

State of Connecticut

Department of Rehabilitation Services

Bureau of Rehabilitation Services



POLICY MANUAL

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INTRODUCTION

USING THIS MANUAL

This manual is designed to provide staff with the philosophical and legal parameters around the vocational rehabilitation program. It provides the guiding principles which need to be followed in delivering services to consumers and a comprehensive coverage of the specific legal requirements that are in state and federal law and regulations. Purposefully, it is not a "cookbook". It is the role of staff to apply the guiding principles and law, coupled with sound professional judgment, in dealing with individual situations that may be encountered in delivering services to consumers of the agency. It is the responsibility of all staff to seek guidance from other staff members, as appropriate, when there are remaining questions.

This manual attempts to clearly delineate between that which is guidance and what is required under the law, as follows:

Chapters I to IV

- All information contained in a box should be considered as guidance or guiding principles in carrying out the particular subject area covered. The information at the beginning of each section labeled "guidance" contains general guiding principles. Other boxed information in the section generally gives more specific guidance pertaining to a particular legal requirement.
- The remainder of the information in these chapters contain the legal requirements for the specific subject areas.
- Terms that are defined in federal or state regulations are noted in italics, followed by an asterisk (e.g., *employment outcome**). The definitions for these terms are contained in Chapter I, Sec. 2.

Appendices

- These sections contain additional guidance, information or procedures concerning specific subject areas. This section does not generally contain specific legal requirements, unless otherwise noted as such in Chapters I to IV.

Chapter I – General Provisions of the Vocational Rehabilitation Program

Section 1 – Purpose

Guidance

In carrying out the day-to-day operations of the agency, staff at all levels need to continually question whether the decision that is about to be made or the action that is about to be taken is consistent with the purpose of the vocational rehabilitation program:

- Is the decision/action for the purpose of assisting a person with a disability to enter or maintain gainful employment?
- Are our consumers full partners in the rehabilitation process, and have we ensured that our consumers are given opportunities to make *informed choices**? This means the person has meaningful options from which to choose and has the information necessary to make a choice that is fully informed.
- As a whole, do we see our consumers as capable individuals, able to be successfully employed?
- Are we primarily looking at the person's capabilities and strengths, trying to develop a plan consistent with those abilities, or are we too focused on the deficits?
- Have we recognized and utilized families and natural supports as playing an important role in the individual's rehabilitation, if the individual so requests and needs these supports?
- Is our program comprehensive, coordinated, effective, efficient and accountable?
- Have we made maximum efforts to coordinate and collaborate with other agencies and organizations?
- Are our accountability measures facilitating accomplishment of the above?

Legal Requirements

A. Congress' purpose in authorizing the vocational rehabilitation program was to develop a comprehensive, coordinated, effective, efficient and accountable program of vocational rehabilitation which is:

1. An integral part of the workforce investment system;
2. Designed to assess, plan, develop and provide vocational rehabilitation services for persons with disabilities, consistent with their strengths, resources, priorities, concerns, abilities, capabilities, interests and *informed choice** so that they may prepare for and engage in gainful employment.

B. The vocational rehabilitation program must be consistent with these principles:

1. Individuals with disabilities are presumed capable of engaging in gainful employment and vocational rehabilitation services can improve their ability to become gainfully employed;
2. Consumers must be provided opportunities to obtain gainful employment in *integrated settings**;
3. Consumers must be active and full partners in the vocational rehabilitation process, making meaningful and *informed choices** during assessments, in choosing an *employment outcome**, services needed to achieve the outcome, providers of service and methods used to secure services;
4. Families and natural supports can play important roles in the success of the individual, if s/he requests or needs these supports;
5. Trained vocational rehabilitation counselors and other qualified personnel facilitate the accomplishment of the *employment outcomes** and objectives of the consumer;
6. Consumers and their *representatives** are full partners in a vocational rehabilitation program and must be involved on a regular basis in policy development and implementation;

The Bureau has addressed this requirement through consumer involvement on the Council.

7. Accountability measures must facilitate the accomplishment of the goals and objectives of the program.

Section 2 – Definitions

The following definitions apply to this manual:

"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, Brailled and large print materials, materials in electronic formats, augmentative communication devices, graphic presentations, and simple language materials.

"Architectural alteration services" means services provided to adapt or modify a consumer's home or small business. These services may include architectural consultation, design, construction and inspection to determine whether the services meet the necessary building and accessibility codes and consumer needs.

"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**.

"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:

- A. the evaluation of the needs of an *individual with a disability**, including a functional evaluation of the individual in his or her customary environment;
 - B. purchasing, leasing, or otherwise providing for the acquisition by an *individual with a disability** of an *assistive technology device**;
 - C. selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing *assistive technology devices**;
 - D. coordinating and using other therapies, interventions, or services with *assistive technology devices**, such as those associated with existing education and rehabilitation plans and programs;
 - E. 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
- F. 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**.

"Commensurate" means, with respect to the comparison of various programs or services, those programs or services which will enable the consumer to, as applicable:

- A. complete the assessment for determining eligibility and priority for services;

- B. complete the assessment for determining rehabilitation needs; or
- C. achieve an *employment outcome**

"Community rehabilitation program" means a program that provides directly or facilitates the provision of *vocational rehabilitation services** to individuals with disabilities, and that provides, singly or in combination, for an *individual with a disability** to enable the individual to maximize opportunities for employment, including career advancement: (A) medical, psychiatric, psychological, social, and vocational services that are provided under one management; (B) testing, fitting, or training in the use of prosthetic and orthotic devices; (C) recreational therapy; (D) physical and occupational therapy; (E) speech, language, and hearing therapy; (F) psychiatric, psychological, and social services, including positive behavior management; (G) assessment for determining eligibility and vocational rehabilitation needs; (H) rehabilitation technology; (I) job development, placement, and retention services; (J) evaluation or control of specific disabilities; (K) orientation and mobility services for individuals who are blind; (L) extended employment; (M) psychosocial rehabilitation services; (N) *supported employment services** and *extended services**; (O) services to *family members** when necessary to the vocational rehabilitation of the individual; (P) *personal assistance services**; (Q) services similar to the services described in paragraphs (A) through (P) of this definition. 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 *vocational rehabilitation services** as one of its major functions.

"Comparable services and benefits" means services and benefits that are:

- A. provided or paid for, in whole or in part, by other federal, state, or local public agencies, by health insurance, or by employee benefits;
- B. available to the individual at the time needed to achieve the *employment outcome** in the individual's employment plan; and
- C. *commensurate** to the services that the individual would otherwise receive from the bureau;

"Competitive employment" means work,

- A. in the competitive labor market that is performed on a full-time or part-time basis in an *integrated setting**; and
- B. 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.

"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**, self-employment, telecommuting, or business ownership.

"Experimental procedure" means a medical, rehabilitation, educational or related service, device or methodology which is unproven or is not generally accepted as effective within the professional discipline best able to evaluate the procedure;

“Extended services” means *ongoing support services** and other appropriate services needed to support and maintain an *individual with a most significant disability** in *supported employment** that:

- A. are provided singly or in combination and are organized and made available in such a way as to assist an eligible individual in maintaining *supported employment**;
- B. are based on a determination of the needs of an eligible individual, as specified in the employment plan; and
- C. are provided by a state agency, nonprofit private organization, employer, or any other appropriate resource, after an individual has made the transition from support provided by BRS.

"Extreme medical risk" means a probability of substantially increasing functional impairment or death if medical services, including mental health services, are not provided expeditiously.

"Family member" means any relative by blood or marriage of a consumer with a disability and other individuals living in the same household with whom the consumer with a disability has a close interpersonal relationship.

"Impartial hearing officer" means an individual who:

- A. Is not an employee of a public agency (other than an administrative law judge, hearing examiner, or employee of an institution of higher education). An individual is not considered to be an employee of a public agency for the purposes of this definition solely because the individual is paid by the agency to serve as a hearing officer;
- B. Is not a member of the BRS State Rehabilitation Council;
- C. Has not been involved previously in the vocational rehabilitation of the consumer;
- D. Has knowledge of the delivery of vocational rehabilitation services, the State plan, and the Federal and State regulations governing the provision of services;
- E. Has received training with respect to the performance of official duties; and
- F. Has no personal, professional, or financial interest that would be in conflict with the objectivity of the individual.

"Individual with a disability" means an individual who,

- A. has a *physical or mental impairment** which for such individual constitutes or results in a substantial impediment to employment; and
- B. can benefit in terms of an employment outcome from the provision of vocational rehabilitation services.

“Individual with a most significant disability” means an *individual with a significant disability** who:

- A. has serious limitations in a total of three or more functional areas (such as mobility, communication, self-care, self-direction, interpersonal skills, work tolerance or work skills) in terms of an *employment outcome**; or
- B. will require significant ongoing disability-related services on the job in order to maintain employment following case closure with the bureau.

