore its feasibility, and conduct a market analysis. The client should be responsible for the majority of this work, but should have resources to assist with the development, such as information from the counselor, the Small Business Administration, a business development consultant, a market analysis expert, etc. The client should research the market to determine the need for the business and who the customers would be. Counselors may also use this step to assess the client's initiative and commitment by expecting him or her to perform many of these steps with minimum guidance. Such initiative is a key characteristic of successful entrepreneurs. If the counselor does not feel the individual is performing these steps as expected, it should be discussed with the client.
- The client obtains needed education or training. The client is expected to be knowledgeable about the product or service being offered and all aspects of running a business such as personnel, management, bookkeeping and marketing. Attending seminars, participating in training courses, or working in another business are some of the ways this step can be accomplished.
- The client obtains technical assistance for every aspect of the business, such as funding sources, loans, tax information, licensing, use of attorneys, inventory, and insurance. Sources of technical assistance include similar businesses, industry associations, chambers of commerce, banks, economic development programs, community colleges or universities and the Small Business Administration (SBA).
- A business plan is developed. Development of a comprehensive small business plan is an essential step for prospective small business owners or entrepreneurs, and is an integral part of an Individualized Plan for Employment (IPE) that has a small business or entrepreneurial vocational objective. Adequate time must be allowed for development of the plan and consultation with available business development resources. The plan is used as a basis of

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evaluating the request for funding from VR and other sources. Significant points that should be included in a business plan are the following:

- Description of the proposed business
 - Market analysis (including proprietary features of the products of services and target customers)
 - Marketing plan (advertising and promotion)
 - Financial plan (breakeven analysis, cashflow analysis, balance sheet, plan for bookkeeping, identification of loans and financial assistance)
 - Operating budget
 - Analysis of needs for initial inventory or equipment
 - Legal issues, such as zoning or licenses
 - Analysis of possible risks and competition from similar existing businesses
 - Implementation schedule.
- Explore and apply for resources available from other sources. Financial participation in the costs of establishing a small business enterprise is required. If personal financial resources are not available, the plan must clearly state the investments of time and effort on the part of the client. The client should apply for funding from other sources, such as venture capital, banks, SBA, etc.
 - Agency reviews plan by counselor and approval by Regional Management team. The entire plan should be reviewed by one or more individuals knowledgeable about the proposed business, the geographic and market areas, and small business operation. The projected income should be adequate to make a meaningful contribution to the client's self-sufficiency and there should be reasonable prospects for success of the business. Rehabilitation Services (RS) staff may seek assistance from business consultants in reviewing plans if appropriate.
 - Follow up should include a review of the business profit and loss statements by individuals who are qualified to judge such issues. This review should be done on a periodic basis until the case is closed.

IPEs with vocational objectives in small business or self-employment must define the point of stability at which time the 90-day employment period prior to case closure will begin. Considerations in defining stability may include:

- Implementation of the business plan to a specific step.
- Measurable income contributing to the client's self-sufficiency.

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- The likelihood that no additional VR services will be needed.

(Reference: NIDRR #G0087C0228, Research and Training Center on Rural Rehabilitation Services, Montana University Affiliated Rural Institute on Disabilities)

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Part 8 Vocational Rehabilitation (VR) Services for Transition-Aged Students with Disabilities

Synopsis of Federal Regulations

Rehabilitation Services (RS) shall facilitate the transition of students who are receiving special education services from the provision of a free appropriate public education under the responsibility of an educational agency to the provision of VR services under RS responsibility.

The Individualized Plan for Employment (IPE) must be developed and signed before the student leaves the school setting for each student determined to be eligible for VR services or, if RS is operating under an order of selection, for each eligible student able to be served under the order. The IPE must, at a minimum, identify the long-term rehabilitation goals, intermediate rehabilitation objectives, and goals and objectives related to enabling the student to live independently, to the extent these goals and objectives are included in the student's individualized education program. *(RS policy: If the student makes an informed choice not to apply or pursue receipt of services, an IPE does not have to be developed.)*

RS shall also ensure that students with disabilities who are not receiving special education services have access to and can receive VR services, if appropriate, and shall ensure outreach and identification of these students. *(RS policy: IPEs for these students must be developed as soon as there is sufficient information for vocational planning.)*

Reference: §361.22

Additional federal regulatory guidance related to responsibilities of education agencies and RS during the transition period

The overall purpose of transition services, as defined by the Rehabilitation Act and implementing regulations, is to ensure that all students who require VR services receive these services in a timely manner. There should be no gap in services between the education system and the VR system. These provisions are not intended in any way to shift the responsibility of service delivery from education to VR during the transition years. School officials will continue to be responsible for providing a free and appropriate public education as defined by the Individual Education Plan (IEP). The role of the VR system is primarily one of planning for the student's years after leaving school. *Reference: Senate Report No. 102-357 as noted following §361.22*

RS Policy

RS and the Kansas Department of Education have signed an interagency agreement with the following intents:

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- Facilitate the integration and coordination of services to all secondary students with disabilities, including those receiving special education services and those who are not receiving special education services.
- Integrate the activities of education and VR to provide seamless services with the outcome of appropriate employment and independent living.
- Create a flexible system by using available resources that focus on the provision of opportunities for students with disabilities while minimizing obstacles to learning and post-school goals.

The Local Education Agency/Authority (LEA) is not relieved of any responsibility to provide transition services until the student formally exits the public school program and as long as the student remains eligible for and receives special education services.

RS procedure

Coordination/collaboration between VR and Special Education is essential to assure that students with disabilities have access to the continuum of services they need to become employed and self-reliant. Youth with disabilities may apply for services directly or be referred by the Local Education Agency (LEA), RS will not implement any arbitrary age or time frame limit on when a youth with a disability can submit an application for VR and transition services. Federal regulations define youth with disabilities as individuals who are not younger than 14 years of age and not older than 24 years of age. RS will coordinate with the individual, the LEAs and the individual's IEP regarding initiation of and provision of services.

RS may also provide technical assistance, such as participation in IEP meetings or referral to community resources.

When the LEA refers a student with a disability to RS to apply for VR services, the referral from the school will include the name and address of the student with a disability (both those in special education as well as other students who have disabilities but who are not receiving special education services) who may benefit from VR services. The need for this notification to RS will be determined solely by the IEP team when considering the special education student's needs, interests and preferences concerning employment and related independent living needs. Referrals for students with disabilities who are not in special education will be made by the appropriate school official. Information that accompanies this referral will include the student's latest IEP for those students in special education and pertinent and available assessment information, such as psychological evaluations, vocational evaluations, medical information, work histories, the expected date of graduation or exit from high school, and other relevant information which would facilitate coordination of vocational planning.

Eligibility and Order of Selection: A student's status in special education does not necessarily mean that the student is eligible for VR services, or if eligible that the student is an individual with a most significant or significant disability. This determination will be made in accordance with the RS eligibility and order of selection policies.

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Vocational goals/objectives: In development of the IPE for students, the vocational goal will be as specific as reasonably possible. If the student is uncertain of the vocational goal, a more general goal, such as a general job group of “clerical,” may be indicated. In such instances, assessment services should be considered as services on the IPE to help identify a more specific vocational objective. Once the specific vocational objective is identified, the IPE should be amended.

Purchase of equipment or provision of VR services while the student is still in school: Local education authorities continue to be responsible for providing a free and appropriate education as defined by the IEP during the transition years.

However, if equipment is needed for post-high school training or a job and cannot be funded through other sources, counselors have the flexibility to authorize such purchases for eligible students while they are still in school as long as the service is identified on the IPE. (Note that the IPE being in place means that the student is NOT on a waiting list through Order of Selection.)

Services may be initiated while an eligible student is still in school provided that the services are identified on the IPE and related to achievement of employment. For example, on-the-job training, community job tryouts, work experience, referral to community resources, benefits analysis/planning, and career counseling and guidance, may be provided while the student is still in school if this will result in work skills consistent with the vocational objective on the IPE. As with any IPE, RS will consider availability of appropriate comparable benefits in the provision of services.

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Part 9 Extended (Sheltered) Employment, and Subminimum Wage Employment

Synopsis of Federal Regulations

Reference: Sec. §361.5

The regulatory definition of employment outcome under the vocational rehabilitation (VR) program has been amended to refer to outcomes that occur in competitive integrated settings. Here are several pertinent definitions:

Employment outcome means, with respect to an individual, entering or retaining full-time or, if appropriate, part-time competitive employment in the integrated labor market, supported employment, or any other type of employment in an integrated setting, including self-employment, telecommuting, or business ownership, that is consistent with an individual's strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

Reference: Sec. 361.5 (b) (16)

Extended employment means work in a non-integrated or sheltered setting for a public or private nonprofit agency or organization that provides compensation in accordance with the Fair Labor Standards Act (subminimum wage employment). Such placements are not allowable employment outcomes in the VR program.

Reference: Sec. §361.5 (b) (16)

Competitive employment means work:

- (i) In the competitive labor market that is performed on a full-time or part-time basis in an integrated setting; and
- (ii) For which an individual is compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals who are not disabled.

Reference: Sec. §361.5 (b) (11)

Integrated setting means, with respect to an employment outcome, a setting typically found in the community in which applicants or eligible individuals interact with non-disabled individuals, other than non-disabled individuals who are providing services to those applicants or eligible individuals, to the same extent that non-disabled individuals in comparable positions interact with other persons.

Reference: Sec. §361.5 (b) (33) (ii)

In addition, the federal regulations require Rehabilitation Services (RS) to refer to local extended employment providers:

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- Any individual with a disability who makes an informed choice to pursue extended employment as his or her long-term employment goal.
- Any individual who is determined ineligible (through the clear and convincing evidence standard) based on a finding that the individual is incapable of achieving an employment outcome in an integrated setting.
- Any individuals who were initially found eligible for VR services, but are later determined unable to work in an integrated setting.
- Require that, before referring to local extended employment providers an individual with a disability who chooses to pursue extended employment, RS must:
 - Explain to the individual that the purpose of the vocational rehabilitation program is to assist individuals to achieve competitive integrated employment outcome.
 - Provide the individual with information concerning the availability of employment options, and of vocational rehabilitation services, in competitive integrated settings.
 - Inform the individual that services under the vocational rehabilitation program can be provided to eligible individuals in an extended employment setting if necessary for purposes of training or otherwise preparing for employment in an integrated setting.
 - Inform the individual that, if he or she initially chooses not to pursue competitive employment in an integrated setting, he or she can seek services from RS at a later date if, at that time, he or she chooses to pursue competitive integrated employment.
 - Refer the individual, as appropriate, to the Social Security Administration (SSA) or a benefits counselor through Working Healthy in order to obtain information concerning the ability of individuals with disabilities to work while receiving benefits from the SSA.
- Permit State VR agencies to serve individuals in extended employment settings for purposes of preparing those individuals for employment in integrated settings. The key change is that extended employment, for purposes of participating in the VR program, represents an interim step in the rehabilitation process rather than an end point of that process. Justification for providing services in non-integrated settings must be included in the Individualized Plan for Employment (IPE). Participants in the VR program who receive VR training services on a transitional basis in an extended employment setting may also receive other VR services necessary for their rehabilitation.
- Acknowledge that some persons with disabilities may prefer to work in extended employment facilities long-term. In recognition of that fact, the regulations assure that those wanting to work in extended employment can access the services they need directly from local extended employment facilities.

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- State that the determination as to whether any job meets the regulatory definition competitive integrated employment must be made by RS on a case-by-case basis.

- Require annual reviews when:
 - An individual achieves an employment outcome in which the individual is compensated in accordance with section 14(c) of the Fair Labor Standards Act.
 - The State unit closes the record of services of an individual in extended employment on the basis that the individual is unable to achieve an employment outcome as defined by regulations.
 - An eligible individual through informed choice chooses to remain in extended employment.
 - For each of these circumstances, RS must:
 - Annually review and reevaluate the status of each individual for 2 years after the individual's record of services is closed (and thereafter if requested by the individual or, if appropriate, the individual's representative) to determine the interests, priorities, and needs of the individual with respect to competitive employment or training for competitive employment.
 - Enable the individual or, if appropriate, the individual's representative to provide input into the review and reevaluation and must document that input in the record of services, with the individual's or, as appropriate, the individual's representative's signed acknowledgment that the review and reevaluation have been conducted.
 - Make maximum efforts, including identifying and providing vocational rehabilitation services, reasonable accommodations, and other necessary support services, to assist the individual in engaging in competitive employment.

RS Policy

Determination as to whether any job meets the regulatory definition of integrated setting, and therefore qualifies as an “employment outcome” for purposes of the VR program, must be made on a case-by-case basis. There is no set ratio of people with disabilities to people without disabilities in the workforce that would by definition constitute an integrated work setting. Level of pay and benefits, while they are often measures of quality and client choice, are not pertinent to the determination of whether a workplace meets the criteria for an integrated setting.

The counselor makes this determination of whether a workplace meets the criteria for an integrated setting. Factors to be considered and documented in the record of services include the following:

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- Is the employment environment similar to that of the typical workplace in the community? (Compare similar industries. For example, compare a manufacturing firm to a typical manufacturing firm in the community. Compare a retail outlet to a typical retail outlet in the community. Compare a fast food restaurant to the typical fast food restaurant, etc.)
- How does the percentage of workers with disabilities compare to other typical workplaces in the community? Consider how employees are assigned to specific production lines, work teams, or shift work. (Again, compare similar industries.)
- Do workers with disabilities have the opportunity to routinely interact with co-workers who are not disabled?
- Are the non-disabled workers functioning as typical co-workers, or as job coaches, or in some other support capacity?
- Are the opportunities for social interaction inherent in the workplace integrated? (For example, break schedules, break rooms, company functions.)

Federal Ruling Regarding Center Industries, Wichita

The U.S. Office of Special Education and Rehabilitation Services has ruled that Center Industries Corporation, Wichita, satisfies the requirements for the definition of “integrated setting.” Therefore, placements at Center Industries constitute allowable employment outcomes (Status 26s) under the VR program when the conditions for Status 26 have otherwise been met. This ruling applies to Center Industries only, and may not be applied to other entities. When placing individuals in employment at Center Industries, the analysis and documentation requirements specified in the RS Policy section above are waived. (*Reference: correspondence from John H. Hager, received February 24, 2005.*)

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Part 10 Supported Employment

Supported employment is competitive integrated employment with ongoing support services for clients with the most significant disabilities for whom competitive integrated employment has not traditionally occurred or for whom competitive employment has been interrupted or intermittent as a result of a significant disability; and who, because of the nature and severity of their disabilities, needs intensive supported employment services from Rehabilitation Services (RS) and extended ongoing services after the VR case closure in order to be employed. Supported employment includes transitional employment for individuals with the most severe disabilities due to mental illness.

Supported employment should not be considered automatically as the first choice for individuals with significant or the most significant disabilities. The Supported Employment program and supported employment services exist to assist individuals with the most significant disabilities who need intensive services and ongoing supports to achieve an employment outcome and should be considered after a comprehensive assessment of the rehabilitation needs of the individual when determining an individual's employment goal consistent with his or her unique strengths, priorities, concerns, abilities, capabilities, interests, and informed choice.

Intensive supported employment services from RS may include:

- Job development and placement in a competitive integrated setting for the maximum number of hours possible for the client based on the client's unique strengths, resources, interests, concerns, abilities and capabilities.
- Intensive on-the-job skills training and other training provided by job coaches, coworkers or other qualified individuals.
- Regular observation and supervision of the client to encourage success on the job.
- Follow up services, such as contact with employers and others in order to reinforce and stabilize the job placement.
- Facilitation of natural supports.
- Social skills training.
- Other services needed to achieve and maintain job stability.
- Extended services in accordance to youth with the most significant disabilities for a period of time not to exceed four years, or until such time that a youth reaches the age of 25, thereby no longer meeting the definition of a "youth with a disability." Except for this exception for youth with disabilities, extended services are provided by community and other resources after VR case closure. RS may not provide extended services to an individual with a most significant disability who is not a youth with a most significant disability. Extended services means ongoing support services and other appropriate services that are:

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- Needed to support and maintain an individual with a most significant disability including a youth with a most significant disability, in supported employment.
 - Organized or made available, singly or in combination, in such a way as to assist an eligible individual in maintaining supported employment.
 - Based on the needs of an eligible individual, as specified in an individualized plan for employment.
 - Provided by a non-VR state agency, a private nonprofit organization, employer, or any other appropriate resource, after an individual has made the transition from support from VR.
- Post-employment services that are not available from the ongoing service provider and that are needed to maintain the job placement, such as job station design, repair and maintenance of assistive technology, or replacement of prosthetic or orthotic devices.

Intensive supported employment services from RS may be provided for a period not to exceed 24 months unless there are special circumstances and the counselor and client agree that a longer period is needed to achieve job stabilization. Sufficient monitoring (at least twice monthly) at the work site must be done to adequately assess employment stability. Off-site monitoring may be approved when requested by the client and when circumstances warrant. (Federal supported employment regulations establish the minimum requirements for off-site monitoring to consist of two meetings with the client and one meeting with the employer each month.)

Ongoing services are furnished by the VR agency from the time of job placement until the transition to extended services, and thereafter by one or more extended services providers.

In addition to the standard Individualized Plan for Employment (IPE) requirements, an IPE for individuals with the most significant disabilities for whom a vocational goal in a supported employment setting has been determined to be appropriate will also contain:

1. A description of the time-limited supported employment services to be provided by RS.
2. A description of the extended services needed and identification of the source of extended ongoing services or, in the event that identification of the source is not possible at the time the IPE is developed, a statement explaining the basis for concluding that there is a reasonable expectation that services will become available.
3. A provision for periodic monitoring to ensure satisfactory progress toward meeting the work goals by the time of transition to extended ongoing services.
4. The client's goal for number of hours to work.
5. The criteria for job stabilization. Job stabilization shall be individually determined for each client. This criteria should describe the methodology that will be used to determine when vocational rehabilitation (VR) funding should cease and ongoing support will take over.

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6. Projection of the number of hours of job coaching needed for the client to reach stabilization and case closure.

Closure as rehabilitated in supported employment

Supported employment outcomes must be in be in competitive integrated employment. If not in competitive employment, it is also permissible for the outcome to temporarily be in an integrated setting which the individual is working toward competitive integrated employment on a short-term basis. For purposes of supported employment, an individual with a most significant disability, whose supported employment in an integrated setting does not satisfy the criteria of competitive integrated employment is considered to be working on a short-term basis toward competitive integrated employment so long as the individual can reasonably anticipate achieving competitive integrated employment within six months of achieving a supported employment outcome. In limited circumstances, the short-term basis period may be extended up to an additional six months (not to exceed 12 months from the achievement of the supported employment outcome), if a longer period is necessary based on the needs of the individual, and the individual has demonstrated progress toward competitive earnings based on information contained in the service record. The six-month short-term basis period, and the additional six months that may be available in limited circumstances, begins after an individual has completed up to 24 months of supported employment services (unless a longer period of time is necessary based upon the individual's needs) and the individual has achieved a supported employment outcome, meaning that the individual is stable in the supported employment placement for a minimum period of 90 days following the transition to extended services.

It would not be appropriate to put an individual in an unpaid internship, pre-apprenticeship, apprenticeship (including a Registered Apprenticeship), or transitional employment for a short-term basis because the short-term basis period occurs after the achievement of the supported employment outcome. These employment experiences do not constitute supported employment outcomes, instead, they are VR services that may lead to the achievement of employment outcomes. Therefore, they would not be appropriate placements for employment on a short-term basis.

There may be situations when an individual is earning competitive wages, but the work setting is not integrated. Such situations do not meet the supported employment outcome requirements for VR. Therefore, employment in sheltered workshops and enclaves and group employment settings does not constitute supported employment because an individual achieves a supported employment outcome only if the supported employment meets the integrated setting requirement.

Closure should also be based upon the following factors:

- The client was provided appropriate and substantial services in accordance with the IPE.
- The client has made substantial progress toward working the number of hours per week specified in the IPE.
- The community service system has assumed responsibility for funding and providing the extended ongoing support services necessary to retain employment.

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- The client's performance meets the criteria for job stabilization defined in the IPE. Stabilization will be based on the following factors:
 - The client has reached a maximum level of work performance.
 - The agreed upon hourly work goal has been reached.
 - Job coaching and related support services have decreased to a level necessary to maintain the individual in employment through ongoing support.
 - If the individual is stabilized in employment at a level of hourly work that is less than the goal established in the IPE, and the client and counselor agree, the situation may be considered substantial and suitable employment.
- Placement is maintained for at least 90 days after making the transition to extended ongoing services. The ongoing supports being provided are adequate to meet the client's needs with respect to maintaining employment.

In order for the employment outcome for the individual to be considered competitive, it must be in an integrated setting and the client must be paid at or above the minimum wage but not less than the wages and benefits customarily paid by the employer for the same or similar work performed by non-disabled individuals. RS shall annually review and re-evaluate the status of individuals in supported employment who have achieved an employment outcome that does not meet the definition of competitive employment. The review will focus on determining progress toward competitive employment. The review will include input from the individual or the individual's representative regarding his or her interests, priorities and needs.

Transitional employment: Transitional employment is an authorized supported employment model that may be used for clients with severe and persistent mental illness. Transitional employment consists of a series of temporary job placements in integrated competitive work with ongoing support services, including continuing sequential job placements. This model is useful in helping the client accomplish work-related objectives, such as overcoming anxieties related to work; developing work tolerance; evaluating work behaviors related to the vocational objective; testing the feasibility of a specific vocational objective; and providing intermediate non-threatening steps toward permanent placement. The purpose is to enable the client to achieve job stability and transition to extended ongoing services. RS shall be responsible for the provision of the intensive time-limited services. Transitional employment cases may be closed in Status 26 in temporary placements if appropriate. After transition to extended ongoing services, the responsibility is with the community extended service provider to provide continuing sequential job placements until job permanency is achieved.

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Service Delivery
Coordination with Economic and Employment Support (EES)

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Part 11 Coordination with Economic and Employment Support (EES)

Rehabilitation Services (RS) staff will work collaboratively with staff of the EES Section to provide effective services leading to employment for Temporary Assistance for Families (TANF) participants who are eligible for vocational rehabilitation services. Joint interviews and development of Self-Sufficiency Agreements (SSA) and Individualized Plans for Employment (IPEs) are encouraged when feasible.

When meeting with mutual participants and when developing an IPE for an eligible individual, counselors must discuss the 24-calendar month lifetime limit on TANF assistance. Clients should be aware of the number of months of assistance that remain for them, and should use this information when making informed decisions about rehabilitation plans and vocational objectives. IPEs that will extend beyond the client's 24 months of TANF assistance must address how the client will meet his or her basic living needs once TANF assistance has ended.

TANF participants who are referred to RS will not be assigned other work activities such as applicant job search. These individuals will be placed in an EES work component called Disability Employment Services (DES). At the time of referral, the DES component will indicate zero hours of participation. Once the IPE is developed (Status 12) for eligible individuals, the DES component will reflect 20 hours of participation per week.

Individuals who are found ineligible will be referred back to EES to receive appropriate services.

Individuals who are already RS applicants or clients when they apply for assistance from EES will be considered DES component participants.

Support services will be provided by RS during the application, eligibility and IPE development stages. Once the IPE development is completed (Status 12), EES will provide support services such as childcare, transportation and other special services as allowed.

Communication between RS and EES staff is essential for the effective delivery and coordination of services. Local staff has flexibility to address individual client needs.

RS staff will be responsible for determining whether clients are making progress on their rehabilitation plans and whether they are complying with expectations for participation in the DES component. RS staff will discuss the expectations for participation and the possible consequences of failure to participate with each client.

Determination that a client is not participating or not making progress is an issue of counselor discretion. If such a determination is made, it will be reported promptly to EES staff. EES staff will accept the RS counselor's determination and take appropriate action to implement penalties, which could close the TAF and food stamp cases.

Staff should communicate quarterly to update each other on progress. Information on employment, case closure and non-compliance will be reported immediately.

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SECTION Service Delivery
PART Post-Employment Services

SECTION NO. 3-12
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Section 3 Service Delivery

Part 12 Post-Employment Services

Rehabilitation Services (RS) Policy

Previously, post-employment services were vocational rehabilitation (VR) services provided when:

- The individual has achieved an employment outcome and the record has been closed.
- Additional services are needed to assist the individual in maintaining, regaining or advancing in employment, consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities and interests, and there are no other personal, family, employer or community resources available to assist the individual.
- Needed services are limited in scope and duration, are related to services previously provided and are not a new set of comprehensive services.

Now, however, reporting requirements implemented as a result of the Workforce Innovation and Opportunity Act prohibit the expenditure of VR funds on a case that has previously been closed. Therefore, post-employment is no longer an option. A VR counselor will discuss post-employment at the 90-day stability, and if services are necessary at that time the VR counselor will keep the case remained opened to provide the additional services.

To assure that clients in the circumstances described above receive the services they need to maintain employment in an expeditious manner if the case had been closed, RS will open a new case using eligibility and planning information from the previous case file, if no new disability information has been presented.

If more than a year has elapsed since the case closure, the counselor will consider whether additional information is needed to correctly identify and provide the services needed by the client. If it is determined that the individual's needs are comprehensive rather than limited in scope and duration, the standard new case processing procedures will be followed. This review will help RS assure that any changes in disability status, vocational objectives, or services needed to achieve employment are addressed.

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PART Training

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Section 3 Service Delivery

Part 13 Training

Post-Secondary Education

Clients enrolled in any training program must maintain a cumulative minimum grade average equivalent to 2.0 on a 4.0 scale. In addition, clients whose vocational objectives require them to apply for entry into any professional or advanced level curriculums must maintain at least the minimum admission standards for those curriculums. In some cases, this will require the clients to maintain a grade point average higher than 2.0 on a 4.0 scale.

If a client's grade average falls below these minimum standards, the counselor may fund one additional quarter or semester during which the client has the opportunity to bring the grade average up to the minimum standards. Failure to improve the grade average to the minimum standards will result in discontinued funding for training and related expenses through Rehabilitation Services (RS). In the event of such circumstances, counselors will work with clients to reassess service options and to amend the Individualized Plan for Employment (IPE). Clients, of course, have the choice to continue training using other resources which may be available to them. If they do so and improve their grade average to the minimum standards, counselors may re-establish RS funding.

Clients enrolled in college or university programs must complete at least 30 hours per year. Year is defined as a 12-month period, which includes two semesters and summer school. Please note that this policy does not require participation in summer school if the 30-hour minimum requirement can be otherwise met. Exceptions may be considered. Each RS Program Administrator will establish a procedure for routing such exception requests through the RS Managers, RS Program Administrator or both. Use of the Exceptions Request Form (Forms Part 54) is required.

- If a student drops classes resulting in failure to meet the 30-hour minimum, an exception must be approved according to Regional procedures to allow continuation of RS funding for the training plan.
- There may be occasions, such as illness, which would cause a student's IPE or participation in training to be suspended for a period of time. In such circumstances, the 30-hour annual minimum will be prorated at a rate of 12 hours each per semester and six hours per summer school session.

Clients enrolled in other post-secondary training must meet the full-time requirements of those programs. Exceptions must be allowed by the school and approved according to Regional RS procedures. Use of the Exceptions Request Form (Forms Part 54) is required..

After completion of the first year of school, when transfer to a different school is contemplated, or when a change of major is contemplated, clients will be required to work with the institutions of higher education to analyze their transcripts and develop plans for completing course work necessary to complete the degree. This analysis and plan must be submitted for approval to the counselor as an expectation of the IPE.

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IPEs will specifically note the grade or performance level and number of hours that must be maintained and identify how progress will be monitored. IPEs will also note the requirement for clients to consult with their counselors prior to dropping any classes.

IPEs supporting graduate studies will not be considered until the client has completed the prerequisite degree and admission requirements. Once those requirements have been met, the IPE for advanced studies may be developed if it is designed to meet a specific employment outcome that is consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice.

Textbook buy-back

Funds received for books originally purchased by RS and then returned at the end of a semester or other training period will be credited or returned directly to RS. Students may choose to keep textbooks that relate to their major field of study.

Tuition and fees at private or out-of-state institutions

Tuition and fees for private or out-of-state educational institutions will be paid at a rate not exceeding the current per credit hour rate at any Kansas public institution or Kansas Board of Regents University. If a specific training program necessary to meet a client's rehabilitation needs is not available at a Kansas public institution of higher learning, out-of-state or private educational institution tuition and fees can be paid at the usual and customary rate. In cases where education costs would be less at a private or out-of-state educational institution than they would be at a similar in-state educational institution, counselor discretion and client choice will be considered. Such circumstances could include, but are not limited to, those cases requiring attendant care, specialized housing, transportation, medical expenses or other accommodations. Another factor which may be considered is the availability of courses within the timeframe of the IPE and goals for achieving employment. Out-of-state services funded by RS require the prior approval of the RS Regional Program Administrator.

Travel for students participating in out-of-state services

If out-of-state training is approved for a client because comparable services or programs are not available in Kansas, RS may pay reasonable travel expenses for one round trip between Kansas and the school per semester or term. (For example, RS will pay for travel to the school at the beginning of the semester and for return home at the end of the semester.)

If a client is participating in out-of-state training when comparable services or programs are available in Kansas, RS will not be responsible for any travel expenses.

Student loans and grants

The intent of the Rehabilitation Act is that vocational rehabilitation (VR) resources are used only as a last resort to pay for training in institutions of higher education. Within this context, however, a client cannot be required to take a student loan as a condition for receiving training or other VR services. Clients must make maximum efforts to secure grant assistance. Therefore, a client who owes a refund on a grant or who has defaulted on a student loan should proceed to clear the obligation in order to be eligible for additional student financial aid. If an individual decides not to repay a loan

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although financially able to do so, it could be concluded that the individual has failed to carry out his/her responsibility to make maximum efforts to secure grant assistance, and RS would be prohibited from paying the individual's training costs. True hardship cases may exist where an individual has limited or no financial resources and is not able to work out a satisfactory repayment agreement. Under such circumstances it can be concluded that maximum efforts have been made to secure grant assistance and that comparable benefits and services are not available. In such an instance, VR funding for training may be appropriate. *(RSA-PD-92-02)*

Scholarships

Merit-based scholarships are not considered a comparable benefit. Merit scholarships are awarded for exceptional performance in academics, athletics, music, or other specific educational disciplines.

If a merit scholarship is awarded for the purpose of tuition, room/board or other specific services, then the consumer must use it for those purposes specified in the award.

Non-merit scholarships are typically awarded based on the student's affiliation with a specific group. Common examples are scholarships awarded by employers for family members, by specific cities or communities for their residents, by civic groups, or based on affiliation with certain cultural, disability or other interest groups. In non-merit scholarships, academic or other areas of performance are not considered in the selection process. Federal financial aid based on income guidelines is not considered to be merit scholarships.

On-the-job training

On-the-job training requires a written agreement between the client, counselor, and employer, which stipulates the hourly wage, training to be provided by the employer, and any other conditions of employment. Job coaching may be provided in conjunction with on-the-job training if it does not duplicate the work-related training being provided by the employer.

Alternative methods of training delivery

Correspondence courses, outreach courses, private business or technical schools, and training which uses the Internet as the primary delivery mechanism may be authorized with the following considerations:

- The training specifically meets the client's needs, and is consistent with the rehabilitation plan and vocational objective.
- The training is consistent with the client's informed choice.
- The counselor and client have verified the credentials of the institution, such as accreditation, use by other related programs such as the Veteran's Administration (VA), eligibility for federal financial aid, and the placement success rate of graduates.
- The choice is cost effective.

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Cost sharing for auxiliary aids and services

VR clients attending Institutions of Higher Education (IHEs) may require the provision of auxiliary aids and services. RS has formal written agreements with all of the Board of Regents universities, community colleges, technical schools, and Washburn University. RS also has format written agreements with all private non-profit colleges. These agreements specify conditions for cost-sharing between RS and the IHE. Templates of these agreements are in the Resources Section 10 of this Manual. Copies of the actual signed agreement for a specific IHE are available by contacting the Deputy Director. These agreements do not pertain to proprietary for-profit schools.

Agreements with Institutions of Higher Education (IHEs) for cost sharing in the provision of auxiliary aids and services

The Rehabilitation Act requires VR agencies to establish interagency agreements with public universities, colleges and technical schools (collectively known as Institutions of Higher Education or IHEs) for cost sharing in the provision of auxiliary aids and services.

Kansas VR has agreements with all public IHEs overseen by the Board of Regents. Washburn University is also included.

The Kansas Legislature also asked RS to establish agreements with private non-profit IHEs. Kansas has agreements with all of the private non-profit IHEs affiliated with the Kansas Independent College Association.

These agreements do not change the standard training policies regarding payment of tuition and other expenses related to higher education. The agreements pertain only to cost sharing for auxiliary aids and services.

Templates of these agreements and calculation worksheets are in the Resources. Copies of the actual signed agreement for a specific IHE are available by contacting the Deputy Director.

These agreements do not pertain to proprietary for-profit schools.

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PART Sign Language Interpreter Services

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Part 14 Sign Language Interpreter Services

Fees for sign language interpreting and related conditions such as minimum appointment times, coverage areas, mileage, cancellation policies and specializations, are governed by State Contracts issued by the Kansas Department of Administration. RS staff may schedule directly with the vendors on state contract.

Updates to this information about the state contracts are pending. Meanwhile the contracts may be found at:

https://supplier.sok.ks.gov/psc/sokfsprdsup/SUPPLIER/ERP/c/NUI_FRAMEWORK.PT_LANDINGPAGE.GBL?&

Search for contractors using the key words: sign language interpreting.

RS will schedule and authorize payment for certified and qualified sign language interpreters for appointments with people who are deaf or hard of hearing who use sign language for communication. They may require at least 24 hours' notice to find a qualified interpreter. The Kansas Commission for the Deaf and Hard of Hearing (KCDHH) may identify qualified interpreters and schedule them as a purchased service.

Written communication with persons who are deaf or hard of hearing is acceptable only:

- If used to set up appointments;
- If used to inform the person that an interpreter will be present at the appointment; or
- If specifically requested by the person who is deaf or hard of hearing.

RS is allowed to use sign language interpreters that are not on the state contract as long as we have not spent more than \$5000 during the state fiscal year with the specific sign language interpreter statewide. If \$5,000 is spent with a sign language interpreter, we would be required to use one of the contractors on the master statewide list.

Hourly fee not to exceed \$52 for level IV and V level certification without exception approval through administration office for interpreters not on state contract.

Rehabilitation Services (RS) Procedures

Interpreters must be on the state registry at the KCDHH, as required by state law, H.B. 2257 effective 7-1-93.

In situations where an interpreter is not listed on the state registry, the interpreter must contact KCDHH at (785) 267-6100 or toll-free at 1-800-432-0698 to register. Registration may be made over the phone by providing name, address, telephone number, certifications, and the sign language or sign systems that the interpreter can use, or by completing and mailing a registration card. The most

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common sign language or sign systems are American Sign Language (ASL), Pidgin Sign English (PSE), Conceptually Accurate Signed English (CASE), Sign Exact English (SEE) II, and oral.

When calling to schedule an interpreter, the following information is required:

- Date, time and location of appointment or appointments.
- Estimated length of appointment. When appointments are expected to last more than 3 hours, rest breaks for the interpreter will be required; or two interpreters rotating every 20 to 30 minutes may be scheduled.
- Topic or type of setting.
- Name of the individual(s), language preference or the need for special communications, specific interpreter selected by the individual(s), if known and appropriate. Note: Family members, roommates or individuals with other personal relationships may not be appropriate to use as interpreters. Staff should use discretion and consult with the client if possible. The Interpreter Code of Ethics requires the interpreter to decline the job if inappropriate.
- Contact person's name and phone number.
- Billing information such as the party responsible for payment, service authorization number or special billing instructions.

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SECTION Service Delivery
PART Placement

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Part 15 Placement

Placement

The counselor may provide or facilitate placement services for clients.

Disclosure of disability information to employers: Both the Rehabilitation Act and the Americans with Disabilities Act (ADA) restrict counselor use of confidential information with employers and in any pre-employment inquiries by employers.

As the employer only needs to know whether the client has any functional limitations which will impact on job tasks, the counselor must limit the discussion to any potential functional limitations that will impact on the client's ability to perform the job tasks or functions identified by the employer. This discussion may also include identifying reasonable accommodations which have been provided or which could be provided.

An employer cannot ask whether the applicant is a person with a disability. An employer cannot ask about the nature or severity of the disability. However, the employer may make pre-employment inquiry into an applicant's ability to perform job-related tasks or functions. The employer may ask the applicant to demonstrate or explain how, with or without reasonable accommodation, he or she would perform job-related functions.

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PART Job Modifications

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Section 3 Service Delivery

Part 16 Job Modifications

Job Modifications

With the passage of the Americans with Disabilities Act (ADA), employers now have a greater responsibility in providing reasonable accommodation for qualified workers who are disabled. Rehabilitation Services (RS) staff need to negotiate with employers in providing assistive technology to effect job modifications which make a job more accessible. Employers are generally responsible for providing the “tools of the trade” which are related to the company’s function such as computer hardware and software.

RS staff, the client and the employer need to mutually decide who will purchase assistive technology, such as voice synthesizer, screen magnifier, or other device, which will make the computer, other company equipment or job function accessible. If the job modification for the worker who is disabled makes the job function easier for most employees, then the employer should bear a greater share or all of the cost. Smaller companies may have limited resources for reasonable accommodation. In this instance, the agency would want to share or be totally responsible for the cost to secure placement of the client.

Generally, exterior entry into the business or worksite is an employer’s responsibility.

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SECTION Service Delivery
PART Vehicle Modifications, Purchase and Repair

SECTION NO. 3-17
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Part 17 Vehicle Modifications, Purchase and Repair

Vehicle Modifications

Vehicle modification may be provided if necessary, to enable the individual to participate in IPE services or achieve an employment outcome. Under these circumstances, such modifications are available to any eligible client, regardless of significance of disability, as long as the individual is in an open category of service through Order of Selection. Prior to authorizing such services, the counselor and individual should discuss whether the individual owns or has use of another vehicle which would already meet the individual's transportation needs. In some instances, it may be appropriate to secure a driving evaluation to determine whether the individual will be capable of driving the vehicle once it is modified. Consideration of the age and mileage of the vehicle should be made before authorizing the service, and in some instances, it may be appropriate to secure a mechanic's inspection prior to authorizing the service. Please work with your regional management team to ensure you have all the necessary documentation for this purchase (driver's evaluation, type of vehicle, vehicle title, justification for the purchase, modifications, projected costs, etc.). The counselor will also need to identify if the client already owns the vehicle that is needed to be modified, client is looking to purchase the vehicle, or if the vehicle identified has already been modified. There are different purchasing guidance for each situation. After all the information has been gathered, you will submit to Administration Office to assist with the next step with purchasing.

Vehicle modification is an assistive technology service. Use Code 412. The counselor spending authority for vehicle modifications is \$13,500 for the life of the case. Use State Contract #48100.

Vehicle Purchase

Vehicles may be purchased as a transportation service for clients if necessary, to carry out the rehabilitation plan or achieve the employment outcome.

- Purchase of vehicles may be considered ***only if no other cost-effective transportation alternative exists.***
- Purchase of vehicles may be considered if the total cost of the purchase and related fees would be less than alternative monthly transportation fees when considered over the life of the case.

The feasibility of other alternatives, such as public transportation or transportation provided by family, co-workers, friends or other students or the use of drivers, must be explored and documented in the record of services.

Under such circumstances, the purchase of a vehicle is available to any eligible client, regardless of the significance of the disability, as long as the individual is in an open category of service through Order of Selection.

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If the counselor and client determine that purchase of a vehicle is the only alternative, the following procedures shall be followed:

- All transportation services are support services and can only be provided in conjunction with non-support services. (Vehicle purchase is not a stand-alone service.) (Vehicle modifications are assistive technology, so this provision pertaining to support services does not apply.)
- The client should have a valid driver's license or have access to a licensed driver prior to purchase of the vehicle.
- The vehicle shall be inspected by a professional auto mechanic who is not involved in the sale prior to the purchase. RS will pay for this inspection.
- The current Counselor's spending authority for purchase of vehicles is \$3,500 for the life of the case. Use Code 810. See Section 3, Part 8.
- RS may pay for sales tax and insurance as additional expenditures separate from the purchase price.
- The vehicle must be paid for in its entirety. RS funds may not be used as a down payment; but RS funds may be used in conjunction with other resources provided by the client.
- RS will authorize payment to the seller of the vehicle.
- The client will have title to the vehicle.
- During the life of the case, the client may not dispose of the vehicle without prior written approval of the counselor. The client will be required to sign the Vehicle Purchase Agreement. Form Part 48.
- If RS purchases the vehicle, or if the client already owns a vehicle, RS may pay for liability insurance, personal property tax and the license plates/vehicle registration during the life of the case if needed to assure that the client can participate in his/her IPE services or to facilitate achievement of the employment goal. Only the minimum legally required liability insurance will be funded by RS.

RS Policy on Vehicle Repairs

There may be instances when repairs are needed for a vehicle owned by the individual. If use of the vehicle is essential for the individual's participation in the IPE or for achievement of the employment outcome, vehicle repairs may be authorized if no other source exists to finance the needed repairs.

Vehicle repair is a support service (transportation) and may only be provided in conjunction with non-support services. The Counselor's spending authority for the life of the case is \$1,000.

Use Code 830.

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Purchase of All Terrain Vehicles (ATVs)

ATVs may be purchased when necessary for participation in the IPE or achievement of an employment outcome, and no reasonable alternative exists. ATV purchase is an assistive technology service. Use Code 410. The Counselor's spending authority for all assistive technology services is \$4,999 for the life of the case.

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SECTION Service Delivery
PART Maintenance

SECTION NO. 3-18
PUBLISHED 03/21

Section 3 Service Delivery

Part 18 Maintenance

Maintenance (increased costs)

Synopsis of federal regulations and requirements

Maintenance means monetary support provided to an individual for expenses, such as food, shelter and clothing, that are *in excess of the normal expenses of the individual* and that are necessitated by the individual's participation in an assessment for determining eligibility and vocational rehabilitation (VR) needs or the individual's receipt of VR services under an Individualized Plan for Employment (IPE).

Reference: 34 CFR 361.5(b)(35)

Rehabilitation Services policy

Maintenance is a support service and will be provided only in conjunction with core VR services. (Refer to Glossary Section 8 for the definitions of core and support services.)

Maintenance may not be used to fund an individual's normal living expenses. There are normal living expenses for food, shelter and clothing associated with all individuals, whether the individual himself or herself has directly paid for those expenses, or whether those expenses have been paid by another individual.

Maintenance is not income or wage replacement. A change in resources (such as client wages or family income) is not the same as increased expenses (in excess of the normal expenses of the individual) due to participation VR. Therefore a change in a client's resources does not result in automatic maintenance payments.

The use of maintenance is limited to the additional expenses in excess of the normal expenses that are necessitated by the individual's participation in vocational rehabilitation (VR).

Client responsibility

All clients, including persons who are recipients of Supplemental Security Income (SSI), beneficiaries of Social Security Disability Insurance (SSDI) or recipients of other forms of public assistance, are responsible for their normal expenses.

Individuals who are homeless, who have no obvious means of support, or who have insufficient means of support should be immediately referred and assisted to apply for available public assistance benefits and/or for resources available through state, community or faith-based organizations. Maintenance is not an income replacement service. Therefore, provision of maintenance *for normal expenses* in these circumstances is not consistent with the federal requirement limiting maintenance costs to those in excess of the individual's normal expenses, and is therefore not allowable.

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Analysis to determine the need for maintenance

The amount of maintenance must be justified based on the client's specific subsistence expenses that are in excess of the normal expenses of the client as a result of his/her participation in VR. Subsistence includes food, shelter (including housing and utilities) and clothing. Utilities include natural gas, electricity, propane, trash, water, cable, internet, telephone and cell phone.

Use the Maintenance Analysis Worksheet to calculate normal and excess expenses. RS shall be responsible for the excess expenses.

- Analyze the individual's normal expenses. (To identify excess expenses, you first must know normal expenses.) This can be done by providing receipts or other documentation for food, shelter and clothing. If the individual is not able to or refuses to provide documentation, RS will use a "deeming" process to determine normal expenses.
- Analyze the costs necessary to participate in the IPE and determine if there is an amount in excess of the normal living expenses.
- The excess (cost above the normal expenses) is the allowable VR maintenance service.
- Knowing that it is not always possible for a consumer to provide documentation about their normal expenses, the following procedures will be used:
 - For persons receiving SSI or SSDI, their normal expenses would be deemed to be the lesser of 30% of their actual monthly SSI and/or SSDI, or 30% of the average monthly SSI amount.
 - For persons who are not eligible for SSI or SSDI, their normal expenses would be deemed to be 30% of the average SSI benefit.
 - The average SSI benefit may be found in Table 1 at:
https://www.ssa.gov/policy/docs/statcomps/ssi_monthly/
 - As of August 2020, the average monthly SSI is \$577.78.
 - 30% of \$577.78 is \$173.33.

Spending authority

The counselor's spending authority for basic subsistence (such as food, shelter, and clothing) may not exceed \$450 per month. Utilities are included under the category of shelter, and include natural gas, electricity, propane, trash, water, cable, internet, telephone and cell phone.

Room and board at college (whether on or off campus) is considered maintenance and must meet the criteria established in this policy. Use Service Code 700.

If the conditions for maintenance are otherwise met (increased expenses due to participation in VR), maintenance may be paid during job search/placement until the first full month of pay has been received. Maintenance payments in such circumstances may not exceed three months. Additional months require the standard exceptions process (Rehabilitation Manager and/or Program Administrator approval).

The counselor's spending authority for academic enrichment expenses is \$50 a semester. Enrichment activities are supplementary activities and programs that contribute to the learning objectives of the courses being taken or the degree being pursued. Field trips and weekend

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seminars are typical examples. Club memberships and out-of-state activities are specifically excluded.

The counselor's spending authority for interview and work clothing may not exceed \$300 for the life of the case. Use Service Code 725. The standard exceptions process (Rehabilitation Manager and/or Program Administrator approval) must be used for amounts exceeding this spending authority.

There are no automatic exceptions. The standard exceptions process (Rehabilitation Manager and/or Program Administrator approval) must be used for amounts exceeding the spending authorities identified in this policy.

Payment methods

Maintenance funds may be reimbursed to clients or paid in advance, in accordance with the policies established in Section 6, Part 2.

Maintenance is not income

Maintenance should not be reported to the Social Security Administration as income.

Reference: Social Security Program Operations Manual SI 00815.050

Maintenance is not considered income and is exempt from reporting for all DCF/Economic and Employment Services programs.

Documentation

The counselor is responsible to maintain the documentation of client-specific expenses and the Maintenance Worksheet in the case file.

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SECTION Service Delivery
PART Child Care

SECTION NO. 3-19
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Part 19 Child Care

Payment for child care is an allowable vocational rehabilitation (VR) expenditure when all three of the following conditions are met:

- Other core VR services are being provided. (Child care is a support service and therefore may not be provided as a stand-alone service. Support services may be provided only in conjunction with core VR services.)
- Child care is necessary to allow the client to participate in the VR process or to participate in IPE services.
- Child care services may be provided only for the legal dependents of the client.

Authorization and payment procedures

Child Care payments, when allowable according to RS Policy, will be made using the standard authorization and payment process on KMIS. Payments should be made directly to the child care provider.

Child care authorizations shall be consistent with the fee structure established through Economic and Employment Support for the Department for Children and Families. RS payments for child care may not exceed this fee/rate schedule. This fee/rate structure may be found at:

http://content.dcf.ks.gov/EES/KEESM/Appendix/C-18_ProviderRateCht.pdf

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SECTION Medical Services
PART Hearing Aids

SECTION NO. 4-1
PUBLISHED 03/21

Section 4 Medical Services

Part 1 Hearing Aids

Rehabilitation Services (RS) Policy and Procedure

Counselors shall discuss provision of hearing aids with clients and help clients determine which aids and audiological services best meet their needs. Clients (age 18 or older) who do not wish to wear aids when there would be no improvement in the ability to understand speech may make that determination. Or they may elect to use only one hearing aid for sound awareness. They may make this choice even though an audiologist or licensed hearing aid specialist may have recommended two aids. Counselors should assure that clients have the information needed to make an informed choice in such circumstances. Trial periods may be appropriate to help some clients determine if they can benefit from aids.

Clients should be shown the Client Hearing Aid Satisfaction Questionnaire. (Forms Part 25). It should be explained that no payment will be made to the vendor until the client is satisfied. The client should complete the questionnaire and the audiologist should return the completed questionnaire to RS along with the billing.

Purchase of hearing aids should be done within an Individualized Plan for Employment (IPE), either as a service provided to an accepted client (Statuses 14, 16 or 18) or as part of an extended evaluation (Status 06). Hearing aids should not be provided in Status 02.

Prior to dispensing a hearing aid, a hearing evaluation must be completed by an audiologist or a licensed hearing aid specialist if an audiologist is not available in the community. The hearing aid provider may recommend a medical examination by a licensed physician as required by the federal Food and Drug Administration to assure that all medically treatable conditions which may affect hearing are identified and treated before the hearing aid is purchased. The FDA requires the exam to be completed within the previous six months. Such a medical exam is required for all children. The FDA regulations permit a fully informed adult (age 18 or older) to sign a waiver statement declining the medical evaluation. Section II of the Hearing Aid Forms lists the eight medical conditions which indicate that referral for a medical exam is appropriate.

Hearing Aid Forms

Hearing Aid Provision, Medical Examination - Section Ia: If the hearing aid provider discovers a hearing disorder with an unresolved medical problem, a medical exam by a physician is required. Persons under the age of 18 must be examined by a physician prior to purchasing a hearing aid.

Hearing Aid Provision, Hearing Examination - Section Ib: This examination must be completed prior to dispensing a hearing aid. This section is completed by a clinical audiologist [Certificate of Clinical Competence (CCC-A) and state licensed] or a hearing aid specialist licensed to dispense hearing aids if an audiologist is not available in the community. This examination should consist of two CPT procedures:

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PART Hearing Aids

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- Comprehensive audiometry threshold evaluation and speech recognition
925570000 at \$52.93
- Tympanometry (impedance testing)
925670000 at \$7.56

Hearing Aid Provision, Certification for Hearing Aid Dispensing - Section II: The hearing aid provider identifies the hearing aid recommended and expected benefits and also certifies that the client has been advised to consult with a licensed physician (preferably an ear specialist) before the hearing aid is dispensed if the client has any of the eight medical conditions listed.

Hearing Aid Evaluation - Section III: The vendor evaluates the hearing aid fitting near the end of the 30-day trial period. The vendor should examine the client. If the client, vendor or counselor determine that the hearing aid is unsatisfactory, the vendor is to be paid only the trial fee for \$50 for each hearing aid returned.

Client Hearing Aid Satisfaction Questionnaire - Section IV: The client completes this questionnaire after the trial period. This questionnaire, *Hearing Aid Evaluation - Section III Form* and the manufacturer's invoice are submitted to the counselor for payment.

The fee schedule separates costs for dispensing and for the hearing aid equipment.

- When a device is returned as unsatisfactory, RS will pay only \$50 (no dispensing or equipment fees).
- The fee for the hearing aids will be reimbursed at the manufacturer's invoice cost. A copy of the actual invoice is required and should be provided by the vendor attached to the billing statement.
- The dispensing fee increases as the complexity of the device increases. A more complex device requires additional vendor equipment for adjustments and more follow-up visits.

Tier I: Traditional linear hearing aid
Estimated cost for hearing aid*: \$400
Dispensing fee for the first aid: \$250
Dispensing fee for the second aid: \$100

Tier II: Advanced signal processing aid
Estimated cost for hearing aid*: \$450
Dispensing fee for the first aid: \$480
Dispensing fee for the second aid: \$200

Tier III: Digital programmable aid
Estimated cost for hearing aid*: \$850
Dispensing fee for the first aid: \$800
Dispensing fee for the second aid: \$400

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** Use this estimated cost to prepare the authorization. This may be adjusted to a higher or lower cost at the time of payment depending upon the actual invoice cost. Note that economic need procedures must be applied to the purchase of hearing aids, and clients will be expected to contribute according to their ability to do so.*

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SECTION Medical Services
PART Medical Procedures

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Section 4 Medical Services

Part 2 Medical Procedures

Correct Medicaid Health Care Finance Administration (HCFA) and Current Procedural Terminology (CPT) codes are used to determine the amount to be authorized/paid for services, unless otherwise specified. With the exception of fees authorized in this manual for specific services, RS pays the Medicaid rate for medical services provided to clients as part of their IPEs. Medicaid payment is payment in full and no additional payment is authorized. Providers shall not request or accept additional payment from clients.

Medical card/other insurance: If the client has a medical card or other medical insurance, either Medicaid or the insurance must be used before Rehabilitation Services (RS) may pay. A Medicaid payment is payment in full and no additional payment may be made. If private insurance pays part of the bill, RS will pay the balance that would be charged the client up to the maximum Medicaid allows for a specific service. Providers shall not bill for any “write-offs.”

Payment: The physician or medical provider should provide the services authorized and should notify the counselor if any additional services are to be provided. Although RS may authorize a service by procedure code and description, the medical provider may change the code to indicate services actually provided in accordance with allowable established codes. If the code billed does not appear on Kansas Management Information System (KMIS) either with or without a rate, it is not valid. If the procedure code supplied by the provider allows less than the amount authorized, the lesser amount is paid.

All medical providers should be able to provide the proper procedure code (including modifiers necessary) for services they provide. Staff should not hesitate to request this information. All Kansas physicians and providers should have this information since it is needed to file insurance claims.

Non-covered Medicaid services: KMIS shows the amount Medicaid allows for a specific procedure. If the procedure code shows a blank, zero, seven or nine in the allowed cost, Medicaid does not cover the services or has special requirements. RS staff should verify with the provider that the non-covered Medicaid procedure code is the service actually provided. If the service was actually correct, the RS Administration Office should be contacted about the rate.

Anesthesia: All anesthesia services are paid by points indicated in the surgical procedure code with the modified code “IND” on KMIS. The “IND” number relative value (procedure code plus modifier) plus time in units of 15 minutes are added and multiplied by a conversion factor of \$19.50.

Anesthesia Example: The procedure code of 66984-3000 has an “IND” code of 8 (relative value). If the time used of 121 minutes is divided by the 15 minute unit to determine time points, the time points would equal 9. A partial time unit is considered a full unit. Together the relative units of 8 plus the time units of 9 would equal 17 units times \$19.50.

Medical Report/Definitive- \$20

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- A report the physician provides in response to a counselor's request. This report summarizes information rather than copying medical records only.

Medical/Hospital Records- \$10

- RS counselors pay as billed up to a maximum of \$10 for medical records, unless a regional exception has been authorized by the RS Program Administrator.
- Government agencies such as state hospitals, Veterans Administration, etc. provide records without charge.
- It is best practice to request only the most recent specific records needed for VR eligibility and planning purposes.

Medical Records Search Fee- \$1.00 per quarter hour or portion thereof.