"Individual with a significant disability" means an *individual with a disability** who has a severe physical or mental impairment which 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 *vocational rehabilitation 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), paraplegia, quadriplegia, and other spinal cord conditions, 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 vocational rehabilitation needs to cause comparable substantial functional limitation;

"Informal review" means an informal procedure through which the bureau affords an opportunity to a consumer, or if appropriate, his or her parent, guardian or other representative, to express and seek remedy for dissatisfaction with any determinations made by the bureau concerning the provision or denial of such services. An informal review does not constitute a "contested case" within the meaning of section 4-166(2) of the Connecticut General Statutes;

"Informed choice" means that the individual:

- A. has meaningful options from which to choose;
- B. understands his or her abilities, capabilities and interests related to *the employment outcome**; and
- C. participates in a planning process with bureau staff which considers such issues as:
 - i. relevant factors regarding choices made in the rehabilitation process. This includes, but is not limited to, service provider effectiveness and consumer satisfaction, relative cost of service options and labor market trends; and
 - ii. applicable laws, regulations, state plan provisions and policy which establish parameters within which choices must be made;

"Institution of higher education" means a university, college, junior college, community college, vocational school, technical school or other post secondary institution legally authorized to provide a program of education beyond secondary education;

"Integrated setting"

- A. with respect to the provision of services, means a setting typically found in the community in which consumers interact with non-disabled individuals other than non-disabled individuals who are providing services to those consumers.
- B. with respect to an employment outcome, a setting typically found in the community in which consumers interact with non-disabled individuals, other than non-disabled individuals who are providing services to those consumers, to the same extent that non-disabled individuals in comparable positions interact with other persons;

“Maintenance” means monetary support provided to a consumer for those 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 a program of vocational rehabilitation services;

“Mediation” means the act or process of using an independent third party to act as a mediator, intermediary, or conciliator to assist persons or parties in settling differences or disputes prior to pursuing formal administrative or other legal remedies. The mediator must be a qualified impartial mediator;

“Ongoing support services” means services

- A. provided to *individuals with the most significant disabilities**;
- B. provided, at a minimum, twice monthly:
 - i. to make an assessment, regarding the employment situation, at the worksite of each such individual in *supported employment**, or, under special circumstances, especially at the request of the consumer, off site; and
 - ii. based on the assessment, to provide for the coordination or provision of specific intensive services, at or away from the worksite, that are needed to maintain employment stability; and
- C. consisting of:
 - i. a particularized assessment supplementary to the assessment for determining rehabilitation needs;
 - ii. the provision of skilled job trainers who accompany the individual for intensive job skill training at the worksite;
 - iii. job development, job retention, and placement services;
 - iv. social skills training;
 - v. regular observation or supervision of the individual;
 - vi. follow-up services such as regular contact with the employers, the individuals, the individuals’ representatives, and other appropriate individuals, in order to reinforce and stabilize the job placement;
 - vii. facilitation of natural supports at the worksite;
 - viii. any other *vocational rehabilitation service**;
 - ix. a service similar to another service described in this definition;

“Personal assistance services” means a range of services 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 vocational rehabilitation services**. The services may include training in managing, supervising and directing personal assistance services;

“Physical or mental impairment” means,

- A. 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 specific learning disabilities; or
- B. Any mental or psychological disorder such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities;

"Post-employment services" means one or more *vocational rehabilitation 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;

"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;

"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**;

"Representative" or "individual's representative" means any representative chosen by the consumer, as appropriate, 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;

"Substantial impediment to employment" means that a physical or mental impairment (in light of attendant medical, psychological, vocational, educational, and other related factors) hinders an individual from entering into, engaging in, retaining or preparing for employment consistent with the individual's capacities and abilities;

"Supported Employment" means:

- A. *competitive work** in an *integrated** work setting or employment in integrated work settings in which individuals are working toward competitive work *with ongoing support services** for *individuals with the most significant disabilities**,
- i. for whom *competitive employment** has not traditionally occurred or has been interrupted or intermittent as a result of a significant disability; and
 - ii. who, because of the nature and severity of their disabilities, need intensive supported employment services from the bureau and extended services after transition in order to perform this work; or
- B. *transitional employment** for individuals with the most significant disabilities due to mental illness;

“Supported employment services” means *ongoing support services** and other appropriate services needed to support and maintain an *individual with a most significant disability** in *supported employment** that:

- A. are provided singly or in combination and are organized and made available in such a way as to assist an eligible individual to achieve *competitive employment**;
- B. are based on a determination of the needs of an eligible individual, as specified in an employment plan; and
- C. are provided by BRS for a period of time not to extend beyond 18 months, unless under special circumstances the eligible individual and rehabilitation counselor or other appropriate bureau staff jointly agree to extend the time in order to achieve the rehabilitation objectives identified in the Employment Plan;

"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 individualized plan for employment;

"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;

"Vocational training" means instruction designed to prepare a consumer to perform a particular skill or occupation.

“Vocational rehabilitation services” are defined as services described in an Employment Plan which are necessary to a consumer in preparing for, securing, retaining, or regaining an *employment outcome** consistent with the strengths, resources, priorities, concerns, abilities, capabilities, interests, and *informed choice** of the individual.

- A. assessment for determining eligibility and priority for services, as described in Ch. II §2 of this manual;
- B. assessment for determining vocational rehabilitation needs, as described in Ch. III §1;
- C. vocational rehabilitation counseling and guidance, including information and support services to assist an individual in exercising *informed choice** in the development of an employment plan;
- D. referral and other services necessary to help applicants and eligible individuals secure needed services from other agencies and to advise those individuals about the Client Assistance Program (CAP);
- E. physical and mental restoration services, as described in Ch. III §4(b);

- F. vocational and other training services, as described in Ch. III §4(a);
- G. *maintenance**, as described in Ch. III §4(d);
- H. transportation, as described in Ch. III §4(c);
- I. vocational rehabilitation services to the *family member** of an *individual with a disability** that are necessary to assist the individual to achieve an *employment outcome**;
- J. interpreter services for individuals who are deaf or hard of hearing and tactile interpreting services for individuals who are deaf-blind;
- K. reader services, rehabilitation teaching services, and orientation and mobility services for individuals who are blind;
- L. job search and placement assistance and job retention services;
- M. *supported employment services**, as described in Ch. III §4(h);
- N. on-the-job or other related *personal assistance services** provided while an individual is receiving other vocational rehabilitation services;
- O. *post-employment services**;
- P. occupational licenses, tools, equipment, initial stocks, and supplies;
- Q. *rehabilitation technology**, as described in Ch. III §4(e), including vehicular modification, telecommunications, sensory and other technological aids and devices;
- R. transition services for students with disabilities that facilitate the achievement of the *employment outcome** identified in the Employment Plan;
- S. self-employment services, as described in Ch. III §4(i);
- T. homemaker services, as described in Ch. III §4(j);
- U. other goods and services determined necessary for the consumer to achieve an *employment outcome**.

Section 3 – General Provisions

Guidance

In making a decision concerning the provision of services, the reasonableness of that service needs to be evaluated:

- Is it reasonably necessary and cost efficient?
- Are there other less costly services which will accomplish the same goal?
- Is there a reasonable likelihood that the services under consideration will succeed in achieving the desired result, or is it highly questionable?
- Can in-state services be offered that will achieve the goal?
- Are we ensuring that services are provided in a non-discriminatory manner?
- Are we being reasonably accountable in terms of our fiscal procedures?

Legal Requirements

A. Non-Discrimination

BRS cannot discriminate against a consumer on the grounds of creed, race, age, color, ancestry, national origin, gender or physical or mental disability. The bureau shall apply the same eligibility requirements to Native Americans as is applied to the rest of the consumer population.

B. Standards of Reasonableness

Services will be provided using a standard of reasonableness. Interpretations of the program's rules must be based on what is reasonably necessary and cost efficient when considering both the individual consumer and the entire consumer population. In such cases where a consumer chooses goods or services which are beyond those necessary to render the individual employable or which are at a higher cost to the bureau than necessary in providing a *commensurate** service, BRS is not responsible for the additional cost.

C. Payment for *Experimental Procedures**

BRS is not responsible for the provision of procedures which are determined by the bureau to be *experimental**. In cases where BRS has made such a determination, the consumer has the burden of proving (by clear and convincing evidence) that the procedure is not *experimental**.

D. Preference for In-State Services

Preference must be given to services provided within the state of Connecticut. Exceptions may be made when either:

- (a) there are no *commensurate** services offered within this state, or
- (b) out-of-state services can be provided at a lower total cost to the bureau. In such cases where a *commensurate** service is available to the consumer within Connecticut at a lower cost than an out-of-state option, the individual may choose to pay the additional cost of the out-of-state option.

E. Authorization for Services

A written authorization must be made before the provision of goods or services. Verbal authorization may be made before or at the time of the provision of goods or services, but only if there is approval of the BRS Director or his/her designee. BRS is not responsible for retroactive authorization of goods or services unless it is determined by clear evidence that preauthorization was not made due to BRS error.

District directors have been designated the authority to make verbal authorization.

- F. BRS may set a fee schedule to ensure reasonable costs and it may establish time periods for the provision of services. However, BRS may not impose absolute time or dollar limits on the provision of specific service categories or on the total services provided to an individual. The duration of each service needed by an individual must be determined on an individual basis.

Section 4 – Informed Choice

Guidance

Consumers must be given opportunities to make *informed choices** throughout the rehabilitation process. This means that the role of staff must be to educate or otherwise ensure that consumers get the information needed to identify options and make *informed choices**, rather than to make decisions for the consumer. Choices that consumers make need to be honored if they are consistent with the purpose, goals and parameters of the vocational rehabilitation program. However, if choices made by consumers are inconsistent with the goals of the vocational rehabilitation program or rules governing the program, BRS cannot provide support for that choice. As discussed in Section 3 of this chapter, standards of reasonableness must be applied in determining whether the Bureau will agree to choices made by a consumer.

Legal Requirements

- A. “*Informed choice*” means that the consumer:
1. has meaningful options from which to choose;
 2. understands his or her abilities, capabilities and interests related to the *employment outcome**; and
 3. participates in a planning process with bureau staff which considers such issues as:
 - a. relevant factors regarding choices made in the rehabilitation process. This includes, but is not limited to, service provider effectiveness and consumer satisfaction, relative cost of service options and labor market trends; and
 - b. applicable laws, regulations, state plan provisions and policy which establish parameters within which choices must be made;

In addition to these factors, implementing *informed choice** should also insure that the consumer has skills for evaluating the information and making decisions, has access to information about the consequences of various options, and understands his/her responsibilities for choices that are implemented and consequences that result.

- B. Consumers must be informed through *appropriate modes of communication** about the availability of opportunities to exercise informed choice, including the availability of support services for individuals with cognitive or other disabilities who require assistance in exercising *informed choice** throughout the vocational rehabilitation process.
- C. Consumers must be given the opportunity to make meaningful choices:
1. during assessments for determining eligibility and vocational rehabilitation needs;
 2. in the selection of *employment outcomes**;
 3. in the selection of services needed to achieve the *employment outcome**;
 4. in selecting service providers;
 5. in selecting an employment setting and the setting in which the services will be provided;
and
 6. in selecting the methods used to procure services.
- D. BRS must provide consumers (or if appropriate their *representatives**) or must assist them in acquiring information necessary to make an *informed choice** about the specific *vocational rehabilitation services** needed to achieve the *employment outcome** and the providers of those services. This information must include, at a minimum, information about:
1. cost, accessibility, and duration of potential services;
 2. consumer satisfaction with those services, to the extent that this information is available;
 3. qualifications of potential service providers;
 4. types of services offered by the potential providers;
 5. degree to which services are provided in *integrated settings**; and
 6. outcomes achieved by individuals working with service providers, to the extent that this information is available.
- E. Sources of information concerning services and service providers that BRS may use include, but are not limited to:
1. lists of services and service providers;
 2. periodic consumer satisfaction surveys and reports;
 3. referrals to other consumers, consumer groups, or disability advisory councils qualified to discuss the services or service providers;
 4. relevant accreditation, certification or other information related to the qualifications of service providers;
 5. opportunities for the individual to visit or experience various work and service provider settings.

Section 5 – Confidentiality

Guidance

Staff are responsible for ensuring the confidentiality of any information received about a consumer of the agency, including whether or not an individual is registered with BRS. The case file should be considered as the consumer's file. The consumer has a right to examine any information that is obtained about him/her, unless there is danger of harm to the consumer or the third party who provided the information prohibits release.

Legal Requirements

- A. All information pertaining to a consumer must be kept confidential. Information concerning the individual may not be released without the individual's written consent.

In other situations where staff believe information must be released without the consumer's signed consent to protect the safety of the consumer or others, the case should be discussed with the BRS Director or Bureau Chief, and the decision to release made at that level.

Staff should consult with appropriate Central Office staff concerning release of information when a subpoena is received.

- B. Consumers and, as appropriate, their *representatives**, service providers, cooperating agencies and interested persons must be informed of the confidentiality of personal information and the conditions for accessing and releasing this information.
- C. All consumers or their representatives must be informed about BRS's need to collect personal information and policies governing its use, including:
1. An explanation of the principal purposes for which BRS intends to use or release the information;
 2. An explanation of whether providing requested information is mandatory or voluntary and the effects of not providing requested information;

3. Identification of those situations where BRS does not require informed written consent before information is released (such as paragraph J, below); and
 4. Identification of other agencies to which information is routinely released.
- D. All personal information in BRS's possession concerning a consumer must only be used for purposes directly connected with the administration of the vocational rehabilitation program.
- E. Information in a consumer's record must be made accessible to the individual, except as noted in paragraphs (F) and (I) below. If requested by the consumer, the information must be released to him/her (or his/her *representative**, at the consumer's request, with a signed release) in a timely manner.
- F. Medical, psychological or other information that BRS determines may be harmful to the individual may not be released directly to the individual, but must be provided through a third party chosen by the consumer, such as an advocate, medical or mental health professional, unless a representative has been appointed by a court. If the consumer does have a court-appointed representative, that representative is the person to whom the information would be released.
- G. With written consent from the consumer, personal information may be released to another agency or organization, for its program purposes only. This information may only be released to the extent that it may be released to the consumer or his/her *representative**, and only to the extent that the other agency or organization demonstrates that the information requested is necessary for its program.
- H. If records to be released are related to psychiatric, psychological, alcohol/substance abuse or HIV/AIDS issues, the consumer must specifically permit release of this type of information in a signed consent form. In addition, the following statements must be attached to the information, as applicable:
1. Records related to HIV/AIDS must be accompanied by the following statement:

"This information has been disclosed to you from records whose confidentiality is protected by state law. State law prohibits you from making any further disclosure of it without the specific written consent of the person to whom it pertains, or as otherwise permitted by state law. A general authorization for the release of medical or other information is NOT sufficient for this purpose."
 2. Records related to psychological or psychiatric information must be accompanied by the following statement:

"The confidentiality of this record is required under chapter 899 of the Connecticut general statutes. This material shall not be transmitted to anyone without written consent or other authorization as provided in the aforementioned statutes."

3. Records related to drug or alcohol abuse diagnosis, prognosis or treatment must be accompanied by the following statement:

"This information has been disclosed to you from records protected by Federal confidentiality rules (42 CFR Part 2). The Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The Federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient."

Staff may attach a properly signed BRS disclosure form to comply with the above requirements.

- I. If personal information has been obtained from a third party, it may be released only by, or under the conditions established by, that third party.

The Attorney General's office has interpreted this to mean that BRS can redisclose third party information, provided redisclosure does not violate conditions set by the third party and the consumer gives his/her written consent.

***Section 6 - Record of Services**

Guidance

The record of services should be used not only to meet legal requirements, but more importantly as a tool for the counselor and consumer to record and organize significant events in working together. It should include an ongoing narrative of significant facts that are relevant to the consumer's vocational rehabilitation. Case notes should be on the one hand concise, but on the other of sufficient detail to allow the reader to understand what is happening with the case and the rationale for decisions/actions made by BRS. To the maximum extent possible, the case notes should include only observable facts and may include an analysis of the facts, to the extent appropriate to the vocational rehabilitation profession. Counselors are encouraged to view the case record as joint property between the Bureau and each consumer. Entries in the case record should be written with the full expectation that the consumer or his/her *representative* will read it.

Legal Requirements

- A. The record of services for each consumer must contain the following documentation, to the extent pertinent:
1. If the individual is found eligible, documentation supporting the eligibility determination;
 2. If the individual is found ineligible, documentation supporting that determination;
 3. If the case is closed for reasons other than an ineligibility determination, justification for closing the case;
 4. Documentation supporting that the individual has a *significant disability** or *most significant disability**, if applicable;
 5. If the individual requires trial work experiences or an extended evaluation to determine whether s/he can benefit from services, the plan and documentation supporting the need for this evaluation;
 6. The Employment Plan/IPE and any amendments;

7. The extent to which the consumer exercised *informed choice** regarding the provision of assessment services and the development of the Employment Plan, including the selection of the specific *employment outcome**, services needed to achieve that goal, service providers, the employment setting, setting in which the services will be provided, and methods to procure the services;
 8. If the Employment Plan provides for services or employment that is not *integrated**, justification to support the *non-integrated setting**;
 9. If the individual obtains *competitive employment**, verification that the individual is earning at or above minimum wage, and that the wage and benefits are not less than that paid by the employer to persons without disabilities doing the same or similar work;
 10. Results of annual reviews for consumers working in extended employment and/or earning less than minimum wage, the consumer's input in the reviews and the consumer's (or, if appropriate, his/her *representative's**) acknowledgement that those reviews were conducted;
 11. Documentation concerning any action or decision made as a result of an informal review, *mediation** or administrative hearing;
 12. If applicable, documentation of the consumer's request to amend his/her record in the event that BRS does not amend the documentation.
 13. If the case is closed as "rehabilitated" (St. 26), documentation that all of the requirements for this type of closure are met, including documentation that demonstrates that the services provided under the Employment Plan contributed to the achievement of the *employment outcome**;
 14. If the individual is referred to another program under the referral and information system, documentation of the nature and scope of services provided by BRS to the consumer and on the referral itself.
- B. A consumer who believes that information in his/her case record is inaccurate or misleading may request that BRS amend the information. If BRS does not amend the information, the consumer's request for an amendment must be documented in the case record.

Section 7 – Informal Reviews, Mediation and Administrative Hearings

Guidance

The Bureau encourages consumers and staff to attempt to resolve issues on an informal basis. Staff and consumers should consult with the appropriate supervisor, district director or central office representative when there is an unresolved disagreement about the provision of services or other program issue.

Even though the Bureau should try to resolve disputes as informally as possible, *informal reviews**, *mediation** and administrative hearings are a legal right available to consumers. It is therefore imperative that consumers be informed of the availability of these redress procedures, and the 30-day timeframes that they must follow to exercise their rights.

Legal Requirements

A. General Provisions

1. Consumers must be informed of the right to *mediation** and administrative hearing at the time the individual applies for services, at the time the Employment Plan/IPE is developed and upon reduction, suspension or cessation of vocational rehabilitation services.
2. Consumers may be granted an *informal review**, *mediation** and/or administrative hearing in any of the following situations:
 - a. the denial of an applicant or the denial of the right to apply or reapply for BRS services;
 - b. any bureau action concerning the development, implementation, denial, suspension, reduction or termination of services under an Employment Plan;
or
 - c. unresolved disputes pertaining to the scope of services provided to the consumer.
3. A request for an *informal review**, mediation and/or administrative hearing must be in writing or other form of communication appropriate to the consumer's disability needs.

It must contain a clear and concise statement of the issue(s) to be addressed, and must be received within the allowable timeframes (described below).

4. Consumers have the option of first going to an informal review and/or mediation, or they may choose to bypass these steps and go immediately to an administrative hearing. *Mediation** will be held, however, only by mutual consent of the consumer and BRS. BRS cannot use the informal review or mediation to deny or delay the individual's right to an administrative hearing.
5. Consumers have the right to present evidence and to have representation in *informal reviews**, *mediation** and administrative hearings. However, the consumer is responsible for any fees incurred by having representation.
6. Information in the case file must be made available to the consumer or his/her *representative**. Medical, psychological or other information which BRS determines may be harmful to the consumer cannot be released directly to him/her, but must be provided through his/her designated *representative**.
7. *Informal reviews**, *mediation** and administrative hearings will be held at an accessible location during working hours or at a time and place mutually agreed upon by the parties and approved by the reviewer, mediator or impartial hearing officer.
8. Services that are being provided when an *informal review**, *mediation** or administrative hearing request is received may not be suspended, reduced or terminated pending a decision by the impartial hearing officer or DORS Commissioner.
“Services that are being provided” means the following:
 - a. For persons in the process of being evaluated for eligibility, continuation of the eligibility determination;
 - b. For persons who are in the process of an evaluation for rehabilitation needs, continuation of evaluations needed for Employment Plan development;
 - c. For persons who have an approved Employment Plan, continuation of the services agreed to in the plan, using whatever timeframes, costs, or other parameters that are spelled out in the plan.