Payment for health insurance premiums

This is an allowable VR expense, if it is a cost-effective alternative to paying actual medical costs. An analysis of the cost effectiveness and search for comparable benefits must be included in the record of services.

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SECTION Medical Services
PART Medical Examinations

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Section 4 Medical Services

Part 3 Medical Examinations

General Medical (GENM) up to a maximum of \$70 fee

- This includes a comprehensive history and physical exam with decision making of average complexity and is to include functional physical limitations and comprehensive report (all information completed on the general medical exam, including range of motion for low back questions). The counselor completes the Health Assessment Questionnaire as part of the referral information. This fee will be paid for the average, traditional medical examination and will be generally used for the payment of family practitioners and internal medicine practitioners providing the general medical exam.
- Primarily used by Disability Determination Service (DDS) staff, this exam is also used for a basic mental status exam provided by a psychologist. This exam is a clinical interview that provides a diagnosis and assesses the following areas of psychological functioning: history, thought content, affect, insight and judgment, intelligence, attention, concentration, appearance and behavior.
- Rehabilitation counselors should not use the GENM for purchase of psychological testing for intelligence and personality assessment. Refer to the psychological testing section Section 4, Part 5.

Intermediate Examination (INTM) with payment up to a maximum of \$85

- This examination is the same information as the general medical exam with additional information for a specific functional limitation not provided by a general medical exam. Also, this can be used in areas where the medical exam reimbursement is not adequate. Primarily, this examination fee and code are used for the following physicians specialties: internal medicine, rheumatology, physical medicine, pulmonary, nephrology and pediatrics.

Specialist Examination (SPECM) up to a maximum fee of \$110

- This examination includes a comprehensive specialty history and physical with decision making of high complexity and to include functional physical limitations and a comprehensive report.

CODES

Cardiology CARDI
Neurology NEURO
Orthopedic ORTHO
Otolaryngology OTOLA
Pediatric Subspecialty PEDIA

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Physiatric PHYSI
Psychiatry PSYCH

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SECTION Medical Services
PART Miscellaneous Medical Services

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Section 4 Medical Services

Part 4 Miscellaneous Medical Services

Range of motion, back and extremities up to a maximum of \$35

When available medical information does not include this information, purchasing a range of motion analysis versus a general medical exam is more cost effective. When a rehabilitation counselor purchases a general medical exam, the range of motion information is to be provided by the examining physician. The general medical exam with its range of motion provides an alternative to an orthopedic specialist exam.

Visual

- Basic eye examination by an optometrist. Not to exceed \$106.75 OPTOM
- Eye examination and diagnosis by an ophthalmologist. Not to exceed \$106.75 OPHTH
- Low vision examination \$125 LVEX
- Goldman Visual Field examination \$70 GOLDM

Eyeglasses

- Kansas Department for Children and Families (DCF) prudent person concept with maximum rate of \$100 for frames. May use the WG modifier and pay "as billed" if needed.

Mental health

- Mental Health Centers are paid at the same rate as other providers for the same services.

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SECTION Medical Services
PART Psychological Testing

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Section 4 Medical Services

Part 5 Psychological Testing

Records from current and prior treating and evaluation sources should be obtained prior to ordering new psychological evaluations. As a general policy, the more extensive the treatment history, the less in-depth psychological evaluations are needed. If questions arise regarding the adequacy of the records or the need for further psychological evaluation, when feasible counselors and Program Administrators are encouraged to secure input from their District Psychological Consultant or the State Psychological Consultant.

With each referral for psychological evaluation, there must be documentation of the referral questions and rationale for the referral. Referral questions may typically appear in a referral letter to the psychologist whereas the rationale for the referral may only appear in the case record narrative. Referral questions and the rationale statement could also be included in the referral letter to the evaluating psychologist.

All reports must include the following information:

1. Date the testing was administered.
2. Who administered the testing?
3. Person who interpreted the testing and wrote the report submitted.
4. Time spent administering each test.
5. The total time spent on interpretation and reporting.

The following are psychological evaluation guidelines. Also included are common reasons for authorizing these procedures and maximum charges that are allowed. Individual psychologists may substitute their own preferred assessments to address the counselor's referral questions. The hourly rate for these services is \$117. This means it includes service codes 170, 320 and 340. For psychotherapy services, please remember that services are authorized in increments of:

20-30 minutes - \$58.50

45-50 minutes - \$117

Mental status examination

- This is a clinical interview to confirm functional limitations for persons with a history of mental illness. This also may be used as an initial examination for clients who have reported work problems or presented unusual behavior during the initial interview with the counselor. If the mental status exam results indicate intellectual and personality assessments are needed, then additional evaluations would be authorized. This level of examination may be sufficient for rehabilitation facility referrals which need a current assessment of an already diagnosed disability. The mental status examination is an appropriate evaluation when the client's impairments appear overtly severe and when there is extensive but not current treatment history.

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PART Psychological Testing

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Intelligence testing up to a maximum of 2.5 hours

- This includes the Weschler Adult Intelligence Scale-Revised and the Stanford-Binet. It will not require the same amount of time to administer this testing to all vocational rehabilitation (VR) clients. In particular, clients with a diagnosis of mental retardation typically require much less time to administer this testing. Intellectual testing should only be ordered if there is a reason to suspect an intellectual deficit or learning disability. Intellectual testing may also be appropriate when a client is interested in pursuing an academic or training program that requires a certain level of cognitive ability; however, other sources of functional information such as school transcripts and prior work history should be utilized before ordering intellectual testing. IQ testing done after the age of 16 is considered to be stable throughout a person's adult life, assuming the original testing was a valid and reliable estimate and there were no intervening injuries or disease process that could result in a decline in cognitive functioning.

Standardized Achievement Testing up to a maximum of 2.5 hours

- In cases where a learning disability is suspected, the Woodcock-Johnson Achievement Battery is recommended. When achievement deficits are believed to result from academic underachievement or lack of education, the Wide Range Achievement Test may be sufficient (maximum of 1 hour).

Personality Assessment up to a maximum of 1 hour per test or 2 hours

- In situations where there is reason to suspect that a psychiatric impairment will interfere with work function or completion of a training or academic program, personality assessment such as the MMPI (1 hour) and/or projective testing such as the Rorschach or TAT (1 hour each) may be appropriate, particularly if there is a minimum of existing information.

Substance Abuse

- Refer to the local RADAC for assessment.

Neuropsychological assessment up to a maximum of 8 hours

Neuropsychological evaluation (such as the Halstead Reitan and Luria Nebraska) should be done very sparingly but may be appropriate in complex cases of head injury or learning disability.

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SECTION Medical Services
PART Psychotherapy

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Section 4 Medical Services

Part 6 Psychotherapy

Psychotherapy should only be funded by vocational rehabilitation (VR) when it is recommended by a licensed psychologist or psychiatrist and is provided by a licensed mental health professional. Psychotherapy by unlicensed professionals can only be funded if a licensed professional is providing supervision and is assuming full responsibility. The supervision arrangement needs to be documented in writing and all progress reports must be co-signed by the supervisor.

Because the definition and nature of psychotherapy varies greatly among qualified providers, it is often difficult to determine exactly what is being provided when psychotherapy has been authorized. Therefore, before therapy is authorized a statement should be obtained from the treating source that specifically outlines the following information:

1. The type or types of treatment modalities that will be employed.
2. The anticipated length of treatment that will be needed.
3. Treatment goals and the manner in which progress will be assessed and reported.
4. A statement of how the proposed treatment specifically relates to the vocational objective.
5. Prognosis and expected outcome.

Under most circumstances, VR should fund a maximum of 12 psychotherapy sessions (one hour sessions weekly over 12 weeks usually); however, an absolute limit of 12 psychotherapy sessions may be problematic because it may unfairly restrict the use of some potentially effective treatment modalities and may not adequately address the needs of clients with severe psychiatric impairments. Therefore, on an individual basis, additional psychotherapy sessions beyond the initial 12 session limit may be authorized as follows:

- 13 - 24 sessions require Regional approval. Each RS Program Administrator will establish a procedure for routing such exception requests through the RS Managers, RS Program Administrator or both. Use of the Exceptions Request Form (see [Forms Part 54](#)) is required..
- 25 - 48 sessions require approval by the State Psychological Consultant or Deputy Director.
- No more than 48 sessions can be funded.

Funding by other sources (i.e. self-payment, other insurance, or Medicaid-Medicare) would not be counted toward this limit. Also, once the 48-session limit is reached, there is no requirement that the client's case be closed. Other VR services could certainly continue to be provided if needed, although in such cases it may be advisable to seek input from the District and/or State Psychological Consultant.

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PART Psychotherapy

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Rates for psychotherapy provided by licensed physicians or psychologists:

20-30 minutes - \$58.50

45-50 minutes - \$117

See other Medicaid codes for services provided by licensed mental health professionals who are not physicians or psychologists.

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SECTION Medical Services
PART Dental Services

SECTION NO. 4-7
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Section 4 Medical Services

Part 7 Dental Services

Dental services are provided when the condition of the teeth and gums constitutes or contributes to a physical or mental disability which creates an impediment to employment. Dental services may be needed because of other disabilities which contribute to dental problems.

A program of general dental care is not allowed.

During the rehabilitation process a client may require preventive dental work such as filling of teeth. The intercurrent illness authority (including the cost cap) may be used for treatment of such acute dental problems which prevent continuation of the rehabilitation plan.

Some issues to consider when determining whether or not to provide dental services are:

- Many dental procedures can be successfully completed at different levels of care.
- Many dental procedures require specific, sometimes long term, follow-up care. Counselors and clients should know the extent of services necessary to bring about a desired outcome before beginning the process.
- Some dental procedures are temporary in nature and will require additional work in the future.
- Many dental procedures require the client to maintain a regimen of personal oral hygiene.
- When authorizing such services, the counselor should assure that the client understands the need to maintain adequate oral hygiene. It may be necessary to provide education on oral hygiene and the consequences of neglect, as well as assistance in developing the proper hygiene regimen, especially for clients who have a history of poor dental hygiene. One option for provision of such education is referral to an oral hygienist.

Dental services may be paid up to the usual and customary rate less 10%. This RS rate is subject to future change based on analysis of typical fees and usage. The appropriate CPT and service codes for dental procedures are required, just as with medical services.

The counselor may authorize fees above this rate if the total cost would be less expensive than the RS rates plus travel expenses to another community. In these situations, the cost savings must be noted in the narrative.

When dentists are not willing to provide services at the RS rate, an exception request must be approved. Each RS Program Administrator will establish a procedure for routing such exception requests through the RS Managers, RS Program Administrator or both. Use of the Exceptions Request Form is required.

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PART Dental Services

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Special procedures for dental surgery:

- The surgery analysis described above is required for oral and maxillofacial surgeries with American Dental Association (ADA) procedure codes D7260 to D7999.
- The surgery analysis is NOT required for ADA procedure codes D7000 to D7259. Therefore, most extractions will not require completion of the surgery analysis.
- The Counselor must get the ADA code from the dentist prior to authorizing the service in order to determine whether the surgery analysis is required.
- See Resources Part 29 for a copy of the ADA code listing.

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SECTION Medical Services
PART Medical Procedure Codes

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Section 4 Medical Services

Part 8 Medical Procedure Codes

These types of procedure codes are used to obligate and pay medical expenditures.

- CPT Codes - Current Procedural Terminology (National Codes) - Physician Services.
- HCFA Codes - Health Care Finance Administration Common Procedure Code System (National Codes) - for use by a variety of entities; i.e., dental codes have a D prefix.
- Local Codes (Kansas Codes) - Eyeglasses are one example of local codes that have a Y prefix.

The three types of procedure codes listed above may be used by different providers to identify services provided to RS. Since all providers in Kansas must use the above codes to bill an insurance company (including Medicaid), the provider will be familiar with the codes for services they provide.

In some circumstances involving physician or hospital services, the procedure code may be located in the CPT manual using the following procedures:

- In the index, alphabetically find the procedure to determine the location of the manual. (Except for the physician office visits, physician hospital visits, and physician consultations (procedure codes 99201 through 99499) in the front of the manual, all other codes are in numerical order.
- If the procedure code needed is available, enter the code number and four zeros in KMIS to determine the rate.

Procedure code modifiers: A modifier code is a two (2) digit code that identifies a specific type of service, a variation of the service identified by the base code, for example, assistant surgeon, anesthesia.

The following are HCPCS modifiers:

PA Physicians Assistant

TC Technical Component - Applies to taking of the x-ray

WC Charge for clinic room and supplies for surgery not performed in a hospital.

WG Optical Services (Optometrists and Opticians) - Purchase of eyeglasses.

WP Specified Outpatient Procedures

26 Professional Component - Such as interpretation of an x-ray y a physician.

30 Anesthesia Services (General) (See the "IND" code on KMIS for procedure points).

50 Bilateral Procedures

80 Assistant Surgery

EXAMPLE: Anesthesia Services for an Appendectomy 449503000

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Base Code for Appendectomy 44950
Modifier for Anesthesia Services 3000

EXAMPLE: Professional Component of Chest X-ray Procedure 710102600

Base code for Chest X-ray 71010
Modifier for Professional Component 2600

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Medical Procedure Codes

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SECTION Medical Services
PART Hospitalization and Other Hospital Services

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Section 4 Medical Services

Part 9 Hospitalization and Other Hospital Services

Inpatient and Outpatient Services

Reimbursement for inpatient and outpatient medical services provided by hospitals and surgical centers will be made at a variable discount rate based on the facility's Peer Group Classification. The discount rate will be applied to the facility's usual and customary charge.

Peer Group 1 — 15% Discount

Facilities in the following communities:

Kansas City
Lawrence
Olathe
Overland Park
Shawnee Mission
Topeka
Wichita

Peer Group 2 — 12.5% Discount

Facilities in the following communities:

Atchison
Augusta
Coffeyville
Dodge City
El Dorado
Emporia
Fort Scott
Garden City
Great Bend
Halstead
Hays
Hutchinson
Junction City
Leavenworth
Liberal
Manhattan
Newton
Paola
Parsons
Pittsburg
Salina
Winchester

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Peer Group 3 – 10% Discount

All other facilities, including out-of-state facilities
All specialty hospitals, such as rehabilitation hospitals

Charges in excess of \$40,000

In addition to the variable discount rate based on Peer Group Classification, an additional 5% discount will be applied to all charges that exceed \$40,000.

Allowable charges

Allowable charges may include room charges, supplies used, lab or x-ray services. However, if a client is referred to a hospital for x-rays but is not actually admitted as an inpatient or outpatient, the x-rays will be paid by HCFA or CPT codes and at the rates allowed for those codes. If the hospital bills for physicians such as a hospital call or surgery, these services will be paid at by HCFA or CPT codes and at the rates allowed for those codes.

Durable medical equipment supplied by a hospital or surgical center

Items such as wheelchairs or crutches, when supplied by a hospital or surgical center and related to a client's inpatient or outpatient care, and billed with a charge of \$250 or more will be reimbursed at invoice cost plus an additional charge of no more than 50%. Verification of invoice cost must be attached to the bill when it is submitted for payment.

Use of state consultant

If RS staff encounter difficulties in getting access to needed services for VR clients, or if staff need assistance in negotiating reasonable fees for specific services, they may contact the State Medical Consultant for assistance.

Exceptions to hospital discount rate schedule

Before exceptions are allowed, staff must first seek assistance in negotiating from the State Medical Consultant. Such negotiations may form the basis for the RS Manager or Regional Program Administrator's decision to approve or deny requests for exceptions to this policy. Each RS Program Administrator will establish a procedure for routing such exception requests through the RS Managers, RS Program Administrator or both. Use of the Exceptions Request Form (see [Forms Part 54](#)) is required.

Anesthesia and other related expenses

When including surgery as an IPE service, the counselor must analyze and document the follow factors:

- Prognosis and doctor's written recommendation.

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- Medical necessity.
- Analysis of how the surgery will correct, stabilize, or reduce the progression of the disabling condition, if appropriate.
- Client's willingness to adhere to lifestyle changes, as appropriate, before and after surgery.
- Client's prior efforts to resolve the issue using alternatives to surgery, if such alternatives are available and medically feasible.
- Availability and application of comparable benefits (unless the client requires the service immediately because of extreme medical rush.)
- Analysis of how/why the surgery is required to reduce or minimize an impediment to employment and the impact of this service on the client's ability to achieve employment.
- Analysis of whether there are feasible alternatives.

Surgery

Special conditions apply to the provision of surgery. See Section 4 / Part 11.

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SECTION Medical Services
PART Medications

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Section 4 Medical Services

Part 10 Medications

RS pays up to the usual and customary price.

Use of generic equivalents

Whenever possible, it is required that a generic equivalent be substituted for a more expensive brand name drug. The use of generic equivalent drugs is required unless the prescriber has written dispense as written or has signed the name on the dispense as written signature line. Clients should be advised to request generic prescriptions from their physicians.

Authorized prescription necessary

Any medications, including over-the-counter drugs, must be specifically prescribed by a health care provider in order to be paid for through VR funds.

Prior authorization required

Prior written approval must be obtained from the RS counselor before any medications will be paid for through VR funds. Such approval must be specific in identifying the medication and whether refills are authorized to be paid for through VR funds.

VR funding for co-pays

Funding of co-pays for medication is an allowable expense.

Exceptions

Exceptions may be approved by the RS Manager or RS Regional Program Administrator on an individual case basis. Each RS Program Administrator will establish a procedure for routing such exception requests through the RS Managers, RS Program Administrator or both. Use of the Exceptions Request Form is required.

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PART Surgery

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Section 4 Medical Services

Part 11 Surgery

The spending authority for surgery/surgeries for the life of the case is \$4,999.

When an individual surgery or a combination of surgeries is projected to cost \$5,000 or more, prior approval is required by DCF purchasing. Use of the Exceptions Request Form is required. These costs include hospital and primary doctor fees. These costs do not include radiology, anesthesia or other related expenses.

When including surgery as an IPE service, regardless of the projected costs, the counselor must analyze and document the following factors:

- Prognosis and doctor's written recommendation.
- Medical necessity.
- Analysis of whether there are feasible alternatives.
- Client's prior efforts to resolve the issue using alternatives to surgery, if such alternatives are available and medically feasible.
- Client's willingness to adhere to lifestyle changes, as appropriate, before and after surgery.
- Analysis of how the surgery will correct, stabilize, or reduce the progression of the disabling condition, if appropriate.
- Analysis of how/why the surgery is required to reduce or minimize an impediment to employment and the impact of this service on the client's ability to achieve employment.
- Availability and application of comparable benefits (unless the client requires the service immediately because of extreme medical risk.)

Appropriate CPT and service codes are required.

Special procedures for dental surgery:

- The surgery analysis described above is required for oral and maxillofacial surgeries with American Dental Association (ADA) procedure codes D7260 to D7999.

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PART Surgery

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- The surgery analysis is NOT required for ADA procedure codes D7000 to D7259. Therefore, most extractions will not require completion of the surgery analysis.
- The Counselor must get the ADA code from the dentist prior to authorizing the service in order to determine whether the surgery analysis is required.

Rehabilitation Services Policy Manual

SECTION Closures
PART Individuals Determined to Have Achieved an Employment Outcome

SECTION NO. 5-1
PUBLISHED 03/21

Section 5 Closures

Part 1 Individuals Determined to Have Achieved an Employment Outcome

Synopsis of Federal Regulation

An individual is determined to have achieved an employment outcome only if the following requirements are met:

- The provision of services under the individual's IPE has contributed to the achievement of the employment outcome.
- The employment outcome is consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.
- The employment outcome is in competitive integrated employment, consistent with the individual's informed choice.
- The individual has maintained the employment outcome for a period of at least 90 days.
- At the end of the appropriate period to achieve stability (at least 90 days), the individual and the rehabilitation counselor considers the employment outcome to be satisfactory and agree that the individual is performing well on the job.

Competitive integrated employment means work that—

- Is performed on a full-time or part-time basis (including self-employment) and for which an individual is compensated at a rate that—
 - (A) Is not less than the higher of the rate specified in section 6(a)(1) of the Fair Labor Standards Act of 1938 (29 U.S.C. 206(a)(1)) or the rate required under the applicable State or local minimum wage law for the place of employment;
 - (B) Is not less than the customary rate paid by the employer for the same or similar work performed by other employees who are not individuals with disabilities and who are similarly situated in similar occupations by the same employer and who have similar training, experience, and skills; and
 - (C) In the case of an individual who is self-employed, yields an income that is comparable to the income received by other individuals who are not individuals with disabilities and who are self-employed in similar occupations or on similar tasks and who have similar training, experience, and skills; and
 - (D) Is eligible for the level of benefits provided to other employees; and
- Is at a location—
 - (A) Typically found in the community; and

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- (B) Where the employee with a disability interacts for the purpose of performing the duties of the position with other employees within the particular work unit and the entire work site, and, as appropriate to the work performed, other persons (*e.g.*, customers and vendors), who are not individuals with disabilities (not including supervisory personnel or individuals who are providing services to such employee) to the same extent that employees who are not individuals with disabilities and who are in comparable positions interact with these persons; and
- Presents, as appropriate, opportunities for advancement that are similar to those for other employees who are not individuals with disabilities and who have similar positions.

RS Policy

Some employment outcomes available in the Kansas economy are based on seasonal work or temporary employment.

In some industries, such as construction and oil production, it is typical for the worker to frequently change employers but maintain stability in employment. In such situations, it is not necessary to restart the 90-day employment period. In such situations, determining whether the client has achieved an employment outcome shall be based on client choice, counselor discretion, and consistency of the outcome within the standards of the industry, client satisfaction with the outcome and employment stability measured by whether there is a need for further services.

In other industries:

- If an individual changes employers but remains in the same type of work, it is not necessary to restart the employment period if there is no more than a typical weekend (2-day) break in employment. An example would be changing employers from Wendy's to McDonald's (both fast food) but staying in the same line of work, such as taking orders.
- If an individual changes employers and the type of work, it is necessary to restart the 90-day employment period to assure stability in the new line of work.

Ideally, the job obtained by the person will be in the same field as the vocational objective. However, the job obtained depends on the availability of employment opportunities in the labor market at the time the person is seeking work. The responsibility of RS is to ensure that the job obtained is suitable gainful employment consistent with the client's choice.

RS emphasizes placement on a full-time, or if appropriate, part-time basis. However, in some circumstances, consistent with informed choice of the individual and goals and services on the IPE, a rehabilitation outcome may include homemaker, unpaid family worker, or placement in supported employment but not meeting the criteria of minimum wage or integrated setting.

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Job retention cases: In job retention cases (when clients are employed prior to application), the 90-day period for maintaining employment prior to case closure will begin when the substantial IPE services have been completed.

Record of services - For individuals achieving a competitive integrated employment outcome, the record of services must verify that the individual is compensated at or above minimum wage and that the individual's wage and level of benefits are not less than that customarily paid by the employer for the same or similar work performed by non-disabled individuals. (*Reference §361.47*) In obtaining evidence of wages and benefits, staff will be sensitive to whether the client wishes for the employer to know of his or her relationship with RS.

Supporting documentation requirements

Federal requirements specify specific data to be recorded in the case management system and the types of supporting documentation that must be kept in the case file.

<p>Start Date of Employment in Primary Occupation</p> <p>Employment Status at Closure</p>	<p><input type="checkbox"/> Pay stub identifying the individual's start date.</p> <p><input type="checkbox"/> Detailed case notes signed by the counselor in the case service record, including the date employment start date verification was received and justification for individual not providing formal documentation.</p> <p><input type="checkbox"/> Automated database systems indicating the individual's start date.</p> <p><input type="checkbox"/> Self-employment worksheets</p>	
<p>Weekly Earnings at Employment</p>	<p>Weekly Earnings at Employment is the amount of money (to the nearest dollar) the individual earned in a typical week after achieving an employment</p>	<p><input type="checkbox"/> Unemployment Insurance (UI) wage match, Federal employment records, or military employment records that verify the hourly wage rate (not aggregated for the quarter).</p>

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	<p>outcome consistent with the employment goal on an individual's IPE at the time the service record was closed and includes all income from wages, salaries, tips, and commissions received as income before payroll deductions of Federal, State, and local income taxes and Social Security payroll tax.</p> <p>Earnings also include profits derived from self-employed individuals. Earnings for salespersons, consultants, self-employed individuals, and other similar occupations are based on the adjusted gross income.</p> <p>The documentation must include the individual's hourly wage rate, or average hourly rate if compensated through commission, along with the minimum wage rate for the location where the individual is employed at (Federal, State, or local, whichever is higher).</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Pay stub identifying the individual's hourly wage rate or annual salary. <input type="checkbox"/> Income earned from commission in sales or other similar positions. <input type="checkbox"/> Detailed case notes signed by the counselor in the case service record, including the date verification was received and justification for individual not providing formal documentation. <input type="checkbox"/> Automated database systems; <input type="checkbox"/> One-stop operating systems' administrative records, such as current records of eligibility for programs with income-based eligibility (e.g., TANF or SNAP). <input type="checkbox"/> Self-employment worksheets; <input type="checkbox"/> Verification received from employer (as appropriate) documented in case service record, including date of verification or copy of email, fax, or letter.
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Contact with client at time of closure

The record of services must also document direct contact between the RS counselor and the client at the time of Status 26 closure. The contact must address whether the client and the counselor consider the employment to be satisfactory and whether they agree that the client is performing well in the employment. Completion of the required Closure Checklist is acceptable to meet this requirement.

If the counselor has made multiple attempts (at a variety of times and using a variety of methods) but is unable to reach the client directly, the following procedure should be followed:

1. Send a letter conveying the counselor's attempts to contact the client multiple times, and the intention to close the case in 10 days. Include the Status 26 Client Report form.
2. After 10 days have passed; send the standard closure (IPE Amendment) letter including appeal rights. (Or, if the client returns the Status 26 Client Report form, proceed appropriately based on the information provided.)

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Part 2 Closure without Eligibility Determination

Synopsis of Federal Regulation

RS may not close an applicant's record of services prior to making an eligibility determination unless the applicant declines to participate in, or is unavailable to complete an assessment for determining eligibility and priority for services, and RS has made a reasonable number of attempts to contact the applicant or, if appropriate, the applicant's representative to encourage the applicant's participation.

Reference: §361.44

RS Policy

A reasonable number of attempts means three to five attempts. Various methods, such as phone and mail, should be used. Counselors may be flexible in using this guideline based on their knowledge of the circumstances or situation. The Closure Checklist is required.

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Part 3 Other Closure Actions

Failure to Cooperate

It is essential for clients to keep scheduled appointments and to make progress, as defined on their IPEs, toward employment. Cases will be closed for failure to cooperate under the following circumstances:

- When a client has missed two scheduled appointments without advance notice for any VR-related purpose, the counselor will send a letter to the client. Scheduled appointments are defined as any meetings with counselors, CDC appointments, supported education meetings, therapy/medical appointments arranged by RS, meetings with job placement staff, or employment interviews. The letter will schedule an appointment for the client to meet with the counselor to discuss case progress. Every effort will be made to schedule these appointments at a time that coordinates with the client's schedule. Clients will be given the opportunity in the letter to contact their counselor in advance to reschedule. However, failure to reschedule or keep the appointment will result in case closure. This letter will also serve as the notice of closure action and include appeal rights.
- When the client has failed to complete IPE goals and responsibilities, and the counselor has made repeated attempts to resolve barriers and encourage participation.

Other Reasons for Closure Actions

The record of services of an applicant or client of VR services may also be closed if he or she:

- Individual is hospitalized/receiving medical treatment that is expected to last longer than 90 days and precludes entry into competitive integrated employment/continued participation in program.
- Death of individual.
- Individual is a member of the national guard/other reserve military unit of the armed forces and is called to active duty for at least 90 days.
- Individual entered a correctional institution or other institution for criminal offenders.
- Individual was found to have no disabling condition, no impediment to employment or didn't need VR services. The client or client's representative will be given the opportunity for full consultation in ineligibility decisions.