B. Informal Review

1. *Informal reviews** are conducted by BRS staff, as designated by the Bureau Director.

District Directors are the individuals generally designated to conduct *informal reviews**.

2. Requests for an *informal review** must be addressed to the respective district director and received by BRS within 30 days after the date BRS notifies the consumer of the decision which s/he is appealing.

3. The informal review* must be scheduled within a timely matter.
4. Failure to appear at a scheduled review is a waiver of the right to a review. The reviewer may dispose of the matter, or if the defaulted party submits a request for rescheduling within 10 days for good cause, the review may be rescheduled.

For additional information concerning *informal reviews**, see the BRS state regulations.

C. Mediation

1. Requests for *mediation** must be received within 30 days of the date of notification of the BRS decision which the consumer is appealing or mailing of the informal review* decision, whichever is later.
2. Participation in *mediation** is a voluntary process, and will be held only if both the consumer and BRS agree to be involved in the process.
3. BRS may deny a request for *mediation** in cases where it is not likely that *mediation** will resolve the issue. In such cases, the consumer may request to pursue an administrative hearing.
4. At any point in the *mediation** process, either party or the mediator may elect to terminate the *mediation**. In the event *mediation** is terminated, either party may pursue resolution of the issue through an administrative hearing.
5. *Mediation** must be conducted by a qualified mediator, who is skilled in conducting mediation and knowledgeable of the vocational rehabilitation program.
6. The mediator may be chosen on a random basis, by mutual agreement of the BRS director and the consumer, or in accordance with a procedure established by BRS, provided this procedure assures the neutrality of the mediator.
7. Discussions that occur during *mediation** must be kept confidential and may not be used as evidence in a later hearing or litigation.
8. The *mediation** agreement, if applicable, must be in writing.
9. BRS is not bound by terms in the *mediation** agreement if the issues resolved in a *mediation** agreement are later appealed in an administrative hearing or court.
10. BRS may offer *mediation** in cases other than those instances where the individual requests *mediation** or an administrative hearing.

*Mediation** is a valuable resource in many cases where more informal resolution of an issue is not possible. Since a resolution using *mediation** is the result of both parties coming to an agreement, this potentially leads to a better, more amicable solution than adversarial procedures, such as an administrative hearing. However, note that staff need to obtain District Director approval before offering *mediation** to consumers who have not formally requested a hearing or *mediation**.

D. Administrative Hearing

1. Administrative hearings are conducted by impartial hearing officers.
2. Requests for administrative hearings must be received by the BRS director within 30 days of the latter of (as applicable):
 - a. the date of notification of the BRS decision which the consumer is appealing;
 - b. mailing of the informal review* decision; or
 - c. completion of *mediation**. *Mediation** is considered “completed” when an agreement is signed or *mediation** is formally terminated. In the absence of either an agreement or formal termination, it is considered completed at the last *mediation** session held.
3. The administrative hearing must be held within 60 days of receipt of the request for an informal review*, *mediation** or administrative hearing, unless the consumer and BRS agree to an extension.
4. Administrative hearings must be held before an impartial hearing officer who is not an employee of BRS.
5. The impartial hearing officer must render a decision within 30 days of completion of the hearing.
6. Either the consumer or BRS may request that the DORS Commissioner review the impartial hearing officer’s decision. The request must be received within 20 days after the mailing of the impartial hearing officer’s decision.
7. Either the consumer or BRS may appeal the Commissioner’s decision (or hearing officer’s decision if there was no review by the Commissioner) to state or federal court.

For additional information concerning administrative hearings, see the BRS state regulations.

Chapter II – Application, Eligibility Determinations, Case Closure and Order of Selection

Section 1 – Referrals & Application

Guidance

Referrals and applications must be processed as efficiently as possible, so as not to delay the determination of eligibility and the provision of services, or the determination of ineligibility.

Legal Requirements

A. Referrals

1. Standards must be set for the prompt and equitable handling of referrals.
2. These standards must include guidelines for making good faith efforts to inform potential consumers of application requirements and gather information necessary to initiate the process of determining eligibility.

An effort should be made to process referrals within one week of the first contact. This means that information about the nature, scope and purpose of the VR program be shared with all potential applicants in order to afford them the opportunity to make an informed decision whether or not to apply. Information should also be shared about documentation needs for eligibility and how consumers can take a role in providing or securing that information.

During the application process, is very important that consumers learn about the relationship between employment and any public benefits they may be receiving, and that BRS gather accurate information regarding the individual's benefits. See Appendix H for further information concerning staff roles in this process.

B. Application

1. Once an individual has submitted an application for BRS services, an eligibility determination will be made within 60 days unless:

- a. Exceptional and unforeseen circumstances beyond the control of the agency preclude a determination within 60 days and both BRS and the consumer agree to a specific extension of time; or
- b. BRS is conducting an evaluation of the individual's ability to benefit from services.

Staff must attempt to obtain a written agreement from the consumer in any case where the process of eligibility determination exceeds 60 days.

2. An individual is considered to have submitted an application when the individual or his/her *representative**:
 - a. Has completed and signed a BRS application form;
 - b. Has provided information necessary to initiate an assessment to determine eligibility and priority for services; and
 - c. Is available to complete the assessment process.
3. BRS must inform applicants that individuals who receive services under the program must intend to achieve an *employment outcome**.
4. If the consumer is not yet 18 years old, his/her guardian must also sign the application.

Section 2 – Assessment for Determining Eligibility & Order of Selection Priority

Guidance

To the greatest extent possible, eligibility determinations and assigning of order of selection priority should be based on existing information. Additional evaluations prior to eligibility should be limited to only that which is necessary to make these determinations.

Legal Requirements

- A. In order to determine if an individual is eligible for vocational rehabilitation services and to assign the individual's priority under an Order of Selection, an assessment for determining eligibility and priority for services must be completed.

Note distinction between ineligibility determinations and case closures in applicant status from applicant status for reasons other than ineligibility (Sections 4 and 5 of this chapter). In the latter situation, an assessment for determining eligibility need not be completed.

- B. The assessment for determining eligibility and priority for services must be conducted in the most integrated setting possible, consistent with the individual's needs and *informed choice**.
- C. The assessment shall consist of:
1. To the maximum extent possible, a review and assessment of existing data, including counselor observations, education records, information provided by the individual or his/her family, information used by the Social Security Administration and determinations made by officials of other agencies; and
 2. An assessment of additional data necessary to determine whether an individual is eligible, in those cases where existing data do not describe the current functioning of the individual or are unavailable, insufficient or inappropriate to make an eligibility determination. This data would be obtained by the provision of additional evaluations.

The evaluations used to provide the additional information should be limited to only what is needed to determine whether the individual meets the basic eligibility criteria. When such services are needed, some examples include medical, psychological, vocational or rehabilitation technology evaluations.

D. Trial Work Experiences

1. In cases where BRS believes that the individual is ineligible because s/he cannot benefit from rehabilitation services in terms of an employment outcome, the assessment for determining eligibility must include an assessment of the individual in real work situations with appropriate supports, except in those limited circumstances where the individual cannot take advantage of these trial work experiences (see paragraph E, below).
2. The assessments must be of sufficient variety and over a sufficient period of time to make the determination of whether or not the individual can benefit from BRS services. These trial work experiences must be in the most *integrated setting** possible, consistent with the *informed choice** and rehabilitation needs of the individual. Trial work experiences include *supported employment**, on-the-job training, and other experiences using realistic work settings.
3. BRS must provide appropriate supports, including *assistive technology devices** and *services** and *personal assistance services**, to accommodate the rehabilitation needs of the consumer during these trial work experiences.
4. There must be a written plan to assess the individual's abilities, capabilities and capacity to perform in trial work situations.

E. Extended Evaluation

1. Under limited circumstances where the individual cannot take advantage of trial work experiences or if options for trial work have been exhausted before BRS can determine whether or not the individual can benefit from services, BRS must conduct an extended evaluation to make this determination.
2. During the extended evaluation period, BRS must develop a written plan for providing services necessary to make its determination. The services may include only those needed to determine eligibility. These must be provided in the most *integrated setting** possible, consistent with the *informed choice** of the individual. The extended evaluation would be terminated when the eligibility determination can be made.

Section 3 – Eligibility

Guidance

Eligibility determinations can only be based on the criteria in the law. In making the determination, consumers must be given the benefit of the doubt when determining whether or not they can benefit from services. However, when there is serious question about an individual's ability to benefit, to the extent possible this must be evaluated through trial work experiences before determining eligibility or ineligibility.

Legal Requirements

A. General Eligibility Criteria

1. A determination of whether or not an individual is eligible for BRS services must be based on a determination by BRS that:
 - a. The individual has a *physical or mental impairment**;
 - b. The physical or mental impairment constitutes or results in a *substantial impediment to employment** for that individual;
 - c. The individual can benefit in terms of an *employment outcome** from the provision of *vocational rehabilitation services**; and
 - d. The individual requires *vocational rehabilitation services** to prepare for, enter into, engage in or retain gainful employment consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities and *informed choice**.

Note that although the definition of *physical or mental impairment** includes blindness, persons who are legally blind would generally be served by the Bureau of Education and Services for the Blind, rather than BRS. However, if the individual has deaf-blindness, the case should be reviewed by the Deaf-Blind Review Team, to determine whether BRS may be better equipped to serve the individual.