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- Individual was determined eligible for VR services however did not seek competitive integrated employment.
- Transferred to another agency.
- Individual received services and was placed in a non-integrated/sheltered setting for public/private nonprofit agency.
- Individual received services, but requires long term extended services, no long-term funding available.
- Unable to locate or contact. Generally, RS should make three to five attempts to locate the individual. Various methods, such as phone and mail, should be used. Counselors may be flexible in using this guideline based on their knowledge of the circumstances or situation.
- No longer interested in receiving services or further services. (includes failure to cooperate) RS has made repeated efforts to encourage participation.
- Individual achieved supported employment in integrated employment but did not earn a competitive wage after exhausting the short-term basis period.
- Individual applied for services pursuant of Section 511 of the Rehabilitation Act and was determined ineligible because he/she did not wish to pursue competitive integrated employment.
- Following Trial work experience the individual determined ineligible because the individual was unable to benefit due to the severity of his/her disability.

Documentation and Correspondence Regarding Case Closures

The counselor shall document the reason for closing the case. The client should be notified in writing of the action taken, reasons for the action taken, appeal rights and Client Assistance Program. This closure letter will serve as the IPE amendment for cases closed after the IPE has been signed. Written notification should be provided in the appropriate mode of communication. The Closure Checklist is required.

Exception to Written Notification Requirements

Written notification is not required when the client has declined services because of an Order of Selection waiting list, cannot be located, has refused services, is no longer present in the state, or has died.

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SECTION Fiscal Procedures
PART Purchasing Guidelines

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Section 6 Fiscal Procedures

Part 1 Purchasing Guidelines

The goods or services authorized are necessary as determined by current RS policies and guidelines, and appropriate to determine client eligibility or to meet the client's specific needs as identified in the IPE. The service authorization is finalized by the counselor assigned to the case, a RS Manager or Program Administrator. The goods meet the specifications for their use; or the services are performed to the specifications required.

For purchase of goods and durable equipment, the following procedures must be followed:

- If the item is on state contract (i.e. wheelchairs, computers), use the state contract. No bids are required since these items have been negotiated. Purchases of these types of goods or equipment are not limited to the items on state contract although deviations from state contract must have prior authorization from DCF Purchasing. The items on state contract may change without notice (either additions or deletions). Frequently purchased VR items on state contract include wheelchairs, vehicle modifications, mechanic and construction tools, sign language and foreign language interpreting services and computers. Office furniture, such as desks or chairs for students or small business establishment must be purchased through Kansas Correctional Industries (KCI) unless KCI grants a specific waiver for an individual item.
- If the item costs less than \$1,000, use the prudent person concept. Bids are not required.
- If the item costs \$1,000 to \$1,999, three bids are required. Telephone bids may be used. Telephone bids should include information (i.e. contact, phone number, date obtained) sufficient to allow review at a later date.
- If the item costs \$2,000 to \$4,999, three written bids are required. Other forms may be used, such as a builder's own bid form, as long as it shows the bidder's contact information, the specifically described item or service to be purchased; the quantity; the price; conditions, if any; delivery date. If forms other than the "Request for Prices" are used, there should be a clear understanding that the form is a bid only and not an order.
- If the item costs \$5,000 or more, go through the Deputy Director who will coordinate with DCF and Department of Administration Purchasing.
- Components must not be split to avoid the bidding process.

The following ranks in order the purchasing procedures to follow by type of service. If the first procedure does not apply to the item, go to the second. If the second does not apply, use the third procedure.

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- Evaluation and diagnostic services
 - RS fee schedule
 - Medicaid fees
 - Usual and customary or negotiated
- Physical and mental restoration
 - RS fee schedule
 - Medicaid fees
 - Usual and customary or negotiated
- Prosthetics
 - Usual and customary or negotiated
- Training services
 - Usual and customary or negotiated
- Maintenance
 - RS fee schedule
- Transportation
 - RS fee schedule
 - State contract if available (tires, for example)
 - Usual and customary or negotiated
- Attendant, interpreter, driver, reader, note-taking services
 - RS fee schedule
- Assistive technology devices using codes 270, 290, 380, 390
 - RS fee schedule
 - Usual and customary or negotiated
- Assistive technology devices using codes 410, 411, 412, 413, 414, 416
 - State contract if available
 - Bids
 - Usual and customary or negotiated
- Other goods and services
 - RS fee schedule
 - Bids
 - Usual and customary or negotiated
- Child care
 - DCF fee schedule

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PART Service and Payment Authorizations

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Section 6 Fiscal Procedures

Part 2 Service and Payment Authorizations

Synopsis of federal requirements

Rehabilitation Services (RS) must employ methods of administration to assure the proper and efficient implementation of the vocational rehabilitation (VR) program. These methods must include procedures to ensure accurate data collection and financial accountability. *Reference: 34 CFR 361.12*

As a state agency, RS must expend and account for public funds in accordance with state and federal laws and procedures. Fiscal control and accounting procedures must permit the tracing of funds to a level of expenditures adequate to establish that such funds were spent in accordance with federal requirements and that there have been no violations related to restricted or prohibited uses of funds based on applicable laws. *Reference: 34 CFR 80.20(a)*

RS must have sufficient fiscal controls in order to track specific expenditures and assure that the expenditures were made only for the allowable purposes authorized for the VR program. Payments made directly to VR clients must be allowable, authorized and supported by original receipts, bank records, lease or rental agreements or other documentation. *Reference: Rehabilitation Services Administration 2012 Monitoring Report*

Authorizing services

All services to be provided for clients must be authorized and paid through the Kansas Management Information System (KMIS). KMIS tracks all service authorizations (obligations) and payments.

Services must be necessary for determination of eligibility and Order of Selection or specified on the Individual Plan for Employment (IPE). Please refer to Section 3/Service Delivery of the Policy Manual for rules governing the provision of specific services.

All services must be authorized before they are provided in order for RS to pay for them. This action is accomplished by completing a Service Authorization on KMIS. The prior written Service Authorization must be issued before the purchase is made. Only RS Counselors, Rehabilitation Managers, Program Administrators, or assigned Administration Office staff can finalize Service Authorizations.

In limited circumstances when a counselor is away from his/her office and does not have access to KMIS, it is permissible for the counselor to provide a verbal authorization when any delay would impede the client's progress in the IPE, impact an employment

opportunity, or relate to a medical emergency. Such verbal authorizations may be made only when the service is already included on a signed IPE. Such verbal authorizations must be made in advance of purchase of the related goods and services. In such cases, if the counselor provides a verbal authorization, he/she must immediately follow up with the written authorization upon return to the office and the narrative must explain the situation and rationale.

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When authorizing services the counselor must determine the appropriate payee and payment method.

Authorizations and payments to vendors

Whenever possible, payment should be made directly to the vendor of goods or services. A Service Authorization (similar to a purchase order) is issued to the vendor for a specified good or service and at a specified cost. Upon completion of the service or delivery of the item, the vendor provides an invoice to RS for payment.

Vendors include:

- Service providers for whom payment rates are established through RS Service Descriptions. Refer to Partners link for more information on service descriptions.
- Vendors who sell specified goods and services. If an item is available through a state contract, the contract must be used for the purchase unless a waiver (prior authorization) is provided in advance by DCF Procurement.
- Medical, psychological, dental and other professionals.

Procedures related to vendor authorizations and payments

- The vendor must be willing to accept the Service Authorization from VR and invoice VR for the good upon delivery or the service upon completion.
- The vendor must have a W-9 form on file with the state's accounting system.
- A Service Authorization identifying the services, goods, or supports must be sent in advance to the vendor.
- All purchases are exempt from state and local sales tax. A copy of the tax exempt certificate is available at the following link: https://dcfnet.dcf.ks.gov/West/Documents/West-Forms/Tax%20Exempt_Exp_10_01_20.pdf
- Upon receipt of the invoice, payment should be made within 30 days.
- A Materials Received Form must be completed by the client and counselor for goods purchased, and the form must be maintained in the case file. Vendor reports for services provided, as specified in the Service Descriptions, must be maintained in the case file. These reports are supporting documentation that the funds were used for the purpose specified and as allowable by applicable statutes.

Outstanding service authorizations must be monitored. Payments after the authorization expiration date will not be permitted because of federal "period of performance" requirements. KMIS will auto date all new authorizations with a one-year expiration date. If an authorization expires and the service is still needed a new authorization must be created. **You are required to send the vendor a cancellation notice of the expired authorization.**

You are only able to unauthorize the service authorization if you have not finalized the service authorization. If you are needing to cancel the authorization, you are required to do the following steps.

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1. Staff need to call/email to speak with the provider/vendor to let them know and ensure there are no pending bills associated with that authorization
2. Send the cancellation notice to them
3. Send to your RS Manager to cancel the authorization on KMIS
4. Narrate your conversation, when you sent cancellation notice, person you spoke with, and authorization numbers that you cancelled on the date that it occurred
5. Staple the authorizations and cancellation notice together and put in case file

Reimbursement to clients

Clients may be reimbursed for allowable expenses they incur under the following circumstances:

- A prior written Service Authorization must be provided to the client for the good or service for which reimbursement will be requested. The prior authorization must be issued before the purchase is made. This authorization must specify the allowable cost based on a specific cost estimate.
- Reimbursement will be paid promptly when the agency receives proof-of-purchase documentation. It is the client's responsibility to provide such documentation. Documentation must be provided within 10 days of the purchase. Documentation may include original paid receipts, cash register receipts that identify goods purchased, credit card statements, internet payment documentation, or other similar documentation. Copies of cancelled checks (showing both the front of the check indicating the payee and the back of the check or back statement indicating payment has been made) and copies of money orders are also allowable documentation. The client's name must be written on all documentation submitted to RS.
- A Materials Received Form must be completed by the client for goods purchased and submitted with the purchase documentation. The form must be maintained in the case file. These reports are supporting documentation that the funds were used for the purpose specified and as allowable by applicable statutes.
- Documentation must be detailed enough to note the payee, what was purchased, the date, and the cost. If the documentation does not include this level of detail, it must be accompanied by a Receipt Substitute Form.
- There may be instances where a receipt or other documentation has been lost or is otherwise not available for submission to RS. In such instances, the client may submit a Receipt Substitute Form for consideration by RS. If a client uses this form three times, a meeting with the counselor will be required to discuss documentation requirements and methods for getting and organizing such information. Use of case management and natural supports should be discussed to assist the client with documentation responsibilities. Subsequent use of the form will result in the reimbursement privilege being discontinued. Exceptions due to disability-specific issues or accommodation needs must be approved by the Program Administrator.
- Reimbursements to clients may not be used to usurp the use of state contracts.

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Payments in advance to clients for specifically authorized services

In limited circumstances, clients may receive payments in advance for the purchase of allowable goods and services. Such circumstances include allowable maintenance and transportation payments when the client does not have sufficient resources to be reimbursed after purchase. Such circumstances may also include other services or goods when a vendor will not accept an RS service authorization and it is not feasible for the client to be reimbursed after purchase. Please refer to Section 3/Service Delivery of the Policy Manual for rules governing the provision of specific services.

The following rules apply to payments in advance:

- A prior written Payment Authorization must be provided to the client for the good or service to be purchased. The prior authorization must be issued before the purchase is made. This authorization must specify the allowable cost based on a cost estimate. "Not to exceed" language should be included to make it clear that RS is not responsible for amounts spent above the authorized amount.
- After the client completes the purchase, he or she must provide prompt (within 10 days) proof-of-purchase documentation. Documentation may include original paid receipts, cash register receipts that identify goods purchased, credit card statements, internet payment documentation, or other similar documentation. Copies of cancelled checks (showing both the front of the check indicating the payee and the back of the check or back statement indicating payment has been made) and copies of money orders are also allowable documentation. The client's name must be written on all documentation submitted to RS.
- Failure to provide proof of purchase will result in denial of future advance payments to the client.
- Documentation must be detailed enough to note the payee, what was purchased, the date, and the cost. If the documentation does not include this level of detail, it must be accompanied by a Receipt Substitute Form.
- There may be instances where a receipt or other documentation has been lost or is otherwise not available for submission to RS. In such instances, the client may submit a Receipt Substitute Form for consideration by RS. If a client uses this form three times, a meeting with the counselor will be required to discuss documentation requirements and methods for getting and organizing such information. Use of case management and natural supports should be discussed to assist the client with documentation responsibilities. Subsequent use of the form will result in the reimbursement privilege being discontinued. Exceptions due to disability-specific issues or accommodation needs must be approved by the Program Administrator.
- For monthly maintenance or transportation payments, the counselor's spending authority for payments in advance is \$450 per instance. For all other payments, the counselor's spending authority for payments in advance is \$250 per instance. Exceptions up to \$1,000 must be approved by the Regional Program Administrator. Administration Office approval is required for any payment in advance exceeding \$1,000.
- Direct payments to clients may not be used to usurp the use of state contracts.
- Regarding monthly maintenance or transportation payments, receipts/documentation must be provided before the next monthly payment can be made.
- For all other services, a client may not have more than one outstanding payment in advance at any given time. Exception: The counselor may grant a one-time exception to this rule if the

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purchase is needed to secure a verified job offer or to retain or maintain a current job.

Example: a specific uniform or type of work boot is needed in order for the client to report to work. The reason for the exception must be described and documented in the case file.

- A Materials Received Form must be completed by the client for goods purchased and submitted with the purchase documentation. The form must be maintained in the case file. These reports are supporting documentation that the funds were used for the purpose specified and as allowable by applicable statutes.
- If a payment in advance exceeds the amount of the actual purchase, the excess funds will be noted and deducted from any future reimbursements or payments in advance. The client will be responsible to manage these funds in such a way that they are available for use for future allowable and authorized expenditures. The number of miles submitted on the mileage log must be specifically reconciled to determine if there was an overpayment, and if so, that amount should be expended prior to issuing the next payment. In any circumstances involving overpayment, RS retains the right to have the excess funds repaid to the agency.

Use of prepaid or gift cards prohibited

Prepaid cards such as gift cards or gas cards may not be purchased and given to a client for use in purchasing goods or services.

Case file documentation

For each purchase, all of the associated authorizations and documentation should be grouped together for filing in the case file. Authorizations and documentation to be grouped should include the following, as applicable to the specific purchase: the service authorization, payment authorization, invoices, materials received forms and receipts/purchase documentation.

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PART Repossessed Equipment

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Part 3 Repossessed Equipment

When training and/or occupational tools or equipment are repossessed, information regarding the equipment is entered on Kansas Management Information Systems (KMIS) in the list of available equipment.

Each office will provide storage for repossessed equipment.

Equipment determined not re-assignable upon repossession, or not re-assigned for a period of six months, is to be handled as surplus property.

To transfer the repossessed property to a client, follow KMIS procedures.

When repossessed property is disposed of as surplus property, it should be removed from KMIS.

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PART Bid Procedures

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Section 6 Fiscal Procedures

Part 4 Bid Procedures

Purchases of equipment not on State Contract costing \$5,000 or more require DCF purchasing approval.

- Items listed on a service authorization (except for items on state contract) are let out for bids.
- Purchasing may separate an authorization into two or more sets of bid specifications and send the specifications to different sets of vendors for bids.
- The vendor submitting the lowest bid on items described on the bid specifications will receive the award subject to counselor approval.
- As many as eight vendors may receive awards based on one service authorization.
- A vendor may be suggested on a service authorization or the counselor may select “Unknown Vendor” from the menu.
- The service authorization **MUST NOT** be forwarded to a vendor.
- KMIS notifies the counselor when Purchasing prints the service authorization. Purchasing may request additional information from the counselor or suggested vendor.
- Purchasing can reject the authorization if the service description is not adequate or if it contains a contract item.
- Purchasing will notify the counselor when an authorization is rejected and provide the reasons.
- The counselor or support person will **UNAUTHORIZE** the service authorization and update it to make the changes needed by Purchasing.

When Purchasing is ready to award the bid, they will notify the counselor and seek approval. The counselor can reject the low bid on reasonable grounds. If the bid is more than the amount authorized, a second approval is required. Payment is authorized within thirty days of delivery and inspection of the completed product.

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PART Payment Procedures

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Part 5 Payment Procedures

Payments for items on a Service Authorization are created and finalized by Rehabilitation Services (RS) field staff. The Payment Authorization can only be finalized by the Counselor, RS Manager or Program Administrator. Payments must be completed within 30 days from the day equipment was received by the client or counselor or the day the invoice is received in the field office (whichever date is later), according to the Kansas Prompt Payment Act. Normally allow seven to ten days for a payment to be processed so that the warrant will be dated by the 30th day.

Partial payments are made when a portion of the equipment has been delivered and can be used by the client while waiting for the rest of the order. If part of the order has arrived but cannot be used until the rest of the order is delivered, do not make a payment on it.

When multiple vendors have been awarded a bid on the same service order, pay each vendor as the equipment and invoice are received from the vendor, if items are useable by the client. When multiple vendors are awarded a bid and the last vendor payment is finalized, KMIS will ask if the authorization should be closed. You must close it to remove it from the outstanding obligations list. If you do not close the authorization at this time, you may zero dollar pay to close it.

Enter the correct invoice number when prompted. Enter the account number, shipping date, and any other identifying information that may help the vendor identify the payment in the service description area on the payment authorization to a vendor. This is needed so the vendor will know where to credit the payment. It is best practice to add a statement that "the client is not to be billed."

A material received/property assignment – disposition form is completed when the client has received and is satisfied with the equipment ordered. Keep this signed form in the case file. The Materials Received report is also used to report repossessed equipment to Administration Office.

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PART State Warrants

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Section 6 Fiscal Procedures

Part 6 State Warrants

Cancellation of State Warrants:

- Determine the need to cancel a warrant by pulling the original authorization documentation and identifying invalid information.
 - Write a brief note or memo stating the circumstances requiring the need to cancel the warrant (duplicate payment, wrong vendor, client no longer attending school, etc.)
 - Make a note in the client's file that the warrant cancellation was requested.
- Send the reason to cancel with the service order number and the warrant to be canceled to RS Administration Office in Topeka.
- RS Administration Office in Topeka write or stamp "VOID" on the face of the warrant to be canceled and cut a triangle along the bottom and through the signature portion of the warrant.
- RS Administration Office will prepare a cancellation letter to DCF Payables.

Payments Not Received:

- View the payment on KMIS.
- If there is no voucher number, the payment was not finalized on KMIS; finalize the payment.
- If the voucher number is 70000000 the payment was finalized but not processed. If the number remains a working day or more after the payment was finalized; contact KMIS HELPDESK.
- If the warrant date is 01/01/1800 after five working days, the warrant was not cut; contact KMIS HELPDESK.
- If the warrant number is 0800000000, it usually means it is a direct deposit, and the vender will have to work with their bank.
- If the warrant date falls within five to ten days of the payment authorization; check the warrant number.
- If the warrant number is 7 digits starting with '7' or '8', it is a direct deposit.
 - Advise the vendor of the warrant date and the number. The vendor may be able to find it in his/her records.
- If the warrant number is 10 digits starting with '2', a paper copy check was issued. Check the State Treasurer's website https://kansascash.ks.gov/check_search.php to track the warrant. It will indicate the warrant has cleared the bank or it is outstanding.

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- If the warrant has cleared the bank, advise the vendor of the warrant date and the number. The vendor may be able to find it in his/her records.
- Contact KMIS HELPDESK if a copy of the warrant is requested.
- If the warrant is outstanding for at least thirty working days and the vendor does not have it, contact KMIS HELPDESK to request the warrant be reissued, and the original canceled.
- If the warrant number is 10 digits beginning with '9', the payment has been offset because the vendor owes money to the State of Kansas or a political subdivision. At this point, payment for services is complete as is RS involvement. The counselor **MUST NOT** evade this process and **MUST NOT** assist the vendor to evade this process. See the following information regarding the State Setoff Program.

NOTE: Kansas Treasury Offset Program

The Offset Program aids state agencies in the collection of delinquent accounts receivable. It allows the Director of Accounts and Reports to set off monies owed by the State of Kansas against monies owed to the State of Kansas. The Offset Program matches payments in process with debts owed, reduces the payment in accordance with the debt, and credits the debtor with a payment.

A VR Counselor may encounter this service when a vendor receives a reduced payment or no payment for services and receives notice the payment or a portion of it has been applied to a tax bill or other debt held by the state or a municipality within the state. Vendors frequently do not understand the notice or otherwise disregard it. The counselor is to treat this as a payment of the monies owed by RS. A new payment for the difference shall not be created and the client is **NOT** to be billed. The counselor cannot cancel the payment or accept a returned warrant. He or she can provide the vendor with information to contact the Division of Accounts and Reports so the vendor can investigate or contest the debt.

Persons/Vendors with questions regarding the Offset process may call the client Customer Call Center at 785-296-4500, 9:00 AM to 3:00 PM Monday through Friday (excluding observed State holidays). The Customer Call Center will require their Tax Identification Number (Social Security Number or Federal Employer Identification Number) in order to reference the account.

The Kansas Treasury Offset Program (KTOP) does not have detailed information regarding debts and will only be able to provide callers with the contact name and phone number of the creditor agency to which their debt is owed, as well as the debt amount.

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SECTION Fiscal Procedures
PART Refunds

SECTION NO. 6-7
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Section 6 Fiscal Procedures

Part 7 Refunds

Staff should follow the Kansas Department for Children and Families (DCF) Regional Office procedures for processing refunds, and provide a copy of refund paperwork to the RS KMIS HELPDESK. If no Regional Office procedures are in place, use these procedures:

1. Determine the reason for the refund (overpayment, client no longer attending school, etc.).
2. Note the details of the refund in the client's file.
3. Email Administration Office a brief note with the reason for refund, Service Authorization number to which it applies, and scans of the refund (check/money order, cash) and any accompanying documents. Then send all paperwork to Administration Office via inter-office mail, USPS, or other appropriate service.
4. If Regional Operations require it be sent to them first: send the refund (check, money order, cash) and refund voucher number, and note with the reason for the refund to your Regional Operations and a copy to the RS KMIS HELPDESK.

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SECTION Fiscal Procedures
PART Client Out-of-State Travel

SECTION NO. 6-8
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Section 6 Fiscal Procedures

Part 8 Client Out-of-State Travel

Counselors may make out-of-state travel arrangements for clients using the following procedures:

1. Complete the out of state travel Form.
2. Counselor sends to PA for their approval.
3. PA sends to Director for approval.
4. Administration office will send out of state Form VR-Admin 3003 back to the counselor and PA.

Airfare

When setting up airfare for clients, the counselor will use shorts travel.

1. Set up service authorization payable to UMB Bank (FEIN # 440201230). Use SMART ID 0000038582 Address Seq 00006. Do not finalize.
2. Contact Admin Office and give the service authorization #, the name of the client traveling, address, date of travel, accommodations needed and counselor's name and phone number.
3. Admin Office will arrange airfare with Shorts Travel.
4. Admin Office will communicate proposed itinerary to counselor for approval.
5. Counselor will complete the travel form and obtain necessary approvals.
6. Admin Office will communicate cost of fare and account number to counselor to complete the authorization and payment.
7. Counselor will send Admin Office copies of travel, service authorization, etc.
8. Admin Office will forward payables the documents (service authorization, travel, etc).

Other Travel

Clients may also be eligible for per diem and hotel reimbursement. Follow the same procedures as used for state employees. For more information, see Department of Administration Travel Center for State Employees at <http://da.ks.gov/ar/employee/travel/default.htm>.

Client mileage is provided in accordance with the RS Cost Cap located in Section 3, Part 8 of this manual.

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SECTION Fiscal Procedures
PART Vendor Categories

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Section 6 Fiscal Procedures

Part 9 Vendor Categories

These codes are used when finalizing a payment authorization.

Code	Facility or Agency
1	Purchased from Public CRP (owned and managed by federal, state or local government such as those run by state VR agencies).
2	Purchased by community rehabilitation programs in the private sector (owned and managed by non-governmental entities such as individuals, associations, corporations, etc.).
3	Purchased from other public service providers.
4	Purchased from other private service providers.
5	Purchased by VR and provided by comparable benefit.

Source of funding:

Code	Type of Source
1	VR Funds
2	Non-VR Funds
3	Combination of VR and other sources

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SECTION
PART

Fiscal Procedures
Payments May Not Be Made Outside of Kansas Management
Information Systems (KMIS)

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Section 6 Fiscal Procedures

Part 10 Payments May Not Be Made Outside of Kansas Management Information Systems (KMIS)

All payments for client services are to be made through the Kansas Management Information Systems (KMIS).

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SECTION Fiscal Procedures
PART Prohibited Use of Funds and Conditions for
Authorizing/Purchasing

SECTION NO. 6-11
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Section 6 Fiscal Procedures

Part 11 Prohibited Use of Funds and Conditions for Authorizing/Purchasing

Prohibited use of funds for any reason resulting from a violation of law or regulation

Vocational rehabilitation (VR) funds may not be used for any purpose or reason that results from violations of federal, state, local or tribal laws and regulations. *Source: Office of Management and Budget Circular Uniform Guidance, including the federal cost principles known as the super circular: https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl*

This means that VR funds may not be used for the following:

- Penalties
- Fines
- Bad debts (prior debts)
- Damages
- Court settlements
- Court fees
- Late fees, such as those associated with delays in securing vehicle tags
- Interest penalties for any fine or settlement that resulted from a legal or regulatory violation
- Reinstatement of a driver's license
- Ignition interlock devices
- Expungement of legal records
(Further, service providers being paid by VR may not be paid for time spent assisting the client with the expungement process.)
- Parking tickets
- Impound or towing
(Towing for purposes of vehicle repair is allowed as long as there is no connection to an illegal act.)
- Traffic tickets (including parking tickets that go unpaid at post-secondary educational institutions and consumer cannot get their degree as a result)
- Unpaid child support
- Extra insurance premiums that result from traffic or other legal violations
- Reinstatement of any professional licenses after suspension due to legal or regulatory violations
- Any other services that result from a violation of law or regulations

If such services are currently included on any Individual Plans for Employment (IPEs), please inform your clients that VR will not be able to fund these services. You will need to provide this information in writing and include the appeal rights information. Do not include any such services on future IPEs or pay for anything that has already been included in some fashion, e.g., college "fees."

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Prohibited use of funds for debt incurred by the client

VR funds may not be used to pay for debt incurred by the client. This means that VR funds may not be used for:

- Student loans
- Previous medical bills
- Past-due utility bills and related interest and reinstatement fees
[Payment of utility bills is governed by the policy on maintenance. Maintenance means monetary support provided to an individual for expenses, such as food, shelter and clothing, that are *in excess of the normal expenses of the individual* and that are necessitated by the individual's participation in an assessment for determining eligibility and vocational rehabilitation needs or the individual's receipt of VR services under an Individualized Plan for Employment (IPE).]
- Fines or fees due to a school, e.g., parking violations or library fines that go unpaid and become a barrier to obtaining their degree.

If such services are currently included on any IPEs, please inform your clients that VR will not be able to fund these services. You will need to provide this information in writing and include the appeal rights information. Do not include any such services on future IPEs.

Requirements for signed IPEs and written authorizations prior to the purchase of goods or services

Federal regulations govern the types of services and goods that can be purchased, and the conditions under which such purchases can be made. First and foremost, we are required to adhere to the federal regulations related to the development/implementation of an IPE. 34 CFR 361.45 requires that services necessary to achieve the consumer's chosen employment goal be included on a written IPE and that the IPE must be signed by the consumer and qualified rehabilitation counselor before it can be implemented. This is a regulation that is both clear and straightforward -- if the service is not written down on an IPE and the IPE is not signed, the service cannot be provided. (Limited services necessary to determine eligibility are obviously exempt from this IPE requirement.)

In addition, Rehabilitation Services (RS) policy requires that any service purchased or paid for through VR must have written authorization input in KMIS prior to being started, purchased, received or rendered. There are only two exceptions:

Section 6, Part 2– Fiscal section

In limited circumstances when a counselor is away from his/her office, it is permissible for the counselor to provide a verbal authorization when any delay would impede the consumer's progress in the rehabilitation plan, impact an employment opportunity, or relate to a medical emergency. *Such verbal authorizations must still be made in advance of the service being provided and purchase of the related goods and services. The service must also already be included in the IPE.* In such cases, if the counselor

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provides a verbal authorization, he/she must immediately follow up with the written authorization in KMIS upon return to the office and the narrative must explain the situation and rationale.

Section 1, Part 13– Administrative issues

After the IPE is in place (Status 12 or above) and in very limited circumstances, such as medical emergencies (intercurrent illness) when it was not feasible for the client to get prior approval and no other source of funding is available, an exception may be approved. If approved, the IPE must be amended and signed before payment can be made. Each RS Program Administrator will establish a procedure for routing such exception requests through the RS Managers, RS Program Administrator or both.

The requirement for prior written authorization (before the service is received or the goods are purchased) is longstanding RS policy. In addition to the IPE sections including notice to the consumer and counselor that additional approvals for a particular service may be required, the long list of items informing the consumer of their rights, responsibilities, methods of payment and so are clear that no service will be provided without prior written authorization. The following information outlines the various sections and requirements of the RS policy manual that address the requirement for prior written approval of any service provided a RS consumer.

- Application acknowledgement signed by the consumer
 - Prior written approval from my counselor is needed before Rehabilitation Services will pay for any services.
- Participation agreement section of the IPE signed by the consumer
 - Consumer responsibilities listed include:
 - ✓ Get prior written authorization from my counselor before I purchase any goods or services to be funded by RS, and provide receipts when requested.
- Section 6, Part 2– Fiscal section
 - All services must be authorized before they are provided in order for RS to pay for them.
- **Handbook of Services** – provided to all consumers at the time of application
 - Page 2: In order for KRS to pay for any services, including diagnostic services, the counselor must give written approval BEFORE the service is provided or purchased. This requirement applies to all services or purchases.
 - Page 3: Services will be provided according to your IPE.
 - Page 8: Important reminder – Remember, KRS must approve payment of services listed on your IPE before the services are provided or purchased. The approval must be in writing from your counselor.

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PART Fiscal Procedures
 Prohibited Use of Funds and Conditions for
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- Page 13: List of consumer responsibilities – Get written approval before you buy anything listed on your IPE that you want KRS to pay for.

It is not permissible for a client to make a purchase for which no prior written authorization was provided and expect VR to provide a reimbursement or payment.

- Example 1: It is not permissible for a client to make a purchase that was not prior authorized and later turn in the receipts for reimbursement. The prior authorization must occur before the purchase is made.
- Example 2: It is not permissible for a client to use an authorization for anything other than the specific service or goods described on the authorization. For example, if VR provides an authorization for books at a college bookstore, it is not permissible for the client to use the authorization to also purchase unauthorized supplies, sporting goods, t-shirts, backpacks, etc. The items to be paid for by VR must be specifically stated on the service authorization and payment may be made only for those specified items.

Frequently asked question related to IPE and authorizations

“Since a service and provider is listed on the IPE can’t the IPE be considered the same as a prior written authorization since the counselor agreed to provide that service by that provider, vendor, school, retailer, etc.?” The short answer is no! The IPE is a plan of how a person is going to achieve their chosen vocational objective and it lists the services necessary to mitigate the individual’s barriers to employment, an approximation of the costs of those services, the intended provider of the service and how the service will be paid for if there is a direct cost. Because the IPE has such broad categories for services and the providers and costs change frequently, the IPE is truly only a plan. The prior written service authorization developed and printed out of KMIS is required to identify the specific service to be provided, e.g., type and numbers of clothing, the precise provider and the actual maximum amount we will pay for that item or service.

Regardless of much or how little the cost of a service, it requires a prior written authorization from KMIS for KRS to pay for that service or item. Regardless of the type of service or provider of the service listed on the IPE, it requires a prior written authorization from KMIS for KRS to pay for that service or item. The IPE is our plan to provide services, the service authorization from KMIS is our promise to pay for the exact service we are buying that will address our consumer’s barriers to employment. Both are important and both are required.

Please be sure you discuss the prior written service authorization with the client at the time of developing the IPE, and document this in the case file. It is incumbent upon us to help our consumers and those from whom we purchase services understand our fiscal requirements. Therefore, you may wish to show the client a generic example of a service authorization so they can see the difference between it and the IPE. You will also want to explain the services being purchased and the limitation of that purchase to the providers, vendors, retail establishments, etc. when you are preparing to send the service authorization to them as well. That is especially important for newer entities you might be using to provide a service.

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When issuing a service authorization, also be sure to attach the required cover sheets which further explains the authorizations process. The cover sheets can be found by scrolling to the bottom of the Resources page on our internal website at this link:

<http://dcfnet.dcf.ks.gov/RS/Pages/Resources.aspx>

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SECTION Fiscal Procedures
PART Extended Service Contracts

SECTION NO. 6-12
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Section 6 Fiscal Procedures

Part 12 Extended Service Contracts

The following guidelines are offered to help decide whether or not an extended service contract should be purchased for equipment or assistive technology. State Purchasing has no policy regarding purchasing extended service contracts. Vendors offer extended service contracts to provide preventive maintenance. These extended service contracts may or may not include parts and labor if an item malfunctions.

To decide whether or not to purchase an extended service contract, these points should be considered:

1. Is the item being purchased an expensive, high tech item?
2. Does the item have many moving or high impact parts that may fail early?
3. Will the item have to be repaired out of state by the vendor?
4. Will repair costs be substantially less than purchasing a new item?
5. Do "fine print" exclusions make the service contract less attractive?

Whether or not to purchase an extended service contract is a decision shared by the counselor and client. It pays to know what is being purchased. Extended service contracts can be good or bad but an "informed buyer" will likely recognize the difference.

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SECTION Fiscal Procedures
PART Purchase of Used Equipment

SECTION NO. 6-13
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Section 6 Fiscal Procedures

Part 13 Purchase of Used Equipment

It is possible to purchase used equipment if such equipment meets the client's needs and if the client has made an informed choice about his or her options.

If the item is to be purchased through a bidding process, the counselor and client should verify the quality of the item to be certain it functions appropriately before accepting the bid.

To explore other possibilities, please contact the Operations Unit at the Administration Office.

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PART

Fiscal Procedures
Allowable uses of VR and Pre-ETS Funds

SECTION NO.
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Section 6 Fiscal Procedures

Part 14 Allowable uses of VR and Pre-ETS funds

Title I funds authorized through the Rehabilitation Act are used for Vocational Rehabilitation and Pre-Employment Transition Services. The Rehabilitation Act is also incorporated into the Workforce Innovation and Opportunity Act (WIOA). With passage of WIOA, 15% of the Title 1 funds awarded to the state must now be set-aside for use on Pre-ETS consistent with the law's emphasis on empowering students with disabilities to prepare for successful employment.

Seamless services

Coordination/collaboration between VR Counselors and Pre-ETS Specialists is essential to assure that students with disabilities have access to the continuum of services they need to become employed and self-reliant. When coordinating services, it's important to follow these guidelines listed below for assignment of costs to the appropriate funding source.

Category A

Funds set aside for Pre-Employment Transition Services (Pre-ETS) will be used to pay for the following required Pre-ETS services:

- Job exploration counseling
- Instruction in-self-advocacy
- Work place readiness training
- Counseling on opportunities for enrollment in comprehensive transition or post-secondary education programs
- Work-based learning experiences

Auxiliary aids and services may be funded under this category if they are necessary for the student to access or participate in the required Pre-ETS services.

Category B

Additional VR services may be paid for with the Pre-ETS set-aside funds if all of the following conditions are met:

- The services are necessary for the student to benefit from one or more of the required Pre-ETS services, and
- The student has been determined eligible for vocational rehabilitation (VR) services, and
- The services are included on an Individual Plan for Employment (IPE) and fall into one of the following categories:
 - Assessment services
 - Counseling and guidance
 - Referral services

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- Maintenance (required clothing, – necessary, reasonable and allocable for provision or receipt of Pre-ETS)
- Transportation
- Personal assistance services
- Rehabilitation Teaching and Orientation and Mobility Services
- Rehabilitation Technology electronic device that doesn't constitute an auxiliary aid or service)
- Services to Family Members (example: transportation, maintenance, personal care services, interpreter services)
- Job Coaching
- Books, tools, or other training material to participate in Pre-ETS

Standard VR policies pertaining to the provision of these services apply.

Category C

The following services may not be paid for with the Pre-ETS set-aside funds. However, if these services are needed for a student who is eligible for VR to achieve competitive integrated employment, then they can be included on an IPE and paid for with VR dollars.

- Medical services
- Post-secondary education
- Vocational training
- Job search
- Job placement
- Job retention
- Job follow up
- Job follow-along services
- Any other necessary services within the scope of available VR services.

Rehabilitation Services Policy Manual

SECTION Pre-Employment Transition Services (Pre-ETS)
PART Purpose, Funding, and Coordination

SECTION NO. 7-1
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Section 7 Pre-Employment Transition Services (Pre-ETS)

Part 1 Purpose, Funding and Coordination

Empowering youth with disabilities to achieve their highest employment potential is one of the major goals of Rehabilitation Services (RS). Pre-ETS were authorized by the Rehabilitation Act of 1973, as amended through the Workforce Innovation and Opportunity Act (WIOA). Through Pre-ETS, students with disabilities may receive a variety of services to help them prepare for employment and self-reliance rather than dependency on public benefits.

Pre-ETS funding

As required by WIOA, RS will reserve 15% of its federal vocational rehabilitation funds for the provision of Pre-ETS.

34 CFR 361.65(a)(3)

Pre-ETS services are not subject to economic need.

Coordination

Pre-ETS services are to be provided and arranged in coordination with local education agencies. These activities will be documented by Pre-ETS Staff on the required forms and in KMIS.

Coordination activities may include:

- Attending Individualized Education Program (IEP) meetings for students with disabilities.
- Working with the local workforce development boards, one-stop centers and employers to develop work opportunities for students with disabilities, including internships, summer employment and other employment opportunities available throughout the school year, and apprenticeships.
- Attending person-centered planning meetings.

34 CFR 361.49(a)(4)

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SECTION
PART

Pre-Employment Transition Services (Pre-ETS)
Student with Disabilities and Criteria for Participation in Pre-ETS

SECTION NO.
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Section 7 Pre-Employment Transition Services (Pre-ETS)

Part 2 Students with Disabilities and Criteria for Participation in Pre-ETS

Coordination/collaboration between VR and Special Education is essential to assure that students with disabilities have access to the continuum of services they need to become employed and self-reliant. Pre-ETS services are available for students with disabilities who are Kansas residents at the time they request services.

- Students with disabilities are defined as individuals who are not younger than age 14 (the earliest age for the provision of transition services under IDEA) and not older than age 21.
- In addition, the student must be participating in a secondary, post-secondary or other recognized education program. Educational programs include: secondary education programs; non-traditional or alternative secondary education programs including home schooling; post-secondary education programs; and other recognized educational programs, such as those offered through the juvenile justice system.
- The student meets one of the following criteria to verify disability: The student is eligible for and receiving services under an Individual Education Plan (special education) OR the student is an individual with a disability as defined under Section 504 of the Rehabilitation Act.
 - An individual with a disability as defined in Section 504 means: any person who:
 - (1) Has a physical or mental impairment that substantially limits one or more major life activities;
 - (2) Has a record of such an impairment; or
 - (3) Is regarded as having such an impairment.Major life activities include walking, seeing, hearing, speaking, breathing, learning, working, caring for oneself, and performing manual tasks.

Students with disabilities may request Pre-ETS services directly or be referred by the Local Education Agency (LEA). RS will not implement any arbitrary age or time frame limit on when a student with a disability (as defined above) can submit request for Pre-ETS services. RS will coordinate with the individual, the LEAs and the individual's IEP regarding initiation of and provision of services.

If the student is transitioning to post-secondary education and has a typical summer break prior to enrollment, the Pre-ETS case may remain open as long as the Pre-ETS Transition Specialist has obtained the following documentation:

- Documentation that the individual with a disability graduated from secondary ed., and
- Documentation that the individual with a disability has been accepted into a post-secondary education institution/program.
- Documentation of the individual with a disability intention or confirmation that they have accepted the invitation to enter the post-secondary program.

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Student with Disabilities and Criteria for Participation in Pre-ETS

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- If the student is transitioning to post-secondary education and plans to take a break or gap year prior to enrollment, the Pre-ETS case may remain open, as long as the Pre-ETS Transition Specialist has obtained the following documentation:
 - Documentation that the individual with a disability graduated from secondary ed., and
 - Documentation that the individual with a disability has been accepted into a post-secondary education institution/program.
 - Documentation of the individual with a disability's intention or confirmation that they have accepted the invitation to enter the post-secondary program.
 - Documentation that the individual with a disability has been informed by the institution that their "seat" or "spot" is being held for them.

If the student is determined to meet the disability criteria while in high school and continues to meet the recognized education program and age requirements no further disability documentation is required.

United States citizen

Pre-ETS is an employment preparation program. Therefore, if the student is not a U.S. citizen, the student must be authorized to work in the United States (have a VISA or work authorization card which permits employment in the competitive integrated marketplace).

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SECTION Pre-Employment Transition Services (Pre-ETS)
PART Processing Referrals and Requests for Services

SECTION NO. 7-3
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Section 7 Pre-Employment Transition Services (Pre-ETS)

Part 3 Processing Referrals and Requests for Services

A student with a disability may be referred for Pre-ETS services by a third party, such as the school, a foster care service provider, or other individual or entity.

A student with a disability, his or her parents, legal representatives or guardians may also request services directly.

Referrals or Request for Services may be faxed, emailed if encrypted to protect confidentiality, or mailed to the Pre-ETS Manager for the region. Pre-ETS Transition Specialists may also receive Referrals or Requests for Services at meetings with school personnel, schools or families.

All Referrals and Requests for Services shall be date stamped when the documents are first received by any part of DCF. If the Transition Specialist receives a verbal referral for a student, the Transition Specialist would enter the information into KMIS for the referral and document in the narrative when the verbal referral was received.

The student and parent/guardian (if applicable) must sign the Request for Services. If Pre-ETS staff receive a request for services signed by a parent without the student's signature, Pre-ETS staff may move forward with that request for services. Pre-ETS staff would need to get the student's signature as soon as possible. At the point students turn 18 years of age, assume they are their own guardians unless the family or school informed Rehabilitation Services otherwise. The student can request to have a representative for his or her case. If the student is 18 years of age or older and has a guardian or representative, the Pre-ETS Transition Specialist will obtain pertinent guardianship or other documentation for the file. If the student is 18 or older and wants Pre-ETS to share case information with parents or others, get the required release of information form signed.

Processing Referrals and Requests for Services

- The Manager enters the information into the Pre-ETS Kansas Management Information System (KMIS) database as soon as possible, but no later than seven calendar days from the date DCF received the Referral or Request for Services. The Manager will assign the case to the appropriate Transition Specialist.

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- If a Transition Specialist receives a Referral or Request for Services in person or through other means, the Transition Specialist shall enter the information into the KMIS database as soon as possible, but no later than seven calendar days from the date DCF received the Referral or Request for Services. In these circumstances, the Transition Specialists will assign such cases on KMIS to themselves.
- The Transition Specialist will contact the school contact or other referral source (if they referred) student, and parent/guardians (if applicable) as soon as possible, but no later than 15 calendar days from receiving the Referral or Request for Services and send a follow-up letter confirming appointment date, next steps, and additional Pre-ETS information. If the Transition Specialist schedules an appointment within five calendar days from contact date the follow up letter is not required because the referral source and parent/guardians (if applicable) would likely not receive it prior to the meeting. In such situations the same information contained in the follow up letter would be discussed in the first appointment and documented in the narrative.
- Once contact is made, the Transition Specialist will:
 - Schedule an appointment within 15 calendar days or sooner unless the student's or parent/guardian's (if applicable) schedule does not permit. The appointment could be at the school, DCF office, or public location.
- Send a Request for Services to be completed (if it has not already been provided) and appointment letter. If the Transition Specialist schedules an appointment within five calendar days from contact date the follow up letter is not required because the referral source and parent/guardians (if applicable) would likely not receive it prior to the meeting. In such situations the same information contained in the follow up letter would be discussed in the first appointment.
- The Pre-ETS Transition Specialist will maintain their outlook calendar to include detailed appointment information identifying the dates, times, name of the student(s), and location of where they will be working.
- Contact in the policy means to attempt by phone to reach the student or parent if applicable before just sending a letter or email.

The Pre-ETS Transition Specialist can send letters through email if the student, parent, or other party has identified they would like to receive the letter in that format, and document the conversation in the case narrative.

The Pre-ETS Transition Specialist shall make every effort to reach the student as quickly as possible. The Transition Specialist shall use all methods available from the information that was provided: phone, address, email address, school contact, DCF programs, etc.

The Transition Specialist may not screen out a referral during breaks from school.

If the student indicates he or she is not interested in Pre-ETS services, the Transition Specialist will reconnect with the student at least two times at six-month intervals each as long as the student would still meet criteria. (The two attempts need to be six months apart after the initial referral. Therefore, Pre-ETS will try to reconnect with the student to determine if his/her interest has changed two times during the first year following the referral date). After two attempts and if the student is still not interested, the student's Pre-ETS case may be closed due to lack of interest. The Transition

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Specialist will send a referral closure letter as soon as possible, but no later than five calendar days. The Transition Specialist is required to enter a referral follow up in KMIS at initial, 6 month follow up, and 12 month follow up for referrals. This needs to be completed in KMIS as soon as possible, but no later than 15 calendar days. KMIS will be used to provide a reminder tracking system for referral follow-ups. If the parent and/or student request to not be contacted, then the Transition Specialist may close out the referral without attempting to contact two times at six-month intervals.

If the student indicates he or she is not interested in Pre-ETS services after submitting a **request for services** or after the Transition Specialist **completes the determination**, the Transition Specialist will reconnect with the student at least two times at six-month intervals each as long as the student would still meet criteria. (The two attempts need to be six months apart after the date received on the request for services. Therefore, Pre-ETS will try to reconnect with the student to determine if his/her interest has changed two times during the first year following the request for services). After two attempts and if the student is still not interested, the student's Pre-ETS case may be closed due to lack of interest. The Transition Specialist will send a closure letter as soon as possible, but no later than five calendar days. The Transition Specialist is required to narrate the attempts in the case file. If the parent and/or student request to not be contacted, then the Transition Specialist can close out the referral without attempting to contact two times at six-month intervals.

Guidance for the above policy

If this situation occurs for the Pre-ETS Transition Specialist, he/she will consult their Pre-ETS Manager to ensure various methods have been used to contact the student/parent (if applicable). If the Pre-ETS Manager agrees that the Pre-ETS Transition Specialist has made adequate attempts, then the Pre-ETS Transition Specialist will do the following:

- Close the 02 or 03 case as a status 15, and then reopen it as a Status 01.
- Record the last attempt to contact as the "initial referral follow-up" in KMIS referral follow-up.
- Reconnect with the student at least 2 times at six-month intervals each as long as the student would still meet criteria.

(The two attempts need to be six months apart after the initial referral. Therefore, Pre-ETS will try to reconnect with the student to determine if his/her interest has changed two times during the first year following the referral date.)

- After two attempts and if the student is still not interested, the student's Pre-ETS case may be close due to "lack of interest."

(The Pre-ETS Transition Specialist is required to enter a referral follow-up into KMIS at initial, 6-month follow-up, and 12-month follow-up for referrals. This needs to be completed in KMIS as soon as possible, but no later than 15 calendar days.)

- Send a Referral Closure letters as soon as possible, but no later than five calendar days.

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- Close the referral in KMIS. This needs to be completed in KMIS as soon as possible, but no later than 15 calendar days.

KMIS will be used to provide a reminder tracking system for referral follow-ups. If the parent and/or student requests not to be contacted, then the Pre-ETS Transition Specialist may close the out the referral without attempting to contact two times at six-month intervals.

Determining if criteria for participation in Pre-ETS are met

Key documents that may be used to verify that student meets the criteria to participate in Pre-ETS services are:

- The student's IEP. (The IEP should be based on disability, and therefore this criteria does not include IEPs for students in gifted programs unless they also have a disability).
- The 504 Plan.
- Medical records documenting disability.
- Verification of eligibility of Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) based on the student's disability. (For this criteria, the student must be *eligible* for SSI or SSDI based on disability. However, it does not mean that the student must *currently be receiving* a benefit or cash payment.) Students may request verification using the Social Security website. See instructions.
- Verification for enrollment in post-secondary education for individuals who meet the age range for a student with a disability. If a student with a disability is taking a "gap year" there are four pieces of documentation the individual needs to be considered enrolled in a recognized post-secondary education program. 1. Documentation that the individual with a disability graduated from secondary ed. 2. Documentation that the individual with a disability has been accepted into a post-secondary education institution/program. 3. Documentation of the individual with a disability's intention or confirmation that they have accepted the invitation to enter the post-secondary program. 4. Documentation that the individual with a disability has been informed by the institution that their "seat" or "spot" is being held for them. If a student with a disability is taking a typical summer break there are three pieces of documentation required to verify that the individual continues to be considered enrolled in a recognized education program. 1. Documentation that the individual with a disability graduated from secondary ed. 2. Documentation that the individual with a disability has been accepted into a post-secondary education institution/program. 3. Documentation of the individual with a disability intention or confirmation that they have accepted the invitation to enter the post-secondary program.

Instructions: [Social Security Administration Benefit Verification letter instructions](#)

If the school, student, or parent/guardian sent the IEP, 504 Plan, medical records or SSI/SSDI verification to be reviewed, then the Transition Specialist should proceed to making a determination of whether the criteria for participation are met. The Transition Specialist has 15 calendar days to complete determination from the date the Request for Services was received.

If there was no documentation provided for determination then the Transition Specialist shall request the documentation as soon as possible, but no later than five calendar days. If information was provided but it is not sufficient to make a determination, then the Pre-ETS Transition Specialist will

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ask for documentation to review from the parent or school. In these circumstances, the Pre-ETS Transition Specialist has 30 calendar days to complete determination from the date the Request for Services was received.

The Transition Specialist will send a letter to the student and parents, if applicable, to notify them of the determination decision as soon as possible, but no later than five calendar days. If the student does not meet the criteria to participate, the Transition Specialist will notify the parent/guardian (if applicable), student, and school (if referred and have an ROI) by phone and letter with the reason with their appeal rights as soon as possible, but no later than five calendar days.

If the student meets the criteria to participate, then the Transition Specialist will schedule an appointment to work with the student and parent/guardian, if appropriate, to jointly develop and complete the Pre-ETS plan, and enter into KMIS within 30 calendar days.

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Part 4 Pre-ETS Plan and Scope of Available Services

Initial Interview

To begin the process of developing a Pre-ETS Plan of services to be provided, the Transition Specialist will complete the initial interview with the student and parent/guardian (if applicable).

Pre-ETS Plan

The Transition Specialist will work with the student and parent/guardian (if appropriate) to develop the Pre-ETS Plan. The Plan identifies the services to be provided, participation responsibilities, and expectations. The Plan shall be written, signed, and finalized in KMIS within 30 calendar days from determination. The Plan shall be reviewed, finalized in KMIS, and signed by student at least annually by the Transition Specialist and the student (parent if applicable). The Plan narrative and services should reflect informed choice by the student, document the needs the student has based on records (IEP, 504 plan, or medical records), and needs expressed by other parties if applicable (parent, teachers, etc.) The plan needs to include evaluation criteria on how and when the student's progress will be evaluated. The Plan needs to be updated prior to dates expiring on the Plan. Amendments to the Plan do not take effect until agreed to and signed by student, parent (if applicable) and Transition Specialist.

Available services

RS is required to offer the Pre-ETS listed below. However not every service will be provided to each student, depending on his/her needs, interests and informed choice and depending on the capacity of the program within the available funding. The Pre-ETS plan will identify the specific services that will be provided and the projected timelines.

- Job Exploration Counseling
 - Provides students with disabilities the opportunity to match their skills and interests
 - Administration of vocational interest inventories
 - Review labor market information
 - Explore jobs/careers in the community
 - Connect the student to other resources in the community
 - Review the Kansas Career Navigator
- Instruction in self-advocacy (including instruction in person-centered planning), which may include peer mentoring (including peer mentoring from individuals with disabilities working in competitive integrated employment).
 - Empowers students with disabilities to express their needs and goals in a variety of settings like school and work

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- Helps students learn their rights and responsibilities under IDEA, 504, and ADA
 - Identifies self-advocacy skills and why they are important
 - Helps students learn to request accommodations, auxiliary aids or services, and supports
 - Helps the student build their own advocacy skills
 - Connects the students to other resources in the community
- Work-based learning experiences, which may include in-school or after school opportunities, or experience outside the traditional school setting (including internships), that is provided in an integrated environment in the community to the maximum extent possible
 - Pre-ETS will provide work-based learning experiences where youth can learn the skills necessary to succeed in the workplace and experience the benefits of earned income.
 - Facilitate job shadowing and/or mock interviews
 - Connect students to career track and/or other work-based learning programs
 - Identify paid and unpaid local businesses for work-based learning experience opportunities

Criteria to participate in paid work-based learning experiences

Rehabilitation Services will emphasize paid work-based learning experiences for qualifying students with disabilities. However, the number of paid work-based learning experiences in any given community are limited by funding, provider capacity, and available worksites.

- The student has to be within his or her last 18 months before exiting secondary school.
- The student has the ability to get to and from the work experience.
- The parent/legal guardian's signed approval to participate.
- The student is committed to completing 240 hours within a year.
- The student has the necessary supports such as but not limited to job coaching in place for the work experience if applicable.
- Any student with a disability who is not a U.S. citizen must have employment authorization documentation.
- The paid work-based learning experience is not allowed to occur during the school day unless the student has early release because he or she has met the high school graduation credits. Pre-ETS is not allowed to take over the school district responsibility to provide services to the student.
- A student who has been terminated or fired from a paid work based learning experience may not be able continue to participate in the experience. This would be determined by Pre-ETS manager on a case-by-case basis. The student will be able to continue to receive other available services if he or she continues to meet the criteria to participate in Pre-ETS.

Provider Agreement Service Descriptions

Service Description with Local Area Workforce Development Centers, Boards, and Operators

Service Description with Center for Independent Living Centers

Students participating in work-based learning experiences will be compensated at \$8.25 per hour. Payroll and workers compensation coverage will be processed through an RS contract with Key Staffing.

Key Staffing forms for student compensation

- Workplace readiness training to develop employment skills
 - Supplies students with disabilities with the opportunity to learn power skills necessary for success on the job; such as customer service, how to interact with co-workers, supervisors, being on time, etc.