2. Any eligible individual must intend to achieve an *employment outcome** that is consistent with his/her strengths, resources, priorities, concerns, abilities, capabilities, interests and *informed choice**. Completion of the application process for *vocational rehabilitation services** is sufficient evidence of the individual's intent to achieve an *employment outcome**.

3. BRS may not impose, as part of the eligibility determination, a duration of residence requirement that excludes from services any applicant who is present in the state.

BRS may not impose a duration of residence requirement that excludes individuals who are present in the state. An individual who has no residence (i.e., who is homeless) may not be excluded due to his/her lack of residency. However, where the individual resides out of state on a permanent basis, with no residence in Connecticut, referral should be made to the vocational rehabilitation agency in that state.

4. In making a determination of eligibility, BRS must ensure that:
 - a. No consumer is excluded or found ineligible solely on the basis of the type of disability; and
 - b. The eligibility requirements are applied without regard to:
 - i. the age, gender, race, color or national origin of the individual;
 - ii. type of expected employment outcome;
 - iii. source of referral to BRS; and
 - iv. particular service need or anticipated cost of service required by the individual or the income level of the individual or his/her family.

BRS may not discriminate against a consumer based on national origin. However, where an individual is not permitted to legally work in the United States due to his/her immigration status, development of an Employment Plan and achievement of an *employment outcome** may be impractical or impossible. Staff should consult with immigration and naturalization if there is any question regarding the individual's ability to work.

B. Presumption of Benefit

1. In making an eligibility determination, BRS must presume that the individual can benefit in terms of an *employment outcome** from vocational rehabilitation services, unless there is clear and convincing evidence that the individual is incapable of benefiting due to the severity of the individual's disability.

Clear and convincing evidence means that there is a high degree of certainty before concluding that an individual is incapable of benefiting from services. It means unequivocal. For example, an intelligence test alone would not constitute clear and convincing evidence. Clear and convincing evidence might include situational 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.

2. Before making the determination that an individual cannot benefit from vocational rehabilitation services because of the severity of the individual's disability, BRS must first explore the individual's abilities and capabilities to perform in work situations through trial work experiences except under limited circumstances when the individual cannot take advantage of such experiences. In such cases where the individual cannot take advantage of trial work experiences or if options for trial work experiences have been exhausted before BRS is able to determine whether or not there is clear and convincing evidence that the individual is incapable of benefiting for services in terms of an *employment outcome**, BRS must conduct an extended evaluation.

See Chapter II, Section 2 (Assessment for Determining Eligibility & Order of Selection Priority) for more details concerning the trial work and extended evaluation requirements.

C. Eligibility for SSI and SSDI Beneficiaries

1. Individuals who have been determined to have a disability under SSI or SSDI must be:
 - a. Presumed to be a person with a significant disability (for purposes of order of selection priority); and
 - b. Presumed to be eligible for *vocational rehabilitation services**,
 - i. provided that the individual intends to achieve an *employment outcome** consistent with his/her unique strengths, resources, priorities, concerns, abilities, capabilities, interests and *informed choice**; and
 - ii. unless BRS determines that the individual is not capable of benefiting in terms of an *employment outcome** from *vocational rehabilitation services** due to the severity of the disability (See Section B, above).

Even though individuals on SSI/SSDI benefits are presumed eligible, they are not automatically entitled to BRS services. The individual must still be expected to achieve an *employment outcome** as a result of receiving vocational rehabilitation services.

2. If the individual claims that s/he is an SSI or SSDI beneficiary but is unable to provide appropriate supporting documentation (such as an award letter), BRS must verify the individual's eligibility for Social Security benefits.

D. Certificate of Eligibility

1. If an individual is determined to meet the eligibility criteria above, s/he will be accepted for vocational rehabilitation service and, simultaneously, a certificate of eligibility must be dated and signed by BRS.
2. No service other than diagnostic services and services to determine eligibility and priority for services may be provided by BRS prior to completion of the certificate of eligibility.

- E. No service other than diagnostic services and services to determine eligibility and priority for services may be provided by BRS prior to completion of the certificate of eligibility.

Section 4 – Ineligibility

Guidance

In cases where BRS is considering making a determination that an individual is not eligible for services, the consumer must first be given the opportunity for a full consultation with BRS. A determination of ineligibility can only be made after such a consultation has either been provided to or declined by the individual. This determination may only be based on the criteria in the law.

Legal Requirements

- A. A determination that an individual is not eligible for vocational rehabilitation services may only be based on a determination that the individual does not meet one or more of the eligibility criteria in Section 3 of this chapter, and only after completion of an assessment for determining eligibility.

For closures for reasons other than ineligibility, see Section 5 of this chapter.

- B. An eligible individual may be later determined ineligible, if the Bureau finds that the individual no longer meets all of the applicable criteria in Section 3 of this chapter.
- C. Requirements When Making an Ineligibility Determination
1. An ineligibility determination may only be made after providing an opportunity for full consultation with the individual or, as appropriate, with his/her representative.
 2. A certificate of ineligibility must be signed and dated by BRS, and must include the reasons for the determination.
 3. BRS must notify the individual in writing, supplemented as necessary by other *appropriate means of communication** consistent with the *informed choice** of the individual. The notice must include the reason for the determination, an explanation of the individual's rights to appeal and the services offered by the Client Assistance Program (CAP), including how to contact that program.
 4. The individual must be referred to other training or employment-related programs that are part of the One-Stop service delivery system.

D. Annual Reviews of Ineligibility Determinations

When an individual is determined to be ineligible due to a determination that s/he cannot achieve an *employment outcome**, this determination will be reviewed by BRS within 12 months, and annually thereafter if requested by the individual. However, a review is not required if:

1. the individual is no longer present in the state;
2. the individual has refused it;
3. the individual's whereabouts are unknown; or
4. the individual's medical condition is rapidly progressive or terminal.

Section 5 – Case Closure for Reasons Other Than Ineligibility

Guidance

Staff are required to make reasonable attempts to engage consumers in the vocational rehabilitation program. A case may be closed without an eligibility/ineligibility determination only after a reasonable number of attempts have proven to be unsuccessful in getting the consumer involved.

Legal Requirements

Reasons for which a case may be closed in Status 08, 28 or 30 for reasons other than an ineligibility determination are as follows:

- A. The consumer is not available to receive services. This may include situations where the consumer:
1. has moved or otherwise cannot be located or contacted;
 2. has refused services;
 3. has failed to cooperate in participation in services;
 4. has been institutionalized; or
 5. is deceased.

A case may be closed for reasons (a), (b), or (c) above only after a reasonable number of attempts to locate or engage the consumer or, if appropriate, their *representative** to encourage the consumer's participation.

At minimum, two documented attempts at contacting the consumers and/or their *representative** should be made. It is preferable that staff attempt to make direct contact with the consumer (e.g., by phone, in person, etc.) rather than by letter.

- B. Transportation is not available or feasible to obtain or maintain employment; or
- C. *Extended services** are not available to an individual who requires *supported employment services**.

Section 6 – Order of Selection

Guidance

While under an order of selection, BRS is required to focus on providing services to persons with the most significant disabilities. In determining to what extent the disability is considered “significant”, one must examine the functional limitations posed by the disability in terms of an *employment outcome** and the need for *vocational rehabilitation services**.

BRS must first complete an eligibility determination, and then assign a level of priority. Only those persons in the priority level(s) being served by the agency may have an Employment Plan developed. Those individuals for whom BRS cannot develop a plan may only receive information and referral services.

Legal Requirements

- A. An order of selection must be implemented when the Bureau does not have ample funding and resources to serve all eligible persons with disabilities.
- B. All eligible consumers must be assigned a priority level, and placed in the highest level for which they qualify.
- C. BRS must determine annually which priority levels it has the financial and personnel resources to serve. Persons will be served in the following order of priority:
 - 1. Consumers determined to have a *most significant disability**;
 - 2. Consumers determined to have a *significant disability**;
 - 3. Consumers determined to have a non-significant disability.

See Appendix A for guidance in the determination of “serious functional limitations”, as used in the definitions of *significant** and *most significant disabilities**.

- D. Every individual within a particular priority level must be served before individuals in the next highest priority level.

- E. In the event all BRS consumers within the same priority level cannot be served, individuals in that priority category must be served chronologically based on the date of eligibility determination.

- F. Individuals who do not meet the order of selection criteria for the priority/priorities currently being served must have access to information and referral services through the Bureau. This includes vocational rehabilitation information and guidance and referral to other appropriate federal and state programs (including the state workforce investment system). The consumer must be provided a notice of the referral to the state or federal program, information about the specific point of contact within that agency, and information and advice regarding the most suitable services to assist the individual to prepare for, secure, retain or regain employment.

Chapter III - IPE/Employment Plan

Section 1: Process of Development of the IPE/Employment Plan

Guidance

IPE (Individualized Plan for employment)/Employment Plan development can be the most important time in the vocational rehabilitation process. It can be a time when major life decisions are made by the consumer and can be a time when counselors are called upon to employ a great deal of clinical and technical expertise.

At this juncture, BRS and the consumer must examine the following questions:

- Do the consumer and BRS have ample information to make an *informed choice** regarding the employment goal and services needed to achieve that goal? Has the consumer had the opportunity to bring any additional parties of his/her choosing into the Plan development process? If not, how can the consumer get the information s/he needs, and what additional information, if any, does BRS need in order to assist the consumer and determine whether it can approve the Plan?
- Has the consumer fully explored the impact of future earnings on any forms of public benefits he or she receives? Is the consumer fully aware of the available incentives and benefits for working persons with disabilities? (See Appendix H.)
- What is the consumer's employment goal, and to what degree is it consistent with the consumer's unique:

Strengths	Resources
Concerns	Priorities
Abilities	Capabilities
Interests	<i>Informed choice*</i>
- Have we fully explored transferable skills and prior experiences as part of the assessment of the consumer's strengths, abilities, concerns, interests, resources, priorities, and capabilities?
- What services does the consumer need in order to reach the employment goal? Do both the consumer and BRS understand that only those services that are needed to gain or maintain the agreed-upon vocational goal can be included in the Plan?
- Have the consumer and BRS fully explored *comparable benefits and services**?

- Have we addressed the primary employment issues or barriers, in order to maximize the likelihood that the Plan will result in successful employment? Are there other issues that, if left unaddressed, will seriously reduce the likelihood of employment success in the chosen goal?
- Has BRS collaborated with other appropriate agencies and organizations, in order to ensure a coordinated plan and to maximize the availability of *comparable services and benefits**?
- In situations where the Bureau determines that it cannot support a goal or service, has the reason been clearly and effectively communicated to the consumer or his/her *representative**? Have we informed the consumer what would need to be addressed in order for BRS to agree to a Plan?

BRS approval of any IPE/Employment Plan is a two-step process. We must first determine if we can agree to support the goal. Is it a reasonable goal in light of the factors listed above? We then must then determine whether we agree that all of the proposed services are necessary for the achievement of that goal. When we sign an IPE/Employment Plan we are agreeing that the vocational goal has our support and that the services are necessary to achieve the goal, and the Plan is otherwise consistent with BRS rules.

Legal Requirements

A. Assessment for Determining Rehabilitation Needs

1. Individuals who are certified as eligible and within the priorities being served under the order of selection will be provided an assessment for determining rehabilitation needs. The purpose of this assessment is to determine,
 - a. the *employment outcome** and the objectives, nature and scope of services to be included in the Employment Plan;
 - b. the individual's unique strengths, resources, priorities, concerns, abilities, capabilities, career interests and *informed choice**.
2. To the extent possible, this assessment will consist of existing data that are current as of the date of plan development, including:
 - a. information available from other programs and providers, particularly education officials and the Social Security Administration;
 - b. information provided by the individual and his/her family; and
 - c. information obtained under the assessment for determining eligibility.
3. If additional data are necessary to determine the *employment outcome** and nature and scope of services to be included in the IPE/Employment Plan, BRS must conduct a comprehensive assessment of the unique strengths, resources, priorities, concerns, abilities, and capabilities, including the need for *supported employment services**, for the

individual. This assessment must be in the most *integrated setting** possible, consistent with the individual's *informed choice**. It may include, to the degree needed, an appraisal of the consumer's personality, interest, interpersonal skills, intelligence and related functional abilities, educational achievements, work experience, vocational aptitudes, personal and social adjustment, emotional adjustment, employment opportunities and other pertinent data helpful in determining the consumer's ability to perform in a work environment.

B. Process of Development of the Plan

1. The IPE/Employment Plan must be developed in a timely manner for individuals served under the agency's order of selection. BRS must set standards for the prompt development of plans. The IPE/Employment Plan will be initiated after certification of eligibility.

As a standard, the IPE/Employment Plan should be developed within 90 days of determining that the individual is eligible and meets the agency's order of selection criteria. There may be circumstances where the period needed is significantly shorter or longer, depending on the nature of the individual's situation. Although staff should make every effort to develop plans in a timely manner, it is most important that Plans be developed with care, rather than in haste.

2. Services will be provided in accordance with the provisions of the Employment Plan.
3. The IPE/Employment Plan may be developed by the consumer or in conjunction with the Bureau and, as appropriate, the consumer's parent, guardian or other *representative**.
4. The consumer, and as appropriate his/her *representative**, must be provided with the following information in writing and in an *appropriate mode of communication** concerning the IPE/Employment Plan:
 - a. Options for developing and IPE/Employment Plan. This includes the option that the consumer or his/her *representative** may develop all or part of the Plan with or without assistance from BRS or other entities;
 - b. A description of what must be included in the IPE/Employment Plan;
 - c. Additional information that is requested by the individual or BRS determines to be necessary for the development of the IPE/Employment Plan;
 - d. A description of the individual's appeal rights;
 - e. A description of the Client Assistance Program (CAP) and information on how to contact that program.
5. The IPE/Employment Plan must be developed and implemented in a manner that affords the consumer an opportunity to exercise *informed choice** in selecting an *employment outcome**, the specific *vocational rehabilitation services**, the provider(s) of those services, and the methods used to procure the services.

6. The Plan must be designed to achieve the specific employment outcome that is selected by the consumer consistent with his/her unique strengths, resources, priorities, concerns, abilities, capabilities, interests and *informed choice**. To the maximum extent appropriate, the Plan must result in employment in an *integrated setting**.
7. The Plan must be jointly reviewed by the consumer and the appropriate Bureau representative.

C. IPE/Employment Plan Approval

1. Before a Plan takes effect, it must be approved and signed by the consumer and appropriate representative(s) of the Bureau.
 2. Reasons for which the Bureau may deny approval of an IPE/Employment Plan (in whole or in part) may include but not be limited to a determination by the Bureau that:
 - a. The *employment outcome** is inconsistent with the individual's unique strengths, resources, priorities, concerns, abilities, capabilities, interests or *informed choice**;
 - b. The nature, scope or duration of one or more of the services within the Plan are not necessary to achieve the *employment outcome** or otherwise not appropriate to the consumer's needs; or
 - c. The Plan is otherwise inconsistent with the law or State Plan.
- D. The consumer must cooperate in applying for or otherwise securing *comparable services and benefits**, benefits available as a legal right under state or federal law, or other resources that may be necessary to achieve the *employment outcome**. A Plan may be denied or terminated where a consumer fails to cooperate in securing such benefits. BRS may provide a service under an IPE/Employment Plan only after it is determined that the service is not available through *comparable services and benefits**.
- E. Consumers have the responsibility of being actively involved in treatment or other interventions which the Bureau determines necessary in order for the individual to achieve an *employment outcome**. In cases where the consumer fails to comply with such treatment or intervention, the services in the Plan may be denied or discontinued.

The intent of this provision is not to deny individuals access to services, but rather to ensure the individual's success, particularly when it is relatively clear that the individual is not likely to succeed in achieving his/her vocational goal without some type of treatment or other intervention.

- F. The consumer, and as appropriate his/her parent, guardian or *representative**, must be provided with a copy of the Plan and any amendments. They must be advised of any procedures and requirements affecting the development and review of the Plan.
- G. The IPE/Employment Plan must be reviewed as often as necessary, but at least once every twelve months. Consumers, and as appropriate their representatives, must be given an opportunity to review the Plan and, if necessary, jointly redevelop and agree to its terms.

H. The IPE/Employment Plan must be amended, as necessary, by the individual (or as appropriate his/her *representative**), in collaboration with BRS or, if determined appropriate by the consumer, another qualified vocational rehabilitation counselor, if there are substantive changes in the *employment outcome**, *vocational rehabilitation services** to be provided, or the service providers. Amendments to the Plan do not take effect until agreed to and signed by the consumer (or, if appropriate, his/her *representative**) and BRS.

I. Modification or Discontinuation of an IPE/Employment Plan

An IPE/Employment Plan may be modified or discontinued in whole or in part under the following conditions:

1. by mutual agreement between BRS and the consumer;
2. a determination by BRS that:
 - a. the consumer is no longer eligible;
 - b. the consumer has failed to comply with the terms of the Plan;
 - c. the *employment outcome** is no longer appropriate;
 - d. the duration, nature or scope of services in the Plan is no longer appropriate; or
 - e. services have been obtained through misrepresentation, fraud, collusion, or criminal conduct on the part of the consumer or his/her *representative**; or
3. budgetary shortfall or other circumstances beyond BRS's control which necessitate a discontinuation or modification of the Plan.

Section 2 – IPE/Employment Plan Contents

Guidance

Ideally, an IPE (Individualized Plan for Employment)/Employment Plan is a roadmap that each consumer can identify as his or her own Plan toward a chosen goal. The degree to which this is actually the case is directly related to the degree to which the Plan is driven by the principles of consumer input, *informed choice**, and mutual agreement.

In developing or reviewing the content of an IPE/Employment Plan, we should be asking ourselves

- To what extent do consumers feel ownership and responsibility for the Plan?
- Would the Plan still have meaning in the consumer's life if BRS were no longer in the picture?
- Have we directly asked the consumer what investment, financial or in some other form, he or she will make toward the success of this Plan?
- Are we clear about how progress toward the goal will be measured and each party's responsibilities?
- Have provisions been established to maintain solid contact between the consumer and BRS staff as the Plan goes forward?

Legal Requirements

The IPE/Employment Plan must contain the following:

- A. The specific *employment outcome**, based on an assessment for determining rehabilitation needs, which:
 1. is consistent with the consumer's unique strengths, resources, priorities, concerns, abilities, capabilities, career interests and *informed choice**; and

2. to the maximum extent appropriate, results in employment in an *integrated setting**
- B. The specific vocational rehabilitation services that,
 1. are needed to achieve the *employment outcome**
 2. include, as appropriate, *assistive technology services** and *devices** and *personal assistance services**, including training in the management of those services; and
 3. are provided in the most *integrated setting** that is appropriate for the service and is consistent with the individual's *informed choice**
- C. The projected date for the initiation of services and projected time lines for the achievement of the *employment outcome**
- D. The entity/entities that will provide the services and methods used to procure services;
- E. A description of criteria to evaluate progress toward achievement of the *employment outcome**
- F. The terms and conditions of the IPE/Employment Plan, including, as appropriate:
 1. The responsibilities of the consumer, including:
 - a. his/her responsibilities in relation to the *employment outcome**
 - b. if applicable, his/her participation in paying for the costs of the Plan; and
 - c. his/her responsibility with regard to applying for *comparable services and benefits**
 2. the responsibilities of the Bureau; and
 3. the responsibilities of other entities in providing *comparable services and benefits**

With the exception of certain higher education and self-employment Plans, BRS cannot require the consumer's financial participation. However, all consumers should be asked if they are willing and able to provide voluntary contributions toward the cost of services in the Plan.