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- Connect students with America Job Centers (AJC), **KANSASWORKS**
 - Identify resources to develop social and independent living skills
 - Identify and discuss employability skills
 - Connect the students to other resources in the community
- Counseling on opportunities for enrollment in comprehensive transition or postsecondary educational programs at institutions of higher education (universities, community colleges or technical schools)
 - Provides a clear path to students with disabilities employment future
 - Provide information on connecting students to education opportunities including Disability Support Services
 - Discuss reasonable accommodations and auxiliary aids for success in training and academic settings
 - Educate and inform students about post-secondary training programs
 - Connect the students to other resources in the community

34 CFR 361.48(a)(2)

In addition, Pre-ETS funds may be used for the provision of auxiliary aids and services for students with disabilities with sensory and communicative disorders who require such services to access Pre-ETS. Auxiliary aids and services ensure equal access to information, materials, services, and activities available to students with disabilities participating in Pre-ETS. *Provision of auxiliary aids and services under Pre-ETS requires the prior approval of the Pre-ETS Program Administrator.*

Example 1: Allowed with Pre-ETS funds — For example, screen reading software programs could be purchased to enable an individual who is blind to access information on a computer during a work-based learning experience. It is important to note that the screen reader software for individuals who are blind or visually-impaired, not the computer on which it is installed, meets the definition of “auxiliary aids and services.”

Example 2: Allowed with Pre-ETS funds — As another example, for an individual who is deaf, interpreter services or video-based telecommunication products could be purchased to ensure access to information in activities related to job exploration counseling or other Pre-ETS.

Example 3: Not Allowed with Pre-ETS funds — On the other hand, personal devices and services do not meet the definition of auxiliary aids and services. Personal devices and services include individually-prescribed devices, such as prescription eyeglasses or hearing aids, readers for personal use or study, or services of a personal nature. If a student with a disability requires personal devices or services or individually-prescribed assistive technology, RS must work with the student to determine whether he or she meets the eligibility criteria of vocational rehabilitation. If yes, then an Individual Plan for Employment should be developed to include those additional services through VR funding, not Pre-ETS funding.

Example 4: Not Allowed with Pre-ETS funds — In addition, other services which cannot be funded by Pre-ETS may be determined necessary for the student to effectively participate in

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Pre-ETS services. Such services may include job coaching, clothing for work-based learning experiences, or transportation. In such cases, if the student is eligible for VR then an IPE should be developed to include these additional services through VR funding, not Pre-ETS funding.

As a result (as in Examples 3 and 4), the student may have both Pre-ETS and VR cases open at the same time in order to coordinate the provision of necessary services.

Group services

Pre-ETS may be provided in individual settings, as described above, or in group settings. All group setting participants have to be active Pre-ETS students with a Pre-ETS plan.

Below are examples of services in a group setting:

General job exploration counseling in a group setting may be provided in a classroom or community setting and could include:

- Information regarding in-demand industry sectors and occupations, as well as nontraditional employment.
- Information about labor market composition.
- Administration of vocational interest inventories.
- Identification of career pathways of interest to the students.

Work-based learning experiences in a group setting may include:

- Coordinating a school-based program of job training and informational interviews to research employers.
- Work-site tours to learn about necessary job skills.
- Job shadowing.
- Mentoring opportunities in the community.

Counseling on opportunities for enrollment in transition or post-secondary educational programs at Institutions of Higher Education in a group setting may include providing information on:

- Course offerings.
- Career options.
- The types of academic and occupational training needed to succeed in the workplace.
- Postsecondary opportunities associated with career fields or pathways.

Workplace readiness training services may be offered in a generalized manner in a classroom or other such group settings to provide programming to assist students with disabilities to develop social skills and independent living skills necessary to prepare for eventual employment. These services could teach skills such as:

- Communication and interpersonal skills.
- Financial literacy.
- Group orientation and mobility skills (i.e., to access workplace readiness training or to learn to travel independently).
- Job-seeking skills.
- Understanding employer expectations for punctuality and performance, as well as other “soft” skills necessary for employment.

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Instruction in self-advocacy services may be provided through generalized classroom lessons in which students:

- Learn about their rights and responsibilities.
- Learn how to request accommodations or services and supports.
- Communicate their thoughts, concerns, and needs, in order to prepare them for peer mentoring opportunities with individuals working in their area(s) of interest.

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Part 5 Service Codes (Pre-ETS only) and Spending Authorities

As part of the RS fiscal accountability standards, each Pre-ETS Transition Specialist has a spending authority which permits him or her to independently authorize and pay for services *within the specified authority*. Authorizations that exceed the Transition Specialist's authority must receive additional approval through the exceptions process.

To request such approval, the Transition Specialist completes an exception form indicating the justification on why the service is necessary and required.

- The Pre-ETS Manager reviews such requests. The Manager has authority to approve \$500 dollars more than the Pre-ETS Transition Specialist spending authority. In the event that the Pre-ETS Manager is absent or not available the RS Program Administrator has the authority to approve \$500 dollars over the Pre-ETS Transition Specialist spending authority.
- If the request is above the Pre-ETS Manager's spending authority then it is sent to the Statewide Pre-ETS Program Administrator for approval.

Exceptions may be approved or denied. Documentation of exception decisions must be maintained in the case file. Copies of approved exception forms must be provided to the Transition Specialist, Pre-ETS Manager, RS Program Administrator and the Statewide Pre-ETS Program Administrator.

In the table below, LOC refers to the "life of the case," meaning that the total amount expended for any given service over the entire time the case is open may not exceed the stated spending authority unless an exception is approved in advance. PA refers to "per authorization," meaning that any one authorization may not exceed the stated spending authority although there may be multiple authorizations made during the case.

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Service Code	Unit	Examples	Transition Specialist spending authority
450 Job exploration counseling	Each	Provided by Pre-ETS Service Provider Agreement	\$500 LOC
451 Instruction in self-advocacy	Each	Provided by Pre-ETS Service Provider Agreement	\$500 LOC
452 Workplace readiness training	Each	Provided by Pre-ETS Service Provider Agreement	\$500 LOC
453 Counseling on opportunities for enrollment in comprehensive transition or postsecondary educational programs at institutions of higher education	Each	Provided by Pre-ETS Service Provider Agreement	\$500 LOC
454 Work-based learning experiences	Hour	Provided by Pre-ETS Service Provider Agreement	\$1,090 LOC No exceptions available
455 Work-based learning experiences student wages	Hour	Key Staffing (temporary employment agency contracted by RS to provide payroll services and workers compensation coverage)	\$3,499.20 LOC No exceptions available
456 Work-based learning experiences successful completion	Each	Service Provider Agreement	\$1750 LOC No exceptions available
457 Auxiliary aids and services for students who are deaf or hard of hearing Hourly fee not to exceed \$52 for level IV and V level certification without exception approval through administration office for interpreters not on state contract. Rate for note takers: Current minimum wage and not to exceed 30 hours per week. (service is only available when necessary to participate in the Pre-ETS services)	Hour	Qualified interpreters on-site or through video remote interpreting (VRI) services	\$3,000 LOC Refer to Part 12a of the policy manual for State Contract use

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<p>458 Travel Time for Sign Language Interpreters (service is only available when necessary to participate in the Pre-ETS services)</p>	<p>Hour</p>	<p>Hourly professional fee for travel time. This service requires approval from the Administration Office. Mileage would be Service Code 459</p>	<p>\$150 PA</p>
<p>459 Mileage for Sign Language Interpreters Rate: The mileage rate will be indexed to 65% of the State of Kansas official mileage rate as published by the Department of Administration each July. Annual changes will be announced by Rehabilitation Services Administration prior to implementation. Effective March 23, 2016, the mileage rate is 35 cents per mile. Remember: Mileage must be based on an estimate of actual miles necessary to carry out the service, and not a lump sum or “stipend” amount. Mileage may be paid door-to-door, sometimes referred to as portal-to-portal. Currently vendor mileage must be entered into a KMIS vendor table before it can be authorized. (service is only available when necessary to participate in the Pre-ETS services)</p>	<p>Mile</p>	<p>Mileage for Sign Language Interpreters</p>	<p>\$200 PA</p>

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<p>460 Auxiliary aids for students who are deaf or hard of hearing (service is only available when necessary to participate in the Pre-ETS services)</p>	<p>Each</p>	<p>Note takers; real-time computer-aided transcription services; written materials; exchange of written notes; telephone handset amplifiers; assistive listening devices; assistive listening systems; telephones compatible with hearing aids; closed caption decoders; open and closed captioning, including real-time captioning; voice, text, and video-based telecommunications products and systems, including text telephones (TTYs), videophones, and captioned telephones, or equally effective telecommunications devices; videotext displays; accessible electronic and information technology; or other effective methods of making aurally delivered information available to individuals who are deaf or hard of hearing; acquisition or modification of equipment or devices; and other similar services and actions</p>	<p>\$250 LOC</p>
<p>461 Auxiliary aids and services for students who are blind or visually impaired (service is only available when necessary to participate in the Pre-ETS services)</p>	<p>Each</p>	<p>Qualified readers; taped texts; audio recordings; Brailled materials; optical readers; secondary auditory programs (SAP); large print materials; or other effective methods of making visually delivered materials available to students who are blind or have low vision; acquisition or modification of equipment or devices; and other similar services and actions</p>	<p>\$500 LOC</p>

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462 Empower Me Workshop	Each	Service Provider Agreement	\$350 LOC No exceptions available
463 IEP Meeting	N/A	Provided in-house by Pre-ETS	None
464 VR Collaboration Meeting	N/A	Provided in-house by Pre-ETS	None
465 DCF Foster Care/Independent Living Collaboration Meeting	N/A	Provided in-house by Pre-ETS	None

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PART Fiscal Accountability and Authorization of Services

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Section 7 Pre-Employment Transition Services (Pre-ETS)

Part 6 Fiscal Accountability and Authorization of Services

Synopsis of federal requirements

Rehabilitation Services (RS) must employ methods of administration to assure the proper and efficient implementation of the program. These methods must include procedures to ensure accurate data collection and financial accountability.

34 CFR 361.12

As a state agency, Pre-ETS must expend and account for public funds in accordance with state and federal laws and procedures. Fiscal control and accounting procedures must permit the tracing of funds to a level of expenditures adequate to establish that such funds were spent in accordance with federal requirements and that there have been no violations related to restricted or prohibited uses of funds based on applicable laws.

34 CRF 80.20(a)

RS must have sufficient fiscal controls in order to track specific expenditures and assure that the expenditures were made only for the allowable purposes authorized for the Pre-ETS program. Payments made directly to Pre-ETS students must be allowable, authorized and supported by original receipts, bank records, lease or rental agreements or other documentation.

Reference: Rehabilitation Services Administration 2012 Monitoring Report

Authorizing services

All services to be provided for students must be authorized in advance and paid through the Kansas Management Information System (KMIS). KMIS tracks all service authorizations (obligations) and payments.

All services must be authorized before they are provided in order for Pre-ETS to pay for them. This action is accomplished by completing a Service Authorization on KMIS. The prior written Service Authorization must be issued before the service begins. Only Pre-ETS Managers, Program Administrators, or assigned Administration Office personnel can finalize Service Authorizations.

When authorizing services, the Pre-ETS Transition Specialist must determine the appropriate payee and payment method.

Authorizations and payments to vendors

A Service Authorization (similar to a purchase order) is issued to the vendor for a specified good or service and at a specified cost. Upon completion of the service or delivery of the item, the vendor provides an invoice to Pre-ETS for payment.

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Vendors include:

- Service providers for whom payment rates are established through provider agreement.
- Vendors who sell specified goods and services. If an item is available through a state contract, the contract must be used for the purchase unless a waiver (prior authorization) is provided in advance by DCF Procurement.

Procedures related to vendor authorizations and payments

- The vendor must be willing to accept the Service Authorization from Pre-ETS and invoice Pre-ETS for the good upon delivery or the service upon completion.
- The vendor must have a W-9 form on file with the state's accounting system.
- A Service Authorization identifying the services, goods, or supports must be sent in advance to the vendor.
- All purchases are exempt from state and local sales tax. A copy of the tax-exempt certificate is available at the following link:
http://dcfnet.dcf.ks.gov/West/Documents/Divisions/FiscalServices/Tax%20Exempt_Exp_10_01_20.pdf
- Upon receipt of the invoice, payments need to be made as soon as possible, but no longer than 30 calendar days.
- An Auxiliary Aids Equipment Loan Form must be completed by the student and Pre-ETS Transition Specialist for equipment purchased, and the form must be maintained in the case file.
- Vendor reports for services provided, as specified in the Service Descriptions, must be maintained in the case file. These reports are supporting documentation that the funds were used for the purpose specified and as allowed by applicable statutes.

Fiscal documents

For each purchase, all the associated authorizations and documentation should be grouped together for filing in the case file. Authorizations and documentation to be grouped should include the following, as applicable to the specific purchase: the service authorization, payment authorization, invoices, equipment loan forms and receipts/purchase documentation.

Payment procedures

Payments for items on a Service Authorization are created by Pre-ETS field staff. The Payment Authorization may be approved only by the Pre-ETS Manager, Program Administrator or Statewide Pre-ETS Program Administrator. Every attempt will be made to process payments within 72 hours of receiving the invoice. Payments must be completed within 30 days from the day equipment was received by the student or Pre-ETS Transition Specialist or the day the invoice is received in the field office (whichever date is later), according to the Kansas Prompt Payment Act. Normally allow seven to 10 days for a payment to be processed so that the warrant will be dated by the 30th day.

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Outstanding service authorizations must be monitored. Payments after the authorization expiration date will not be permitted because of federal “period of performance” requirements. KMIS will auto date all new authorizations with a one-year expiration date. If an authorization expires and the service is still needed a new authorization must be created. **You are required to send the vender a cancellation notice of the expired authorization.**

You are only able to unauthorize the service authorization if you have not finalized the service authorization. If you are needing to cancel the authorization, you are required to do the following steps.

1. Staff need to call/email to speak with the provider/vendor to let them know and ensure there are no pending bills associated with that authorization
2. Send the cancellation notice to them
3. Send to your RS Manager to cancel the authorization on KMIS
4. Narrate your conversation, when you sent cancellation notice, person you spoke with, and authorization numbers that you cancelled on the date that it occurred
5. Staple the authorizations and cancellation notice together and put in case file

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PART Case Transfer Guidelines

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Section 7 Pre-Employment Transition Services (Pre-ETS)

Part 7 Case Transfer Guidelines

Every effort should be made to maintain contact with a student in the event he or she relocates.

If a student relocates, the Pre-ETS Transition Specialist will inform his or her Pre-ETS Manager to facilitate the transfer of the case on Pre-ETS KMIS.

The current Pre-ETS Transition Specialist will update the student's address in Pre-ETS KMIS. The current Pre-ETS Transition Specialist will send an email or call the new Pre-ETS Transition Specialist regarding the services provided and the services the student still pending.

Then Pre-ETS Manager will finalize the transfer on KMIS.

It is essential that Pre-ETS staff keep students engaged to facilitate prompt transfer. It is best practice for the current Pre-ETS Transition Specialist to coordinate a conference call with the student and new Transition Specialist to facilitate introductions, explain the case status and encourage ongoing involvement. A specific date and time should be coordinated for the student and new Transition Specialist to meet.

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PART Case File Documentation and Narrative

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Part 8 Case File Documentation and Narrative

Documentation is intended to meet, but not exceed, the federal requirements for records of service. Pre-ETS staff will exercise professional judgment and discretion in determining the nature, scope and extent of relevant information to be included in the record. Information should be limited to that which is necessary and sufficient to show the basis and justification for determination decisions, service decisions and the expenditure of public funds.

The Pre-ETS Plan should be written with sufficient detail to avoid any misunderstanding about services and responsibilities.

Duplicate and extraneous materials do not need to be kept in the record. Documentation of a decision should be sufficient to show that the decision is reasonable, based on adequate fact and information, correctly applies policy, and that the student participated in the decision.

Generally, narratives should address:

- What occurred: (decision made, student reported progress, student progress and outcomes during the session, discussions of required services, information requested, etc.)
- An explanation of what occurred, if needed.
- A description of the student's involvement in what occurred.
- A brief notation of the next step.

Narratives are necessary only for information that cannot be found in other records.

Documentation guide

When viewed as a whole, the case file (record of services) should reflect:

- The quality and substantiality of the services provided by Pre-ETS.
- Evidence of the student's full involvement and participation in the available services.
- Maintenance of appropriate and timely contact with the student, with no undue or unwarranted delays.
- Timeliness of services provided with no undue or unwarranted delays. The case file should show evidence that Pre-ETS Staff responded to students in a timely way.
- That the overall case shows an emphasis on helping the student gain employment skills.

Narratives are necessary for information that cannot be found or not clearly shown in other records. Narratives are essential to recording the Pre-ETS Transition Specialist rationale for actions taken. Generally, narratives should address: what occurred; the student's involvement; decisions made; student progress/outcomes; information requested; each student contact; attempted student contacts; other party contacts, such as guardians, agencies, providers, employers; and suggested next steps. Narrative entries should be dated and include the Pre-ETS Transition Specialist's initials. If other staff add to the narrative, they should sign their full names.

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Care should be taken to assure that other student names aren't inadvertently placed in a service record. For example, if multiple student names appear on an e-mail message to be filed in the service record, black out all names/information that do not relate to the specific student.

Progress notes from vendors (contractors/service providers) need to clearly identify the vendor as the source.

Any letters or documents that are mailed need to have a date mailed noted on the document that was mailed to the student, parent, school, provider, etc. The case file narrative also needs to record the letter or document being sent and the date.

All narratives must be maintained on the regional shared drive.

Case file organization

The information filed in the service record should be organized as follows:

Left section:

- Referral
- Signed and date stamped Request for Services
- Signed and dated Pre-ETS Plan and Pre-ETS Plan reviews
- Determination
- Documentation verifying student meets the criteria for participation in Pre-ETS
- IEP, Section 504 Plan, other disability documentation, SSI/SSDI eligibility verification

Right section:

- Student history (KMIS printout)
- Closure letter
- KMIS printout of closure screens (after implementation of revised screens)
- Case narrative
- Required Services (KMIS printouts)
- Initial Interview
- Service provider reports
- Correspondence, such as referral letters and authorization cover letters
- Release of information forms
- Authorization and payment records
- Equipment Loan reports

Pre-ETS Transition Specialists have the flexibility to divide each section described above into two parts for ease of handling of lengthy case files.

Information in the case file should be in chronological order, with the most recent information on top.

Every effort should be taken to keep the file folder free of duplicate and unnecessary information.

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Frequency of Contact

Frequency of contact should be determined by the individual circumstances; however, at least monthly contact is required and must be documented in the narratives. Examples of a form of contact would be phone call to the student, email to the student (if appropriate), and/or face-to-face meeting with the student. The form of contact should be based on the student's preference of contact. The Transition Specialist is to provide services face-to-face to the student at least every other month to continue to make progress learning and developing the pre-employment skills through the required services. If services are interrupted or there is a loss of contact, the reasons must be entered in the case narrative. The narratives should also reflect what efforts being taken to resume services.

Progress notes

Documentation must include identification of student's progress, and interventions or action plans used to address issues or concerns, if any. Progress notes may be found in Pre-ETS Transition Specialist narratives or in reports from service providers.

Records retention

Service records will be retained for five years after the closure of the case.

At each calendar year, the Administration Office will send the Field Office Records Retention Officers a list of cases closed during that period. These lists should be retained for future reference in determining which files can be destroyed.

At the end of each calendar year, the Field Office Records Retention Officers should prepare a list of records they intend to destroy. This list will be sent to the RS Administration Retention Officer for approval prior to destroying any records.

Specific guidelines for entering Pre-ETS activities/contacts in KMIS

The Pre-ETS Transition Specialists will enter into Pre-ETS KMIS the following information for each required service they make with each student. The Pre-ETS Transition Specialist will also be required to have a more detailed narrative in their case notes of each contact and required service with the student maintained on regional R drive. The narratives must be entered into KMIS and regional R drive as soon as possible, but no later than 15 calendar days.

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Job exploration counseling Service Code: 450	Instruction	Examples
Date	This is the date the service was provided.	05/12/2017
Group/Individual	Did this occur in a group or individual setting?	This was completed individually. This was completed in a group setting.
Activities	What was provided to the student?	Reviewed Kansas Career Navigator with student, researched CNA requirements, completed my next move interest inventory
Provider	This is who provided the service.	Pre-ETS Transition Specialist, workforce center, CIL
Activity location	Where did the activity take place?	DCF office, Ellis High School, Public Library
Progress	The progress that the student has made. This reflect and discuss the pre-assessment competencies.	The student has decided they are interested in being a certified nursing assistant. The student has met all the competencies in job exploration.
Next Steps	The next steps that Pre-ETS and student will be making.	Pre-ETS has scheduled a meeting for 6/12/2017 to work on training programs for CNA in post-secondary required service.

Instruction on Self-Advocacy Service Code: 451	Instruction	Examples
Date	This is the date the service was provided.	05/12/2017
Group/Individual	Did this occur in a group or individual setting?	This was completed individually. This was completed in a group setting.
Activities	What was provided to the student?	The student received self-advocacy from provider agreement. The Pre-ETS staff used the soaring materials from unit 1.
Provider	This is who provided the service.	Pre-ETS Transition Specialist, workforce center, CIL
Activity location	Where did the activity take place?	DCF office, Ellis High School, Public Library, CIL
Progress	The progress that the student has made. This reflect and discuss the pre-post assessment competencies.	The student understands their disability and can clearly describe to others. The student has improved his level of proficiency to very good.
Next Steps	The next steps that Pre-ETS and student will be making.	Pre-ETS has scheduled a meeting for 6/12/2017 to continue to work on self-advocacy competency describing necessary accommodations for completing tasks.

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Workplace readiness training Service Code: 452	Instruction	Examples
Date	This is the date the service was provided.	05/12/2017
Group/Individual	Did this occur in a group or individual setting?	This was completed individually. This was completed in a group setting.
Activities	What was provided to the student?	The student attended a class through provider agreement for job preparation. The Pre-ETS Transition Specialist presented materials from unit 2 working on communication with employers.
Provider	This is who provided the service.	Pre-ETS Transition Specialist, workforce center, CIL
Activity location	Where did the activity take place?	DCF office, Ellis High School, Public Library, CIL, Workforce Center
Progress	The progress that the student has made. This reflect and discuss the pre-post assessment competencies.	The student has learned how to communicate with co-workers & supervisors. The student understands time management skills to how up to work on time. The student has improved his level of proficiency to very good on both competencies.
Next Steps	The next steps that Pre-ETS and student will be making.	Pre-ETS has scheduled a meeting for 6/12/2017 to continue to work on work-readiness skills.

Counseling on opportunities for enrollment in comprehensive transition or postsecondary education programs Service Code: 453	Instruction	Examples
Date	This is the date the service was provided.	05/12/2017
Group/Individual	Did this occur in a group or individual setting?	This was completed individually. This was completed in a group setting.
Activities	What was provided to the student?	The Pre-ETS staff discussed and connected them to the disability access office through the college campus. The Pre-ETS Transition Specialist and student discussed accommodations he/she would need in college.
Provider	This is who provided the service.	Pre-ETS Transition Specialist
Activity location	Where did the activity take place?	DCF office, Ellis High School, Public Library, CIL, Workforce Center
Progress	The progress that the student has made. This reflect and discuss the pre-post assessment competencies.	The student understands where to access disability services through the college. The student understands what accommodations they need for college. The student has improved his level of proficiency to very good on the competency.

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Next Steps	The next steps that Pre-ETS and student will be making.	Pre-ETS has scheduled a meeting for 6/12/2017 to continue to work on discussions in postsecondary education.
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Work-Based Learning Experiences Service Code: 454	Instruction	Examples
Date	This is the date the service was provided.	05/12/2017
Group/Individual	Did this occur in a group or individual setting?	This was completed individually. This was completed in a group setting.
Activities	What was provided to the student?	The student participated in a CNA job shadow. The student participated in paid work experience. The student participated in mock interview.
Hours	How many hours of paid work experience did the student work?	The student worked X amount of hours during the paid work experience.
Provider	This is who provided the service.	Pre-ETS Transition Specialist, workforce center, CIL
Activity location	Where did the activity take place?	DCF office, Ellis High School, Public Library, employer site
Progress	The progress that the student has made. This reflect and discuss the pre-post assessment competencies.	The student has learned how to communicate during mock interview. The student has improved his level of proficiency to very good on this competency
Next Steps	The next steps that Pre-ETS and student will be making.	Pre-ETS has scheduled a meeting for 6/12/2017 with VR for a smooth transition.

Empower Me Workshop Service Code: 462	Instruction	Examples
Date	This is the date the service was provided.	05/12/2017
Group/Individual	Did this occur in a group or individual setting?	This was completed in a group setting.
Activities	What was provided to the student?	The student worked on self-advocacy, work-readiness, discussions on post-secondary training, and job exploration.
Provider	This is who provided the service.	KYEA
Activity location	Where did the activity take place?	DCF office, Ellis High School, Public Library, CIL, Workforce Center
Progress	The progress that the student has made. This reflect and discuss the pre-post assessment competencies.	The student learned self-advocacy skills, work-readiness skills, reviewed post-secondary training, and job exploration discussions. The Pre-ETS Transition Specialist will continue to work on these skills learning during the workshop
Next Steps	The next steps that Pre-ETS and student will be making.	Pre-ETS has scheduled a meeting for 6/12/2017 to continue working on Pre-ETS work readiness training.

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IEP Meeting Service Code: 463	Instruction	Examples
Date	This is the date the service was provided.	05/12/2017
Group/Individual	Did this occur in a group or individual setting?	This was completed in an individual setting.
Activities	What was provided to the student?	Pre-ETS attended the IEP meeting with the student and school personnel.
Provider	This is who provided the service.	Pre-ETS Transition Specialist
Activity location	Where did the activity take place?	Ellis High School
Progress	The progress that the student has made. This reflect and discuss the pre-post assessment competencies.	The student advocated their transition goals during the IEP.
Next Steps	The next steps that Pre-ETS and student will be making.	Pre-ETS has scheduled a meeting for 6/12/2017 to continue working on Pre-ETS work readiness training.

VR Collaboration Meeting Service Code: 464	Instruction	Examples
Date	This is the date the service was provided.	05/12/2017
Group/Individual	Did this occur in a group or individual setting?	This was completed in a individual setting.
Activities	What was provided to the student?	The student attended the meeting with the student and VR counselor.
Provider	This is who provided the service.	Pre-ETS Transition Specialist
Activity location	Where did the activity take place?	DCF office, Ellis High School, Public Library, CIL, Workforce Center
Progress	The progress that the student has made. This reflect and discuss the pre-post assessment competencies.	The student discussed the progress he has been making in Pre-ETS. He discussed his disability and advocated his needs during this meeting.
Next Steps	The next steps that Pre-ETS and student will be making.	Pre-ETS has scheduled a meeting for 6/12/2017 to continue working on Pre-ETS work readiness training.

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DCF Foster Care/Independent Living Collaboration Meeting Service Code: 465	Instruction	Examples
Date	This is the date the service was provided.	05/12/2017
Group/Individual	Did this occur in a group or individual setting?	This was completed in an individual setting.
Activities	What was provided to the student?	Pre-ETS and DCF FC/IL had a collaboration meeting with the student.
Provider	This is who provided the service.	Pre-ETS Transition Specialist
Activity location	Where did the activity take place?	DCF office, Ellis High School, Public Library, CIL, Workforce Center
Progress	The progress that the student has made. This reflect and discuss the pre-post assessment competencies.	The student and staff discussed the services and progress that had been provided to assist with ongoing services.
Next Steps	The next steps that Pre-ETS and student will be making.	Pre-ETS has scheduled a meeting for 6/12/2017 to continue working on Pre-ETS work readiness training.

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PART Pre-ETS KMIS Case Status Codes

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Part 9 Pre-ETS KMIS Case Status Codes

Case status codes are used to assure consistency in tracking a student's status in his or her Pre-ETS case. Case status changes will be automatically recorded in KMIS.