- G. For individuals whose goal is *supported employment**, the Plan must:
 1. Specify the *supported employment services** to be provided by BRS;
 2. Specify the expected *extended services** needed, which may include natural supports;
 3. Specify the source of the *extended services**. In those cases where the source of *extended services** cannot be identified at the time of development of the Employment Plan, the Plan must provide a description of the basis for concluding that there is a reasonable expectation that such source will become available;
 4. Provide for periodic monitoring to ensure that the individual is making satisfactory progress toward meeting the weekly work requirement in the Employment Plan by the time of transition to *extended services**

5. To the extent that job skills training is provided, identify that the training will be provided on site; and
 6. Include *integrated** employment for the maximum number of hours possible, based on the unique abilities, interests and choice of the individual.
- H. As needed, a statement of the projected need for *post-employment services**, including the terms and conditions for the provision of these services and, if appropriate, how these services will be provided through *comparable services and benefits**.

Section 3 - Comparable Services and Benefits

Guidance

In order to maximize the use of BRS services available to consumers, resources other than BRS funds must be used to the greatest extent possible. Staff are therefore responsible for knowing of available alternative resources and collaborating with other agencies and organizations. Consumers are responsible for applying for or otherwise accessing known resources.

Legal Requirements

A. Definition –

Comparable benefits are defined as services and benefits that are:

1. provided or paid for, in whole or in part, by other federal, state or local public agencies, by health insurance, or by employee benefits;
2. available to the individual at the time needed to achieve the *employment outcome** in the Employment Plan; and
3. *commensurate** to the services that the individual would otherwise receive from BRS.

The Bureau interprets “employee benefits” to include all benefits available to the consumer through the employer, including but not limited to, accommodations available through the employer under the ADA.

B. Covered Services

All vocational rehabilitation services, except as described in section C (below), are subject to consideration of *comparable services and benefits**.

C. Exemptions/Qualifications

1. The following services are exempt from consideration of *comparable services and benefits**:
 - a. Assessment for determining eligibility and vocational rehabilitation needs.
 - b. Counseling and guidance including information and support services to assist an individual in exercising informed choice.

- c. Referral and other services to secure needed services from other agencies, including other components of the statewide workforce investment system, if those services are not available under this part.
 - d. Job-related services, including job search and placement assistance, job retention services, follow-up services, and follow-along services.
 - e. Rehabilitation technology, including telecommunications, sensory, and other technological aids and devices.
 - f. Post-employment services consisting of the services a – e listed under this section.
2. BRS may elect to use *comparable services and benefits** for the following services, if BRS determines that these resources are readily available at the time the service is needed to accomplish the *employment outcome**:
- a. job placement;
 - b. *rehabilitation technology** services
3. BRS must determine whether *comparable services and benefits** are available under any other program, unless making this determination would:
- a. interrupt or delay the progress of the individual toward achieving the *employment outcome** in the Employment Plan;
 - b. interrupt an immediate job placement; or
 - c. put the consumer at *extreme medical risk**.

D. Use of Comparable Services and Benefits

If *comparable services or benefits** are available to the consumer at the time needed to ensure the progress of the individual toward achieving the *employment outcome**, BRS must use these services/benefits to meet, in whole or part, the cost of *vocational rehabilitation services**.

E. Interim Use of BRS Funds Pending Availability of Comparable Benefits and Services

If *comparable services or benefits** exist under any other program, but are not available to the consumer at the time needed to ensure the progress of the consumer toward achieving the *employment outcome** in the Employment Plan, BRS must provide the services until those *comparable services** become available.

The fact that a *comparable benefit or service** is not immediately available does not circumvent the need for the consumer to apply for or the Bureau to utilize these other resources. Both the consumer and Bureau have the obligation to pursue and utilize *comparable services and benefits** as soon as they become available.

F. Consumer Responsibility

The consumer has the obligation to cooperate in applying for or otherwise securing *comparable benefits and services**, benefits available as a legal right under state or federal law or other resources that may be necessary in order to achieve the *employment outcome**. BRS may deny approval of an Employment Plan when a consumer fails to cooperate with securing these benefits that are expected to be available for services within the Plan.

For further information about *comparable services and benefits**, see also:
Section 4(a) (Training Services)
Section 4(b) (Physical and Mental Restoration Services)

Section 4 – Vocational Rehabilitation Services

Guidance

In determining whether BRS can provide a particular *vocational rehabilitation service**, a determination needs to be made as to whether or not the service is actually necessary in order for the consumer to achieve the agreed-upon *employment outcome**.

*Vocational rehabilitation services** contained in an Employment Plan must be designed to achieve the outcome in an efficient and cost effective manner, and must be consistent with the consumer's *informed choice**. The services must also be consistent with any parameters set around the specific service, as described in this manual.

Legal Requirements

- A. *Vocational rehabilitation services** are those described in an Employment Plan which are necessary to a consumer in preparing for, securing, retaining, or regaining an *employment outcome** consistent with the strengths, resources, priorities, concerns, abilities, capabilities, interests, and *informed choice** of the individual. In addition to those services specifically described in the sections in this Chapter (a-1), other vocational rehabilitation services include:
1. Vocational rehabilitation counseling and guidance, including information and support services to assist an individual in exercising informed choice in the development of an Employment Plan.
 2. Referral and other services necessary to help applicants and eligible individuals secure needed services from other agencies including other components of the statewide workforce investment system, and to advise those clients about the client assistance program.
 3. Vocational rehabilitation services to a family member of an applicant or eligible individual if necessary to enable the individual to achieve an employment outcome. Family member means an individual who either is a relative or guardian of, or lives in the same household as, or has a substantial interest in the well-being of, an applicant or eligible individual, and whose receipt of vocational rehabilitation services is necessary to enable the applicant or eligible individual to achieve an employment outcome.

4. Interpreter services for individuals who are deaf or hard of hearing and tactile interpreting for individuals who are deaf-blind provided by qualified personnel.
5. Job related services including job search and placement assistance, job retention services, follow-up services and follow-along services.
6. Occupational licenses, tools, equipment, initial stocks and supplies.
7. Other goods and services determined necessary for the individual with a disability to achieve an employment outcome.
8. Services to Groups – the Bureau may provide the following services to groups of individuals with disabilities, which promote integration and competitive employment. Services to groups are provided in accordance with bureau procedures for the provision of these services. All services to groups must have the approval of the Bureau Director.
 - a. Establishment, development, or improvement of a public or other nonprofit employment service provider.
 - b. Development and implementation of services that enhance the use of modes of communication or telecommunications for individuals with disabilities.
 - c. Technical assistance and support services, such as job site modification and other reasonable accommodations, for businesses not subject to title I of the Americans with Disabilities Act of 1990 that are seeking to employ individuals with disabilities.
 - d. Establishment of small business enterprises, operated by individuals with the most significant disabilities under supervision of the department, including, management services and supervision, and the acquisition of vending facilities, equipment, initial stocks, and supplies.
 - e. Consultation services to assist educational agencies in transition of students with disabilities to post-school activities, including employment.
 - f. Other services that promise to contribute substantially to the rehabilitation of a group of individuals, but that are not related directly to the individualized plan for employment of any one individual.

B. BRS policies may set limits regarding the length of services or the cost of services. However, these limitations cannot be rigidly applied, and must allow for individual exceptions to meet an individual consumer's needs.

Section 4(a) – Training

Guidance

When considering whether it is appropriate to provide training as a *vocational rehabilitation service**, the following questions must first be considered:

- What skills does the consumer currently possess and what skills, if any, need to be enhanced?
- Are there transferable skills that the individual can utilize?
- Will the training program allow the individual to achieve the agreed-upon *employment outcome**?
- Is the real employment issue due to lack of training, or are there other more fundamental issues that need to be addressed?
- Is the training program limited, both in time and cost, to what is reasonably necessary to achieve the *employment outcome**?
- Is the consumer likely to be able to succeed in the training program being considered?
- If the training is in an institution of higher education or other program eligible for financial aid, has the consumer applied for financial assistance and is BRS participation limited to the “unmet need”, if any?
- If graduate training is under consideration, does the consumer’s disability prevent him/her from working simultaneously to taking graduate courses?

Legal Requirements

A. General Rules on Training

1. Training services may include personal and vocational adjustment training, training in the use of artificial limbs, hearing aids or other appliances, remedial training, literacy training, vocational training, academic training, speech and hearing training which is not medically directed, lip reading, mobility training, rehabilitation teaching, transitional employment,

on-the-job training, and any other kind of organized training needed to meet the consumer's rehabilitation needs.

2. Training may be provided as part of an approved Employment Plan when necessary to achieve the *employment outcome** in the Plan.
3. Training may be provided at schools, colleges or universities, thorough *community rehabilitation programs**, by tutor or correspondence, apprenticeship or in an on-the-job training situation, by BRS staff or other organized training program.
4. The length of time for training will be that which is necessary for the individual to acquire sufficient knowledge and skill to meet the demands of the *employment outcome**. Training time should be limited to the minimum time required to accomplish a reasonable individual training program. In addition, the plan must be designed to ensure the lowest cost to the Bureau in providing a reasonable training service.
5. Trainees are expected to maintain minimum grade averages or such reasonable progress as to enable them to complete the training and attain the *employment outcome**.
6. Training progress must be evaluated on at least a semester or term basis, if the program operates on this schedule. Progress in other training programs must be evaluated at least monthly. Continued authorization for the training will not be made unless the consumer makes significant progress toward the *employment outcome**.
7. Training materials and supplies include necessary books and such training supplies as are necessary in order for the individual to participate in training services.