01	Referral
02	Request for services
03	Determination
04	Pre-ETS plan
05	Services being provided
14	Referral Closure
15	Closure

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PART Collaboration with Vocational Rehabilitation Services

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Section 7 Pre-Employment Transition Services (Pre-ETS)

Part 10 Collaboration with Vocational Rehabilitation (VR) Services

The Rehabilitation Act of 1973, as amended through the Workforce Innovation and Opportunity Act, establishes a continuum of services to assist students and youth with disabilities in successfully transitioning from school to the adult world of work and independent living. This continuum includes:

- Pre-ETS
- Transition services through the Vocational Rehabilitation (VR) program
- VR Services

Coordination and collaboration are essential to assure a smooth transition and to optimize the individual's opportunity to achieve competitive integrated employment.

Collaboration between Pre-ETS and VR

Option 1

A student who is receiving Pre-ETS services may need other services which are not within the scope of available Pre-ETS services and therefore cannot be funded with Pre-ETS dollars or cannot be provided without being eligible for VR services with an approved IPE. Such services may include job coaching, clothing for work-based learning experiences, or transportation. At the time of closing the Pre-ETS case, the student, VR counselor and Pre-ETS Transition Specialist should coordinate a meeting to discuss progress and services for a smooth transition to VR services.

In such cases, if a VR service is necessary for the student to participate in Pre-ETS, then the VR Counselor and Pre-ETS Transition Specialist will coordinate to:

- Facilitate the student's application for VR services.
- Facilitate documentation necessary for the VR Counselor to determine eligibility for VR services. (Since Pre-ETS and VR are both under the Rehabilitation Services/Vocational Rehabilitation umbrella, records may be shared between programs.) VR counselor will update the Pre-ETS Transition Specialist if the student is eligible or ineligible for VR services once it has been determined.
- In such cases, if the student is eligible for VR then an IPE should be developed to include these additional services through VR funding, not Pre-ETS funding.
- Discuss development of the VR Individual Plan for Employment (IPE) to assure inclusion of necessary services.
- If the student is eligible and has an IPE, the VR Counselor will authorize necessary services and notify the student and Pre-ETS Transition Specialist.

As a result, the student may have both Pre-ETS and VR cases open at the same time in order to coordinate the provision of necessary services. If a VR case and Pre-ETS case are open at the same time, the Pre-ETS Transition Specialist will keep the VR Counselor updated quarterly regarding the services the student is receiving in Pre-ETS. The Pre-ETS Transition Specialist and the VR counselor will collaborate and provide information on quarterly progress. This will be documented in the narrative. There may be situations when the student is participating in a paid work-based learning

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through Pre-ETS and receiving services through VR, such as job coaching, to support the work-based learning. In such situations the Pre-ETS Transition Specialist and VR Counselor need to discuss the case at least biweekly by phone, skype, or in person. If job coaching is a service that the VR counselor is providing for the paid work-based learning experience, then the Pre-ETS Transition Specialist should be involved with the conversations with the job coach provider. The VR counselor would complete the job coaching referral at the same time that the Pre-ETS Transition Specialist makes a referral for the paid work-based learning experience. The best practice would be VR Counselor, Pre-ETS Transition Specialist, Job coach provider, and Paid Work Based Learning Experience Service Provider all meet to discuss process and roles. The Pre-ETS Transition Specialist should be copied on all job coaching reports related to the paid work-based learning experience.

The following are categories for funding sources to help explain the notice of interpretation of the federal register rules and regulations that was public on February 28th, 2020.

Seamless services

Coordination/collaboration between VR Counselors and Pre-ETS Specialists is essential to assure that students with disabilities have access to the continuum of services they need to become employed and self-reliant. When coordinating services, it's important to follow these guidelines listed below for assignment of costs to the appropriate funding source.

Category A

Funds set aside for Pre-Employment Transition Services (Pre-ETS) will be used to pay for the following required Pre-ETS services:

- Job exploration counseling
- Instruction in-self-advocacy
- Work place readiness training
- Counseling on opportunities for enrollment in comprehensive transition or post-secondary education programs
- Work-based learning experiences

Auxiliary aids and services may be funded under this category if they are necessary for the student to access or participate in the required Pre-ETS services.

Category B

Additional VR services may be paid for with the Pre-ETS set-aside funds if all of the following conditions are met:

- The services are necessary for the student to benefit from one or more of the required Pre-ETS services, and
- The student has been determined eligible for vocational rehabilitation (VR) services, and
- The services are included on an Individual Plan for Employment (IPE) and fall into one of the following categories:
 - Assessment services

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- Counseling and guidance
- Referral services
- Maintenance (required clothing, – necessary, reasonable and allocable for provision or receipt of Pre-ETS)
- Transportation
- Personal assistance services
- Rehabilitation Teaching and Orientation and Mobility Services
- Rehabilitation Technology (Electronic device that doesn't constitute an auxiliary aid or service)
- Services to Family Members (example: transportation, maintenance, personal care services, interpreter services)
- Job Coaching
- Books, tools, or other training material to participate in Pre-ETS

Standard VR policies pertaining to the provision of these services apply.

Category C

The following services may not be paid for with the Pre-ETS set-aside funds. However, if these services are needed for a student who is eligible for VR to achieve competitive integrated employment, then they can be included on an IPE and paid for with VR dollars.

- Medical services
- Post-secondary education
- Vocational training
- Job search
- Job placement
- Job retention
- Job follow up
- Job follow-along services
- Any other necessary services within the scope of available VR services.

Option 2

After completing Pre-ETS services or aging out, the student may wish to pursue competitive integrated employment through VR services. If the student does not already have an open VR case under Option 1 described above, the Pre-ETS Transition Specialist will assist in coordinating the VR application process and providing copies of Pre-ETS records to the VR Counselor. At the time of closing the Pre-ETS case, the student, VR Counselor and Pre-ETS Transition Specialist should coordinate a meeting to discuss progress and services for a smooth transition to VR services.

Process for referring to VR Services

Pre-ETS staff will complete the student information sheet and release of information to VR when the student or parent/guardian (if applicable) have expressed interest in applying for VR. If the student has decided to apply for VR, the Pre-ETS staff will provide the VR Counselor with the VR application, release of information, copy of the Pre-ETS Request for Services, IEP, initial interview, and services.

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Best practice is for Pre-ETS to help coordinate an initial VR meeting where the student, parent/guardian if appropriate, VR counselor, and Pre-ETS Transition Specialist all attend.

Youth with disabilities may apply for VR services directly or be referred by the Local Education Agency (LEA), RS will not implement any arbitrary age or time frame limit on when a youth with a disability can submit an application for VR and transition services. Federal regulations define youth with disabilities as individuals who are not younger than 14 years of age and not older than 24 years of age. RS will coordinate with the individual, the LEAs and the individual's IEP regarding initiation of and provision of services. The Pre-ETS Transition Specialist must complete the referral to VR within 30 days from the date the student desired on the Pre-ETS Plan.

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Section 7 Pre-Employment Transition Services (Pre-ETS)

Part 11 Case Closures

The student and parent/guardian (if applicable) must be consulted prior to case closure. The Transition Specialist must close the case once the student no longer meets criteria as soon as possible, but no longer than 15 calendar days unless the Pre-ETS Transition Specialist hasn't received a bill from the vendor to finalize the payments. The narrative should reflect the reason why closure hasn't occurred. The Transition Specialist can use the student's graduation date for determining when the student is no longer in a recognized education program for case closure if the student has decided not to participate in any recognized education programs after secondary education. The Transition Specialist must make contact with the student within 15 calendar days prior to closing the case to discuss closure with the student and to ensure the closure is appropriate. The Transition Specialist is required to send a closure letter documenting the reason for closure with the appeal rights within 15 calendar days of the date of closure. The Pre-ETS Transition Specialist needs to document the outcomes that the student achieved in all required services that the student participated in.

To close a case for unable to contact, the Transition Specialist should make three to five attempts to locate the student. Various methods, such as phone, text, mail, contacting school, contact name, etc., should be used. The Transition Specialist need to staff the case with Pre-ETS Manager prior to closing the case for unable to contact. The case closure process is the same for this situation.

Pre-ETS cases may be closed for the following reasons:

- The student is working with VR as his/her primary focus.
- The student has overcome all barriers and working in a competitive integrated employment setting.
- The student decided to pursue employment in a subminimum wage job.
- The student decided he or she didn't want to work.
- The student is attending post-secondary training.
- The student completed post-secondary training and is looking for employment, but they do not need VR services.
- The student has decided to participate in non-work activities.
- The student no longer meets the criteria.
- The student declined services.
 - Reason
- Pre-ETS cannot locate the student after repeated efforts.
- Other

Resuming Services After Case Closure

There may be instances when a case has been closed, but the student would like to resume services and meets criteria to participate in Pre-ETS. The Transition Specialist would document the situation in the narrative, review the information in the file and KMIS to ensure information and changes are not needed, and complete an updated Pre-ETS plan. The student would not be required to submit a new

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request for services. If new documentation is needed for the determination, then the Transition Specialist would need to obtain that information to update the determination. If the student wants to resume services and the student was closed, the closure would be deleted, and services would be continued under the same case number. The Transition Specialist would need to document in the narrative the reason the student wants to resume services and that determination documentation was reviewed to determine if the student still meets criteria. The Transition Specialist would also need to update the Pre-ETS plan unless it had not expired during the time it had been closed.

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PART Sign Language Interpreter Services

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Section 7 Pre-Employment Transition Services (Pre-ETS)

Part 12 Sign Language Interpreter Services

Requirements

Fees for sign language interpreting and related conditions such as minimum appointment times, coverage areas, mileage, cancellation policies and specializations, are governed by State Contracts issued by the Kansas Department of Administration. RS staff may schedule directly with the vendors on state contract.

Updates to this information about the state contracts are pending. Meanwhile the contracts may be found at:

https://supplier.sok.ks.gov/psc/sokfsprdsup/SUPPLIER/ERP/c/NUI_FRAMEWORK.PT_LANDINGPAGE.GBL?&

Search for contractors using the key words: sign language interpreting.

RS will schedule and authorize payment for certified and qualified sign language interpreters for appointments with people who are deaf or hard of hearing who use sign language for communication. They may require at least 24 hours' notice to find a qualified interpreter. The Kansas Commission for the Deaf and Hard of Hearing (KCDHH) may identify qualified interpreters and schedule them as a purchased service.

Written communication with persons who are deaf or hard of hearing is acceptable only:

- If used to set up appointments;
- If used to inform the person that an interpreter will be present at the appointment; or
- If specifically requested by the person who is deaf or hard of hearing.

RS is allowed to use sign language interpreters that are not on the state contract as long as we have not spent more than \$5000 during the state fiscal year with the specific sign language interpreter statewide. If \$5,000 is spent with a sign language interpreter, we would be required to use one of the contractors on the master statewide list.

Hourly fee not to exceed \$52 for level IV and V level certification without exception approval through administration office for interpreters not on state contract.

Rehabilitation Services (RS) Procedures

Interpreters must be on the state registry at the KCDHH, as required by state law, H.B. 2257 effective 7-1-93.

In situations where an interpreter is not listed on the state registry, the interpreter must contact KCDHH at (785) 267-6100 or toll-free at 1-800-432-0698 to register. Registration may be made over

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the phone by providing name, address, telephone number, certifications, and the sign language or sign systems that the interpreter can use, or by completing and mailing a registration card. The most common sign language or sign systems are American Sign Language (ASL), Pidgin Sign English (PSE), Conceptually Accurate Signed English (CASE), Sign Exact English (SEE) II, and oral.

When calling to schedule an interpreter, the following information is required:

- Date, time and location of appointment or appointments.
- Estimated length of appointment. When appointments are expected to last more than 3 hours, rest breaks for the interpreter will be required; or two interpreters rotating every 20 to 30 minutes may be scheduled.
- Topic or type of setting.
- Name of the individual(s), language preference or the need for special communications, specific interpreter selected by the individual(s), if known and appropriate. Note: Family members, roommates or individuals with other personal relationships may not be appropriate to use as interpreters. Staff should use discretion and consult with the client if possible. The Interpreter Code of Ethics requires the interpreter to decline the job if inappropriate.
- Contact person's name and phone number.
- Billing information such as the party responsible for payment, service authorization number or special billing instructions.

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Part 13 Appeals

Review of Pre-ETS Transition Specialist decisions

Students who are dissatisfied with any determination by the Pre-ETS Transition Specialist regarding the provision or denial of Pre-Employment Transition Services may request timely review of those determinations through a mediation process, informal resolution or formal hearing. A student's or applicant's representative may also make such a request.

Such requests must be made within 30 days of the agency decision in question.

Students are informed of their appeal rights in writing at key stages of the process. Key stages of the Pre-ETS process include, but are not limited to: request for services, determination, Pre-ETS Plan, Pre-ETS Plan amendments, any adverse action, and case closure.

Information provided to students and parents/guardians, if applicable, must include the name and address with whom to file requests for reviews. Information about the Client Assistance Program (CAP) must also be provided. This information will be made available in an accessible mode of communication.

Informal resolution: Students are encouraged to discuss any problems directly with their Pre-ETS Transition Specialist or Pre-ETS Transition Specialist's manager to see if the problem can be resolved. Or, an administrative review may be conducted by a RS Program Administrator who has not been involved in the case. Use of these informal methods is not required. If the student chooses not to pursue informal methods, or if the issues were not resolved informally, the next step is mediation or a formal hearing which must be requested within 30 days of the adverse action to the Kansas Office of Administrative Hearings.

Mediation: Applicants and eligible students may resolve disputes through mediation. Mediation services must be presented as an option whenever a student requests a fair hearing.

- Mediation is voluntary.
- Mediation may not be used to deny or delay the rights of an student to a fair hearing or to any other rights afforded that student under Title I of the Rehabilitation Act.
- Mediation must be conducted by qualified and impartial mediators.
- Services may not be suspended, reduced or terminated pending the mediation process. Exceptions to this requirement would include situations where the student requests the change in services, or situations where the student and/or his/her representative have obtained the services through misrepresentation, fraud or criminal conduct.
- If an agreement is reached, the mediator will put the agreement in writing.
- All information learned during mediation is confidential and cannot be used in subsequent appeal actions.

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Formal hearings (fair hearings): These hearings are conducted by Fair Hearing Officers from the Office of Administrative Hearings. These hearings must occur within 45 days of a student's request for review, unless resolution is achieved or the parties agree to a specific extension of time. While such a hearing is pending, services being provided under a Pre-ETS Plan may not be suspended, reduced or terminated unless requested by the student or unless there is evidence that the services have been obtained through misrepresentation or fraud. All requests for fair hearings must be forwarded to the Pre-ETS Statewide Pre-ETS Program Administrator, Deputy Directors, and RS Director.

During a fair hearing, the student or his/her representative and the agency have the opportunity to present evidence or witnesses and to question other witnesses and evidence. The student may be represented by an attorney or advocate if that is his/her choice. The hearings officer makes decisions based on the State Plan, the Rehabilitation Act, VR regulations and state policies. Decisions are provided to the student and RS Director within 30 days of the hearing.

In most situations, if the student is not represented by an attorney during fair hearings or other proceedings, RS will not be represented by an attorney. Exceptions will be made at the discretion of the RS Director. RS Program Administrators may seek consultation or technical assistance from the DCF Legal Department or local office Attorneys prior to the hearings or proceedings if appropriate.

Review of formal hearings (fair hearings) decisions: Kansas has established the following procedures for the review of decisions of the fair hearings officer.

- The student or the agency may request a review of the fair hearing decision. The authority for this review is vested in the Secretary of the Kansas Department for Children and Families (DCF), the director of the Designated State Agency. Per Kansas Statute 77-527, the Secretary delegates this authority to the State Appeals Committee. Such authority may not be delegated to RS, the Designated State Unit. Parties may submit additional evidence to the State Appeals Committee through legal briefs or presentation of oral arguments. Appeals committee decisions are presented to the Secretary for review, approval and signature.
- The student or the agency must file a petition for a review of the fair hearing decision within 15 days of the date of the decision, if the decision is delivered in person; or within 18 days of the date of the decision, if the decision is mailed.
- After the request for an impartial review, reasonable time extensions may be granted for good cause.
- The State Appeals Committee reviews the decision of the hearings officer to assure consistency with the State Plan, the Rehabilitation Act, VR regulations, and state policies consistent with federal requirements. Any decision of the fair hearings officer that supports the position of the Pre-ETS student can only be overturned or modified by the State Appeals Committee if there is clear and convincing evidence that the decision of the fair hearings officer was erroneous because it was contrary to the State Plan, the Rehabilitation Act, federal regulations, or state policies that are consistent with federal requirements.
- The decision of the State Appeals Committee/Secretary of DCF must be made within 30 days of receipt of legal briefs and oral arguments. A full written report of the decision and the rationale for the decision is provided to the applicant, eligible student or his/her representative, and to RS.

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District Court: The student may bring a civil action for review of decisions by hearings officers or the State Appeals Committee/Secretary of DCF. The civil action may be brought in any State court of competent jurisdiction or in a district court of the United States of competent jurisdiction without regard to the amount in controversy.

In such actions, the court:

- Shall receive the records related to the hearing and the records related to the state review;
- Shall hear additional evidence at the request of a party to the action; and
- Basing the decision of the court on the preponderance of the evidence, shall grant such relief as the court determines to be appropriate.

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PART Confidentiality

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Section 7 Pre-Employment Transition Services (Pre-ETS)

Part 14 Confidentiality

Protection, use, and release of personal information

Rehabilitation Services (RS) will safeguard the confidentiality of all personal information, including photographs and lists of names. All applicants and students who meet the criteria to participate and, as appropriate, those students' representatives, service providers, cooperating agencies, and interested persons are informed through appropriate modes of communication of the confidentiality of personal information and the conditions for accessing and releasing this information.

All applicants or their representatives are informed about the Pre-ETS need to collect personal information and the policies governing its use, including:

1. Identification of the authority under which information is collected.
2. Explanation of the principal purposes for which Pre-ETS intends to use or release the information.
3. Explanation of whether providing requested information to Pre-ETS is mandatory or voluntary and the effects of not providing requested information.
4. Identification of those situations in which Pre-ETS requires or does not require informed written consent of the student before information may be released.
5. Identification of other entities to which information is routinely released.

An explanation of policies and procedures affecting personal information will be provided to each student in that student's native language or through the appropriate mode of communication.

Release to other programs in the Department for Children and Families (DCF)

Pre-ETS staff may release student information without a signed release from the student or parent/guardian (if applicable) to other programs within DCF *on a need-to-know basis*. A signed release is not necessary within DCF since all programs are part of the same state agency.

Pre-ETS staff may release information without a signed release from the student to DCF contractors and service providers *on a need-to-know basis*. Contracts include assurances that the contractors, who are acting on behalf of RS and DCF, will use the information appropriately and maintain confidentiality standards.

If Pre-ETS has obtained personal information about a student from another agency, provider or organization, such information may be released within DCF *on a need-to-know basis*. Restrictions on further release do not apply within DCF since all programs are part of the same state agency. In analyzing "need-to-know," Pre-ETS Transition Specialists shall consider whether entire reports or summary documents should be released, and whether the information is necessary for the purposes of the requesting program.

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Release to programs outside of DCF

When programs outside of DCF which are not contractors of DCF request personal information, informed written consent of the student is required. Upon receiving the informed written consent of the student or, if appropriate, the student's parent/guardian (if applicable), Pre-ETS may release personal information to another agency or organization for its program purposes only to the extent that the information may be released to the involved student or the student's representative and only to the extent that the other agency or organization demonstrates that the information requested is necessary for its program.

Release to the Client Assistance Program

Informed written consent is required. If a Pre-ETS Transition Specialist or Manager receives a call or email regarding a concern from the Client Assistance Program (CAP), the Pre-ETS staff needs to inform their Program Administrator (PA). The PA will be working with the concern. The Pre-ETS staff will not communicate with the CAP.

Requirements for release forms

Pre-ETS has approved release of information forms. Pre-ETS staff may also accept release of information forms from other organizations. Whether using Pre-ETS forms or forms provided by other organizations, the following informed written consent requirements must be met:

- The student's name and identifying information (such as the date of birth or Social Security Number) must be clearly stated.
- The information being requested or released must be specifically identified.
- The person or organization to receive the released information must be specifically identified.
- The purpose for the request or release must be specifically identified.
- The form must be signed, witnessed and dated.
- Specifications of the date, event or condition upon which the release expires must be clearly stated.
- Transition Specialist need to ensure he/she check the release of information forms to ensure they are not expired.

Release to students who meet the criteria to participate in Pre-ETS services

If requested in writing by a student, Pre-ETS shall release all requested information in that student's record of services to the student or the student's representative in a timely manner. Release may occur by making the record of services available to the student to view, or by providing copies of information in the record of services, according to the student's informed choice.

There are two exceptions:

1. *Release of information that may be harmful to the student:*
 - Medical, psychological, or other information that Pre-ETS determines may be harmful to the student may not be released directly to the student. However, this information must be provided to the student through a third party chosen by the student. The third party may include, among others, an advocate, a family member, or a qualified medical or

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mental health professional, unless a representative has been appointed by a court to represent the student, in which case the information must be released to the court-appointed representative.

- In such circumstances, Pre-ETS Transition Specialist s will inform the student and/or the student's representative that specific records contain information which requires professional explanation and interpretation, and in the Pre-ETS Transition Specialist's judgment, review by or release directly to the student would not be in the student's best interests.
- Pre-ETS Transition Specialist should discuss the option of having the student authorize release of the information to a physician or psychologist to facilitate interpretation of the information. If the student agrees with this approach, the Pre-ETS Transition Specialist may assist the student in arranging such a meeting with the health care professional and in paying for it. If the student does not agree with this option, the Pre-ETS Transition Specialist shall proceed in a timely manner to release the information to the student's representative.
- *Note regarding release of such information to other programs:* Medical or psychological information that Pre-ETS determines may be harmful to the student may be released to another program if the student has provided an informed written consent and if the other program assures Pre-ETS that the information will be used only for the purpose for which it is being provided and will not be further released to the student.

2. *Further release of information that has been obtained from another agency or organization*

If Pre-ETS has obtained copies of personal information, such as medical/psychological assessments, exams or services, then such information may be released only by, or under the conditions established by, the other agency or organization.

Release of information forms – Refer to Forms Part 67

Release of information to VR

Release of information to School

Permission for Pre-ETS to release information

Permission for Pre-ETS to obtain information from other entities

Release of information to coordinate services

Fees for copies provided by RS

Pre-ETS may establish reasonable fees to cover extraordinary costs of duplicating records or making extensive searches. Questions on current fees should be directed to the Administration Office.

Amending the record of services

An applicant or student who believes that information in his or her record of services is inaccurate or misleading may request that Pre-ETS amend the information. If the information is not amended, the request for an amendment must be documented in the record of services.

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Release to authorities

Informed written consent (a signed release of information form) is not required in the following circumstances:

- Pre-ETS shall release personal information if required by Federal law or regulations. Questions about this standard should be addressed to the Department for Children and Families (DCF) Attorney in the local office at the time a request for release is received.
- Pre-ETS shall release personal information in response to investigations in connection with law enforcement, fraud, or abuse, unless expressly prohibited by Federal or State laws or regulations, and in response to an order issued by a judge, magistrate, or other authorized judicial officer.
- Pre-ETS also may release personal information in order to protect the student or others if the student poses a threat to his or her safety or to the safety of others.

State program use

All personal information in the possession of RS must be used only for the purposes directly connected with the administration of the Pre-ETS and vocational rehabilitation programs. Information containing identifiable personal information may not be shared with advisory or other bodies that do not have official responsibility for administration of the program.

Release for audit, evaluation, and research

Personal information may be released to an organization, agency or individual engaged in audit, evaluation, or research only for purposes directly connected with the administration of the Pre-ETS or vocational rehabilitation programs, or for purposes that would significantly improve the quality of life for participants and only if the organization, agency, or individual assures that:

- The information will be used only for the purposes for which it is being provided.
- The information will be released only to persons officially connected with the audit, evaluation, or research.
- The information will not be released to the involved student.
- The information will be managed in a manner to safeguard confidentiality.
- The final product will not reveal any personal identifying information without the informed written consent of the involved student or the student's representative.

Information in this Part is based on 34 CFR 361.38 and DCF guidance.

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Part 15 Miscellaneous Administrative Issues

Non-discrimination

All services shall be provided without regard to sex, race, age, creed, color, national origin or type of disability.

Reporting Child Abuse and Neglect

Pre-ETS staff who have reason to suspect that a child has been injured as a result of physical, emotional, or sexual abuse or neglect shall report such situations. Reason to suspect means that there is credible evidence or a discrepant or inconsistent history in explaining a child's injury.

Reporting is a request for an assessment into the condition of a child. The determination of whether abuse or neglect has actually occurred is the responsibility of DCF or appropriate law enforcement agencies. The report may be made orally and followed by a written report if requested by DCF or law enforcement agencies. Reports should include the name and address of the child, the child's parents or other individuals responsible for the child's care; the child's location; the child's condition, including the nature or extent of the injury; whether the alleged perpetrator has access to the child; and any other helpful information.

Reports should be made by calling the Kansas Protection Report Center at 1-800-922-5330. There is also an on-line reporting form and more information available at:
<http://www.dcf.ks.gov/services/PPS/Pages/KIPS/KIPSWebIntake.aspx>

If there is an emergency situation, call your local law enforcement agency or 911.

Synopsis of State of Kansas Workplace Violence Policy

The safety and security of State of Kansas employees and customers are very important. Threats, threatening behavior, acts of violence, or any related conduct which disrupts the organization's ability to execute its mission will not be tolerated.

Any person who makes threats, exhibits threatening behavior, or engages in violent acts on state-owned or leased property may be removed from the premises pending the outcome of an investigation.

Threats, threatening behavior, or other acts of violence executed off state-owned or leased property but directed at state employees or members of the public while conducting official state business will not be tolerated. Off-site threats include, but are not limited to, threats made via the telephone, fax, electronic or conventional mail, or any other communication medium.

Violations of this policy may lead to barring the individual from state-owned or leased premises, termination of business relationships with that individual, and/or prosecution of the individual.

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Employees are responsible for notifying the local area management of the Kansas Department for Children and Families (DCF) and Rehabilitation Services (RS) Administration Office of any threats that they have witnessed, received, or have been told that another person has witnessed or received.

Reference: Workplace Violence Policy, Kansas Department of Administration, March 4, 2016

Kansas Workplace Violence Policy Rehabilitation Services (RS) Policy

When a student demonstrates by past or present actions that they pose a threat to Pre-ETS staff, they have forfeited the right to receive Pre-Employment Transition Services (Pre-ETS) with vocational rehabilitation (VR). The Statewide Pre-Employment Transition Services Program Administrator in the RS Administration Office should be consulted in all such cases before taking any actions.

1. If there is an open case, the case should be closed as "Other." The student should be notified in writing of the closure, the reason for the closure (the student's behavior which was identified as violent or threatening), the State's workplace violence policy, and the standard rights to appeal.
2. Requests to open new cases or reopen previously closed cases should be assessed very carefully. The student must provide independent evidence that they have received services or therapy to address the previously identified violent or threatening behavior. It is the student's responsibility to provide such evidence. Independent sources for such evidence and evaluation may be a psychiatrist, psychologist, medical doctor, or other professional whom the counselor deems qualified to assess such situations. Participation in such services or therapy alone does not equate to meet the criteria to participate in Pre-ETS. The student would still have to be determined to meet criteria according to the standard policies and procedures. If a case is not opened or reopened, the student should be notified in writing of the Pre-ETS decision, the reason for the action, the State's workplace violence policy, and the standard rights to appeal.

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Part 16 Provider Information

For each service received by the student, enter the following provider information.

Indicate which of the following pertain to the service:

- Provided directly by Pre-ETS staff.
- Purchased as authorized by Pre-ETS staff. If yes, select one of the following options:
 - Community Rehabilitation Programs (CRPs): Public CRPs are programs that are operated by a State, county, municipal or other local government. These include community service providers affiliated with Community Developmental Disability Organizations and Community Mental Health Centers.
 - Private CRP: Private CRPs are programs that are operated as not-for-profit organizations. *This category includes KANSASWORKS.*
 - Public Service Provider: Public service providers are organizations or agencies of State, county, municipal or other local governments.
 - Other Private Service Provider: Private service providers include private not-for-profit organizations, such as VR service providers, proprietary businesses; such as private hospitals and mental health clinics, and contracted service delivery staff. *This category includes KYEA, Centers for Independent Living and Staffing Agency. This category also includes sign language interpreters.*

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Appropriate modes of communication means specialized aids and supports that enable an individual with a disability to comprehend and respond to information that is being communicated. Appropriate modes of communication include, but are not limited to, the use of interpreters, open and closed captioned videos, specialized telecommunications services and audio recordings, Braille and large print materials, materials in electronic formats, augmentative communication devices, graphic presentations, and simple language materials.

Reference: §361.5(b)(5)

ADA: Americans with Disabilities Act

Assessment for determining eligibility and vocational rehabilitation (VR) needs means, as appropriate in each case:

- A review of existing data to determine if an individual is eligible for VR services; and to assign priority for an Order of Selection.
- To the extent necessary, the provision of appropriate assessment activities to obtain necessary additional data to make the eligibility determination and assignment. To the extent additional data are necessary to make a determination of the employment outcomes and the nature and scope of VR services to be included in the IPE of an eligible individual, a comprehensive assessment to determine the unique strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice, including the need for supported employment, of the eligible individual. This comprehensive assessment:
 - Is limited to information that is necessary to identify the rehabilitation needs of the individual and to develop the IPE of the eligible individual.
 - Uses a primary source of information, to the maximum extent possible and appropriate (in accordance with confidentiality requirements) existing information obtained for the purposes of determining the eligibility of the individual and assigning priority for an order of selection; and information that can be provided by the individual, and if appropriate, by the family of the individual.
 - May include, to the degree needed to make such a determination, an assessment of the personality, interests, interpersonal skills, intelligence and related functional capacities, educational achievements, work experience, vocational aptitudes, personal and social adjustments, and employment opportunities of the individual and the medical, psychiatric, psychological and other pertinent vocational educational, cultural, social, recreational, and environmental factors that affect the employment and rehabilitation needs of the individual.

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- May include, to the degree needed, an appraisal of the patterns of work behavior of the individual and services needed for the individual to acquire occupational skills and to develop work attitudes, work habits, work tolerance, and social and behavior patterns necessary for successful job performance including the use of work in real job situations to assess and develop the capacities of the individual to perform adequately in a work environment.
- Referral, for the provision of rehabilitation technology services to the individual, to assess and develop the capacities of the individual to perform in a work environment; and
- An exploration of the individual's abilities, capabilities, and capacity to perform in work situations, which must be assessed periodically during trial work experiences, including experiences in which the individual is provided appropriate supports and training.

Reference: §361.5(b)(6)

Assistive technology device means 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 the functional capabilities of an individual with a disability. Examples include:

- Prosthetic, orthotic or other assistive devices essential to obtaining or retaining employment.
- Hearing aids.
- Telecommunications, sensory and other technological aids and devices.

Reference: §361.5(b)(7)

Assistive technology service means any service that directly assists an individual with a disability in the selection, acquisition, or use of an assistive technology device, including:

- The evaluation of the needs of an individual with a disability, including a functional evaluation of the individual in his or her customary environment;
- Purchasing, leasing, or otherwise providing for the acquisition by an individual with a disability of an assistive technology device;
- Selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing assistive technology devices;
- Coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs;
- Training or technical assistance for an individual with a disability or, if appropriate, the family members, guardians, advocates, or authorized representatives of the individual; and

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- 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.

Reference: §361.5(b)(8)

Auxiliary aids and services which may be provided by RS, include but are not limited to:

- Sign language interpreters for people who are deaf or hard of hearing.
- Tactile interpreting for people who are deaf-blind.
- Foreign language interpreting for individuals with limited English speaking/comprehension ability.
- Media of choice, such as braille or large print documents, for people who are blind or visually impaired.
- Readers, who may read textbooks or other written materials for persons who have impaired reading ability due to the disability.
- Note takers to take class notes for persons in training or other services who are unable to do so because of their disabilities.

The purpose of these auxiliary aids and services is to provide a means of effective communication, accommodating the needs of individual clients so they may derive full benefit of other VR services.

Reference: State definition

Please refer to the Resources Section for information on cost sharing agreements for auxiliary aids and services with public and private institutions of higher education.

Auxiliary aids and services specific to Pre-ETS funding includes—

1. Qualified interpreters on-site or through video remote interpreting (VRI) services; note takers; real-time computer-aided transcription services; written materials; exchange of written notes; telephone handset amplifiers; assistive listening devices; assistive listening systems; telephones compatible with hearing aids; closed caption decoders; open and closed captioning, including real-time captioning; voice, text, and video-based telecommunications products and systems, including text telephones (TTYs), videophones, and captioned telephones, or equally effective telecommunications devices; videotext displays; accessible electronic and information technology; or other effective methods of making aurally delivered information available to individuals who are deaf or hard of hearing;
2. Qualified readers; taped texts; audio recordings; Brailled materials and displays; screen reader software; magnification software; optical readers; secondary auditory programs (SAP); large print materials; accessible electronic and information technology; or other effective methods of making visually delivered materials available to individuals who are blind or have low vision;

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3. Acquisition or modification of equipment or devices; and
4. Other similar services and actions.

The Americans with Disabilities Act 28 CFR 35.104

Case file: Also known as the record of service, this is the complete record of a student's Pre-ETS case.

Clear and convincing evidence is required before VR can determine that an applicant is not eligible due to the significance of disability. "Clear and convincing evidence" means that RS must have a high degree of certainty before it can conclude that an individual is incapable of benefiting from services in terms of an employment outcome. The "clear and convincing" standard constitutes the highest standard used in the civil system of law and is to be individually applied on a case-by-case basis. The term "clear" means unequivocal. Given these requirements, a review of existing information generally would not provide clear and convincing evidence. For example, the use of an intelligence test result alone would not constitute clear and convincing evidence. Clear and convincing evidence might include a description of assessments, including situational assessments and supported employment assessments, from service providers who have concluded that they would be unable to meet the individual's needs due to the severity of the individual's disability. The demonstration of "clear and convincing evidence" must include, if appropriate, a functional assessment of skill development activities, with any necessary supports (including assistive technology), in real life settings.

Community rehabilitation program means:

- A program that provides directly or facilitates the provision of one or more of the following VR services to individuals with disabilities to enable those individuals to maximize their opportunities for employment, including career advancement:
 - Medical, psychiatric, psychological, social, and vocational services that are provided under one management.
 - Testing, fitting, or training in the use of prosthetic and orthotic devices.
 - Recreational therapy.
 - Physical and occupational therapy.
 - Speech, language, and hearing therapy.
 - Psychiatric, psychological, and social services, including positive behavior management.
 - Assessment for determining eligibility and VR needs.
 - Rehabilitation technology.
 - Job development, placement, and retention services.

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- Evaluation or control of specific disabilities.
 - Orientation and mobility services for individuals who are blind.
 - Extended employment.
 - Psychosocial rehabilitation services.
 - Supported employment services and extended services.
 - Services to family members if necessary to enable the applicant or eligible individual to achieve an employment outcome.
 - Personal assistance services.
 - Services similar to the services described previously in this section.
- For the purposes of this definition, the word program means an agency, organization, or institution, or unit of an agency, organization, or institution, that provides directly or facilitates the provision of VR services as one of its major functions.

Reference: §361.5(b)(9)

Comparable services and benefits means services and benefits that are:

- Provided or paid for, in whole or in part, by other Federal, State, or local public agencies, by health insurance, or by employee benefits;
- Available to the individual at the time needed to ensure the progress of the individual towards achieving the employment outcome in the Individualized Plan for Employment (IPE).
- Commensurate to the services that the individual would otherwise receive from the VR agency.

Comparable benefits do not include awards and scholarships based on merit.

Reference: §361.5(b)(10)

Competitive integrated employment: VR services support competitive integrated employment outcomes, which means work that —

Is performed on a full-time or part-time basis (including self-employment) and for which an individual is compensated at a rate that—

- (A) Is not less than the higher of the rate specified in section 6(a)(1) of the Fair Labor Standards Act of 1938 (29 U.S.C. 206(a)(1)) or the rate required under the applicable State or local minimum wage law for the place of employment;

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- (B) Is not less than the customary rate paid by the employer for the same or similar work performed by other employees who are not individuals with disabilities and who are similarly situated in similar occupations by the same employer and who have similar training, experience, and skills; and
 - (C) In the case of an individual who is self-employed, yields an income that is comparable to the income received by other individuals who are not individuals with disabilities and who are self-employed in similar occupations or on similar tasks and who have similar training, experience, and skills; and
 - (D) Is eligible for the level of benefits provided to other employees; and
- Is at a location—
 - (A) Typically found in the community; and
 - (B) Where the employee with a disability interacts for the purpose of performing the duties of the position with other employees within the particular work unit and the entire work site, and, as appropriate to the work performed, other persons (e.g., customers and vendors), who are not individuals with disabilities (not including supervisory personnel or individuals who are providing services to such employee) to the same extent that employees who are not individuals with disabilities and who are in comparable positions interact with these persons; and
 - Presents, as appropriate, opportunities for advancement that are similar to those for other employees who are not individuals with disabilities and who have similar positions.

[34 CFR 361.5(c)(9) published August 19, 2016]

Please refer to the Forms Section for a Competitive Integrated Employment Worksheet.

Core services are assessment, substantial counseling and guidance, physical/mental restoration, training, job-related services (job preparation, job development and job placement), supported employment, occupational tools and licenses, and rehabilitation technology.

Counseling and guidance means:

- **General:** In all cases, counselors develop a collaborative relationship with each applicant and eligible individual and promote the individual's full involvement and participation in the rehabilitation process. The counselor's role in providing information about and guiding the individual in exploration of options is critical to supporting informed choice of the individual. Vocational counseling and guidance also includes support and assistance with problem solving and clarification of values, as well as information about and referral to community resources and coordination of services. Such counseling and guidance may not be considered a "countable" service for Order of Selection purposes.
- **Substantial:** If required by the individual, the counselor will provide discrete, substantial counseling services that are vocational in nature and are specifically designed to assist the

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individual in participating in the rehabilitation process and in reaching an employment outcome. Such vocational counseling will involve multiple sessions, be included in the IPE, and address issues such as vocational exploration, career decision making, establishment of a career path including short and long term goals, self-advocacy in the work place, development or problem-solving skills, and use of community resources related to employment. This substantial level of service is distinct from the general counseling relationship that exists between the counselor and the client throughout the rehabilitation process. Such substantial counseling and guidance may be considered a “countable” service for Order of Selection purposes. (Note: This is not mental restoration services provided by other qualified sources. See codes 320, 300 and 340.) The level of service is determined according to the VR needs of the individual consistent with his or her informed choice.

Reference: State definition

Employment outcome means, with respect to an individual, entering or retaining full-time or, if appropriate, part-time competitive employment in the integrated labor market, supported employment, or any other type of employment in an integrated setting, including self-employment, telecommuting, or business ownership that is consistent with an individual's strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

Reference: §361.5(b)(16)

Extended employment means work in a non-integrated or sheltered setting for a public or private nonprofit agency or organization that provides compensation in accordance with the Fair Labor Standards Act. This is not an allowable employment outcome for VR since it does not meet the requirement of integrated setting.

Reference: §361.5(b)(19)

Extended services, as used in the definition of “supported employment,” means ongoing support services and other appropriate services that are needed to support and maintain an individual with a most significant disability in supported employment and that are provided by a State agency, a private nonprofit organization, employer, or any other appropriate resource from funds other than Title I VR dollars after an individual with a most significant disability has made the transition from support provided by RS.

Reference: §361.5(b)(20)

Extreme medical risk means a probability of substantially increasing functional impairment or death if medical services, including mental health services, are not provided expeditiously.

Reference: §361.5(b)(21)

Family member, for purposes of receiving VR services when necessary to enable the applicant or client to achieve an employment outcome, means an individual:

- Who either

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- Is a relative or guardian of an applicant or eligible individual; or
- Lives in the same household as an applicant or eligible individual;
- Who has a substantial interest in the well-being of that individual; and
- Whose receipt of VR services is necessary to enable the applicant or eligible individual to achieve an employment outcome.

Reference: §361.5(b)(23)

- Services to family members are support services and will be provided only in conjunction with other rehabilitation services. Services to family members are intended to promote family participation and remove family barriers to full participation in the rehabilitation process. Services to family members should be viewed as a limited service that does not duplicate the services available within the community. Services to family members are supports necessary to the adjustment and rehabilitation of the person. These services may include, but are not limited to: Training in personal assistance techniques to care for the individual.
- Child care for minor children while the individual is engaged in training or other rehabilitation services.

Reference: State guidance

Homemakers were disallowed as VR successful employment outcomes with the implementation of the Workforce Innovation and Opportunity Act. This decision was consistent with Congressional intent to emphasize competitive integrated employment.

IDEA: Individuals with Disabilities Education Act, the law authorizing special education services.

IEP: Individualized Education Plan as authorized under Individuals with Disabilities Education Act (IDEA).

IHE: Institution of Higher Education, typically a career-technical college, community college or university.

Individual with a disability, for purposes of the VR program, means an individual:

- Who has a physical or mental impairment;
- Whose impairment constitutes or results in a substantial impediment to employment; and
- Who can benefit in terms of an employment outcome from the provision of VR services.

Reference: §361.5(b)(28)

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Individual with a significant disability means an individual with a disability:

- Who has a severe physical or mental impairment that seriously limits one or more functional capacities (such as mobility, communication, self-care, self-direction, interpersonal skills, work tolerance, or work skills) in terms of an employment outcome;
- Whose vocational rehabilitation can be expected to require multiple VR services over an extended period of time; and
- Who has one or more physical or mental disabilities resulting from amputation, arthritis, autism, blindness, burn injury, cancer, cerebral palsy, cystic fibrosis, deafness, head injury, heart disease, hemiplegia, hemophilia, respiratory or pulmonary dysfunction, mental retardation, mental illness, multiple sclerosis, muscular dystrophy, musculo-skeletal disorders, neurological disorders (including stroke and epilepsy), spinal cord conditions (including paraplegia and quadriplegia), sickle cell anemia, specific learning disability, end-stage renal disease, or another disability or combination of disabilities determined on the basis of an assessment for determining eligibility and VR needs to cause comparable substantial functional limitation.

Reference: §361.5(b)(31)

Individual's representative means any representative chosen by an applicant or eligible individual, including a parent, guardian, other family member, or advocate, unless a representative has been appointed by a court to represent the individual, in which case the court-appointed representative is the individual's representative.

Reference: §361.5(b)(32)

Intercurrent illness is an unexpected illness or injury that arises during rehabilitation and constitutes a hazard to the determination of eligibility, participation in IPE services or the achievement of the vocational objective.

Reference: State definition

KMIS: Kansas Management Information System.

LOC: As it pertains to spending authorities, LOC means life of the case.

Maintenance means monetary support provided to an eligible individual for expenses such as food, shelter, and clothing, that are in excess of the normal expenses of the individual and that are necessitated by the individual's participation in an assessment for determining eligibility and VR needs or the individual's receipt of VR services under an IPE.

Reference: §361.5(b)(35)

Mediation means the act or process of using an independent third party to act as a mediator, intermediary, on conciliator to assist persons or parties in settling differences or disputes prior to pursuing formal administrative or other legal remedies.

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Reference: §361.5(b)(36)

Merit and non-merit scholarships

Merit-based scholarships are not considered a comparable benefit. Merit scholarships are awarded for exceptional performance in academics, athletics, music, or other specific educational disciplines.

If a merit scholarship is awarded for the purpose of tuition, room/board or other specific services, then the consumer must use it for those purposes specified in the award.

Non-merit scholarships are typically awarded based on the student's affiliation with a specific group. Common examples are scholarships awarded by employers for family members, by specific cities or communities for their residents, by civic groups, or based on affiliation with certain cultural, disability or other interest groups. In non-merit scholarships, academic or other areas of performance are not considered in the selection process. Federal financial aid based on income guidelines is not considered to be merit scholarships.

Multiple contacts means that the counselor has made numerous attempts to contact the client at different hours of the day and different days of the week, using a variety of methods such as phone, e-mail, mail, or messages through the client's identified contact person.

Reference: State definition

Occupational licenses

This service is provided when necessary to increase an individual's opportunity for successful employment following completion of the other components of the IPE. Occupational licenses include: licenses, certifications, registrations or permits required by a state, city or other governmental unit to enter or engage in an occupation of business. The need for occupational licenses must be clearly established, based on state and local requirements, employer requirements for hiring or job retention, and requirements of the trade or profession.

Reference: State definition

Ongoing support services, as used in the definition of supported employment:

- Means services that are:
 - Needed to support and maintain an individual with a most significant disability in supported employment;
 - Identified based on a determination by RS of the individual's needs as specified in an IPE; and
 - Furnished by RS from the time of job placement until transition to extended services, unless post-employment services are provided following transition, and thereafter by one or more extended services providers throughout the individual's term of

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employment in a particular job placement or multiple placements if those placements are being provided under a program of transitional employment;

- Must include an assessment of employment stability and provision of specific services or the coordination of services at or away from the work site that are needed to maintain stability based on:
 - At a minimum, twice-monthly monitoring at the work site of each individual in supported employment; or
 - If under special circumstances, especially at the request of the individual, the IPE provides for off-site monitoring, twice-monthly meetings with the individual;
- Consist of:
 - Any particularized assessment supplementary to the comprehensive assessment of rehabilitation needs;
 - The provision of skilled job trainers who accompany the individual for intensive job skill training at the work site;
 - Job development and training;
 - Social skills training;
 - Regular observation or supervision of the individual;
 - Follow-up services including regular contact with the employers, the individuals, the parents, family members, guardians, advocates or authorized representatives of the individuals, and other suitable professional and informed advisors, in order to reinforce and stabilize the job placement;
 - Facilitation of natural supports at the work site;
 - Any other service identified in the scope of VR services for individuals; or
 - Any service similar to the foregoing services.

Reference: §361.5(b)(38)

Other goods and services Other services that are not otherwise defined but are directly related to participation in the IPE or achieving an employment outcome.

Reference: State definition

PA: As it pertains to spending authorities, PA means per authorization.

Person with a disability as defined by Section 504 of the Rehabilitation Act: Any person who (1) has a physical or mental impairment that substantially limits one or more major life activities, (2) has a

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record of such an impairment or (3) is regarded as having such an impairment. Major life activities include walking, seeing, hearing, speaking, breathing, learning, working, caring for oneself, and performing manual tasks.

Personal assistance services means a range of services provided by one or more persons designed to assist an individual with a disability to perform daily living activities on or off the job that the individual would typically perform without assistance if the individual did not have a disability. The services must be designed to increase the individual's control in life and ability to perform everyday activities on or off the job. The services must be necessary to the achievement of an employment outcome and may be provided only while the individual is receiving other VR services. The services may include training in managing, supervising, and directing personal assistance services.

Reference: §361.5(b)(39)

Personal assistance services may be provided through VR if they are not available through another source. It is important to determine whether such services are available as a comparable benefit through any other program. When the individual will need continuing personal assistance after VR case closure, it is essential to identify and plan for other programs that will provide the long-term support. This is a support service and will be provided only in conjunction with other rehabilitation services.

Reference: State guidance

Physical and mental restoration services means:

- Corrective surgery or therapeutic treatment that is likely, within a reasonable period of time, to correct or modify substantially a stable or slowly progressive physical or mental impairment that constitutes a substantial impediment to employment;
- Diagnosis of and treatment for mental or emotional disorders by qualified personnel in accordance with State licensure laws;
- Dentistry;
- Nursing services;
- Necessary hospitalization (either inpatient or outpatient care) in connection with surgery or treatment and clinic services;
- Drugs and supplies;
- Prosthetic or orthotic devices;
- Eyeglasses and visual services, including visual training, and the examination and services necessary for the prescription and provision of eyeglasses, contact lenses, microscopic lenses, telescopic lenses, and other special visual aids prescribed by personnel that are qualified in accordance with State licensure laws;

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- Podiatry;
- Physical therapy;
- Occupational therapy;
- Speech or hearing therapy;
- Mental health services;
- Treatment of either acute or chronic medical complications and emergencies that are associated with or arise out of the provision of physical and mental restoration services, or that are inherent in the condition under treatment;
- Special services for the treatment of individuals with end-stage renal disease, including transplantation, dialysis, artificial kidneys, and supplies; and
- Other medical or medically related rehabilitation services.

Reference: §361.5(b)(40)

Physical or mental impairment means:

- Any physiological disorder or condition, cosmetic disfiguration, or anatomical loss affecting one or more of the following body systems: neurological, musculo-skeletal, special sense organs, respiratory (including speech organs), cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin and endocrine; and
- Any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

Reference: §361.5(b)(41)

Post-employment services means one or more VR services that are provided subsequent to the achievement of an employment outcome and that are necessary for an individual to maintain, regain, or advance in employment, consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities, and interests.

Please refer to Section 3/Part 12.

Postsecondary school: means school after any “secondary” or high school. Typically post-secondary school includes career-technical colleges, community colleges and universities.

Power skills: Sometimes called soft skills, these are the attributes necessary to be successful in employment, such as customer service, staying on task, receiving instruction from supervisors, working effectively with co-workers, hygiene, being on time, etc.

Pre-Employment Transition Services (Pre-ETS)

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Empowering youth with disabilities to achieve their highest employment potential is one of the major goals of Rehabilitation Services (RS). Pre-ETS were authorized by the Rehabilitation Act of 1973, as amended through the Workforce Innovation and Opportunity Act (WIOA). Through Pre-ETS, students with disabilities may receive a variety of services to help them prepare for employment and self-reliance rather than dependency on public benefits. Please refer to Section 7 for detailed information.

Reader services

Readers may read textbooks or other written materials for persons who have impaired reading ability due to the disability. This purpose is to provide a means of effective communication, accommodating the needs of the individual clients so they may derive full benefit of other VR services.

Reference: State definition

Recognized education program for purposes of defining student with a disability: Means educational programming under the definition of a “student with disability” including programs that provide a recognized credential of education such as certified nursing assisting (CNA) program that lead to a specific industry job. Also includes home school, non-traditional secondary education programs, General Education Diploma (GED).

Referral and other services

Information and referral services are intended to assist individuals to access or secure needed services and benefits from other agencies, programs or sources. Such services are an essential part of case management with all applicants and recipients of services, particularly related to the search for and use of comparable benefits and services.

Reference: State definition

Rehabilitation engineering means 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 functional areas, such as mobility, communications, hearing, vision, and cognition, and in activities associated with employment, independent living, education, and integration into the community.

Reference: §361.5(b)(44)

Rehabilitation technology means 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 that include education, rehabilitation, employment, transportation, independent living, and recreation. The term includes rehabilitation engineering, assistive technology devices, and assistive technology services.

Reference: §361.5(b)(45)

Secondary school: high school.

Self-employment means working for oneself and may be temporary, home-based, contractual, full-time, part-time. Self-employment through business entrepreneurship means that a person owns,

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operates and manages a business; no supervisor oversees the person.

Reference: State definition

Student's representative: means any representative chosen by the student (if 18 years old), including a parent, guardian, other family member, or advocate, unless a representative has been appointed by a court to represent the student, in which case the court-appointed representative is the student's representative.

Substantiality of services means that VR services, whether provided by staff or purchased:

- Were necessary for the client to achieve employment consistent with his/her strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice; and
- Contributed directly and substantially to the employment outcome achieved by the client.

Substantial impediment to employment means that a physical or mental impairment (in light of attendant medical, psychological, vocational, educational, communication and other related factors) hinders an individual from preparing for, entering into, engaging in, or retaining employment consistent with the individual's abilities and capabilities.

Reference: §361.5(b)(52)

Support services are any services necessary for the eligible individual to derive full benefit from his or her VR plan. These services can only be provided in conjunction with non-support services. They are maintenance, transportation, services to family members, reasonable accommodations to facilitate participation in core VR services (such as sign language interpreters, readers or personal assistance), and referral to other services.

Reference: State definition based on federal guidance

Supported employment means :

- Competitive employment in an integrated setting, or employment in integrated work settings in which individuals are working toward competitive employment, consistent with the strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice of the individuals with ongoing support services. This service is provided for individuals with the most significant disabilities for whom competitive employment has not traditionally occurred or for whom competitive employment has been interrupted or intermittent as a result of a significant disabilities; and who, because of the nature and severity of their disabilities, need intensive supported employment services from RS and extended services after transition to perform this work.
- Transitional employment for individuals with the most significant disabilities due to mental illness. (See the definition of transitional employment in this glossary.)

Reference: §361.5(b)(53)

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Supported employment services

Please refer to the Supported Employment Part in Section 3 for complete information.

Transition services means a coordinated set of activities for a student designed within an outcome-oriented process that promotes movement from school to post-school activities, including postsecondary education, vocational training, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation. The coordinated set of activities must be based upon the individual student's needs, taking into account the student's preferences and interests, and must include instruction, community experiences, the development of employment and other post-school adult living objectives, and, if appropriate, acquisition of daily living skills and functional vocational evaluation. Transition services must promote or facilitate the achievement of the employment outcome identified in the student's IPE.

Reference: §361.5(b)(55)

Transitional employment, as used in the definition of supported employment, means a series of temporary job placements in competitive work in integrated settings with ongoing support services for individuals with the most significant disabilities due to mental illness. In transitional employment, the provision of ongoing support services must include continuing sequential job placements until job permanency is achieved.

Reference: §361.5(b)(56)

Transportation means travel and related expenses that are necessary to enable an applicant or eligible individual to participate in a VR service, including expense for training in the use of public transportation vehicles and systems.

RSA Guidance: *The following are examples of expenses that would meet the definition of transportation. The examples are purely illustrative, do not address all possible circumstances, and are not intended to substitute for individual counselor judgment.*

- **Example:** *Travel and related expenses for a personal care attendant or aide if the services of that person are necessary to enable the applicant or eligible individual to travel to participate in any vocational rehabilitation service.*
- **Example:** *Relocation expenses incurred by an eligible individual in connection with a job placement that is a significant distance from the eligible individual's current residence.*
- **Example:** *The purchase and repair of vehicles, including vans, but not the modification of these vehicles, as modification would be considered a rehabilitation technology service.*

Reference: §361.5(b)(49)

Transportation is a support service and will be provided only in conjunction with other rehabilitation services. This service may include, but is not limited to:

- Mileage, parking fees and road tolls.

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- Short-term travel related expenses, such as food and shelter, incurred by an individual when participating in authorized services.
- Use of public transportation.
- Taxi or bus fares.
- Limited vehicle repairs and maintenance essential to the operation of a personal vehicle used to participate in other IPE services.
- Limited vehicle purchase when there is no cost effective alternative and when necessary to participate in the IPE or to achieve employment.
- Relocation expenses incurred by an individual who will be permanently relocating in connection with participation in IPE services or a job placement that is a significant distance from the person's current residence.

Reference: State guidance

WIOA: Workforce Innovation and Opportunity Act. The Rehabilitation Act, as amended, authorizes Pre-ETS services. The Rehabilitation Act is Title IV of WIOA.