B. Training in *Institutions of Higher Education or Vocational Training Facilities**

1. BRS financial support for training in *institutions of higher education** or vocational training facilities cannot exceed the cost of a *commensurate** program at a public Connecticut state supported college, university, community technical college or similar program, unless an alternative program is necessary because of the individual's disability.
2. BRS financial sponsorship in training in *institutions of higher education** or vocational training facilities can only be made in accordance with an appropriately completed Employment Plan. BRS support of training is limited to training that is needed to achieve the *employment outcome**.
3. BRS can provide training in *institutions of higher education** only after maximum efforts have been made to secure *comparable services and benefits** or other assistance from sources outside of BRS to pay for the training. These benefits include family contribution, basic grant entitlement under student financial aid programs, private or institution-based scholarships, tuition waiver, work-study and earnings. (Students on SSI or SSDI may voluntarily apply their own financial resources toward any service under an Employment Plan, but they cannot be required to do so). The amount of BRS support, together with

institutional aid, cannot exceed the cost of the education. Consumers are encouraged but not required to apply for student loans.

4. The consumer must apply to the training institution's financial aid office (FAO) and cooperate in the provision of all information required by the FAO in its calculation of the consumer's eligibility for financial assistance. This application must be made sufficiently in advance of the starting date of training so that the FAO has ample time to make its determination. In no case may this application be made less than 60 days before the start of training. BRS may deny support of training if the consumer fails to apply for financial aid in a timely manner or cooperate with the FAO or BRS in order that a determination of financial needs can be made.
5. The consumer is required to give written authorization to BRS and the FAO in order for them to exchange information regarding the determination of eligibility for financial assistance.

BRS uses the VR-21 financial exchange form to gain the consumer's authorization to receive information from the FAO. See Appendix C.

6. BRS will presume that the computation made by the FAO regarding the amount of parental and family contribution is correct. However, where there is evidence that the computation made by the FAO is clearly erroneous, and when time or other circumstances make it impossible or impractical for the consumer to have the computation by the FAO corrected, BRS will not allow these factors to adversely affect the amount of assistance to the consumer.

Calculation of BRS sponsorship will be based on information received on the VR-21. See Appendix C for VR-21 instructions and worksheet.

7. BRS has primary responsibility for disability-related expenses, such as personal care, personal assistants, or specialized tutoring, as appropriate to the successful completion of program, provided these services are not covered under the Americans with Disabilities Act. In cases where BRS does pay for these services, this agency will not assume the role or responsibility as employer of the individual assisting the consumer.
8. BRS is not required to provide post-secondary education services beyond the baccalaureate level unless:
 - a. The consumer requires graduate training to enter employment within the agreed-upon profession in the Employment Plan which is consistent with the consumer's strengths, resources, priorities, concerns, abilities, capabilities, interests and *informed choice**; and
 - b. The severity of the consumer's disability limits his/her ability to function in an appropriate initial career position while simultaneously completing graduate training.

Section 4(b) – Physical and Mental Restoration Services

Guidance

In determining whether it is appropriate for the Bureau to provide physical and mental restoration services, several questions need to be answered:

- Is the service needed to achieve the *employment outcome**?
- Is the service needed to correct or significantly improve a condition that is a *substantial impediment to employment**?
- Is the service likely to correct or substantially improve the impediment within a reasonable period of time?
- Does the consumer not have access to medical insurance or other resources that will pay for the restoration services?
- Is the service generally accepted as effective by the appropriate professional discipline(s)?

If the answer is “no” to any of the above, it is likely that it is not appropriate for the Bureau to provide the physical restoration service.

Legal Requirements

- A. The treatment of disability is not the primary focus of the BRS program. Physical and mental restoration services are provided only insofar as the agency determines they will benefit the consumer in removing or adjusting to barriers to an *employment outcome**. Disabling conditions that do not or are not expected to adversely affect the attainment of the *employment outcome** are not to be remediated through the provision of physical or mental restoration services by the Bureau.
- B. Restoration services provided by the Bureau must, within a reasonable period of time, be expected to correct or modify substantially an impairment which constitutes a *substantial impediment to employment**. In estimating "a reasonable period of time", the following factors must be considered: (1) the nature of the disability; (2) prognosis with respect to life expectancy; (3) employment potential, and; (4) other contributing factors such as age, work

and premorbid personality. In general, restoration services provided by the Bureau should not exceed six months in duration.

Those services that do not meet this requirement, but that the consumer requires and that are being paid for by other sources, should be noted in the Employment Plan under the consumer responsibility section.

- C. Physical or mental restoration services may be provided to the extent that financial support is not available from another source, such as health insurance of the individual or through *comparable services and benefits**
- D. An evaluation of progress must be made at least every 90 days, and further decisions made at the time of each evaluation.
- E. BRS may obtain a consultation from a bureau medical consultant or other appropriate expert, particularly when any unusual, non-traditional, long-term or very costly procedure is being discussed, recommended or seriously considered for a consumer.
- F. Physical and mental restoration services may include, but are not limited to, the following:
 - 1. corrective surgery or therapeutic treatment of a *mental or physical impairment**
 - 2. diagnosis for mental or emotional disorders by a physician skilled in the diagnosis of such disorders or by a licensed psychologist;
 - 3. treatment of mental or emotional disorders by a physician skilled in the treatment of such disorders, a psychologist, or social worker who is licensed in the state of Connecticut;
 - 4. dentistry;
 - 5. nursing services;
 - 6. necessary hospitalization (either inpatient or outpatient care) in connection with surgery or treatment and clinic services;
 - 7. drugs and supplies;
 - 8. prosthetic, orthotic or other assistive devices essential to obtaining or retaining employment;
 - 9. 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 as prescribed by a physician skilled in diseases of the eye or by an optometrist, as appropriate;
 - 10. podiatry;
 - 11. physical therapy;
 - 12. occupational therapy;
 - 13. speech or hearing therapy;
 - 14. mental health services;
 - 15. treatment of either acute or chronic medical complications and emergencies which are associated with or arise out of the provision of physical and mental restoration services, or are inherent in the condition under treatment;
 - 16. special services for the treatment of individuals with end-stage renal disease, including transplantation, dialysis, artificial kidneys, and supplies;
 - 17. other medical or medically related rehabilitation services.

Section 4(c) – Transportation Services

Guidance

One of the goals of the vocational rehabilitation program is to increase the self-sufficiency of its consumers. Therefore, arrangements for transportation should be designed to maximize the consumer's independence and in conjunction with a long-term plan to meet the consumer's transportation needs independent of BRS, while also ensuring the least cost to the Bureau.

Legal Requirements

- A. Transportation service may be provided only:
 - 1. in connection with the provision of another vocational rehabilitation service, when needed by the individual to achieve an *employment outcome**; or
 - 2. to enable the consumer to participate in the informal review or administrative hearing procedures.

- B. Transportation services may include:
 - 1. fares or travel costs associated with the use of public or private conveyances, including parking fees and tolls;
 - 2. subsistence during travel;
 - 3. relocation and moving expenses necessary for the consumer to achieve an *employment outcome** identified in the Employment Plan; or
 - 4. other expenses related to travel.

- C. Rates of payment will be determined by BRS, in consultation with the consumer. BRS will base the rates on the following, as applicable:
 - 1. published rates for public transportation;
 - 2. maintenance costs related to travel, up to the amount allowed to BRS management personnel; or
 - 3. mileage costs, up to the rate paid for mileage reimbursement to BRS management employees using personally owned automobiles.

- D. Selection of a mode of transportation will be made on the basis of the circumstances and special needs of the consumer and at the least cost.

E. Personal assistants.

The use of a *personal assistant** or escort by a consumer in transit will be limited to individuals with significant disabilities and payment for this service will be based on the state minimum wage. Payment to a family member acting as a *personal assistant** will be limited to costs of travel and subsistence during travel. In no case will the Bureau assume the role as employer of the assistant.

This section applies to persons acting as a *personal assistant** or escort, but does not apply to drivers.

F. Transportation in support of placement services may be provided to a consumer who has been placed in employment until s/he has received his/her first pay.

G. Transportation services may be provided to a consumer who has been closed as rehabilitated to enable him/her to benefit from a post-employment service in an Employment Plan.

H. The Bureau will not provide financial assistance in the purchase of a vehicle.

I. Exceptions to these policies may be made at the discretion of the Bureau Director or his/her designee.

Section 4(d) – Maintenance

Guidance

*Maintenance** is a service intended to help cover the increased cost of consumer's basic living expenses that are necessary to take part in application or services under an Employment Plan. BRS cannot be the primary source of support for basic living expenses of its consumers. However, when a consumer's living expenses must be increased due to his/her participation in an Employment Plan, BRS may assist with the increased expenses if no other resources are available. The mechanism utilized for cash payments for *maintenance** can also be employed in some cases for other services where authorization to a vendor is not practical. Instances when this may be utilized include, but are not limited to, the provision of transportation, *personal assistance services**, childcare, or tutors. Please refer to Appendix C-5 for procedural guidance.

Legal Requirements

- A. "*Maintenance**" means monetary support provided to a consumer for those 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 a program of *vocational rehabilitation services**.
- B. *Maintenance** payments must be limited to the increased cost directly attributable to the consumer's participation in the vocational rehabilitation program.
- C. *Maintenance** after employment has started may be continued or paid to an eligible consumer up to the date of receipt of his/her first pay or, in the case of self-employment, up to thirty (30) days.
- D. Payments for *maintenance** services are limited to expenses that are needed in order to participate in other *vocational rehabilitation services** to the consumer. *Maintenance** payments may not be made if the other rehabilitation services have been discontinued or never started.
- E. The amount of *maintenance** required by the consumer must be determined by the Bureau in consultation with the consumer. The amount will be based on, as applicable:
 - 1. the published rates for room and board for consumers living away from home when the service is made available by the provider;

2. the average cost to the consumer, to be calculated on the experience of actual cost gathered over a two-week base period by the consumer and the bureau; or
 3. the individual circumstances of the consumer to meet his/her unique needs.
- F. Exceptions to these policies may be made at the discretion of the Bureau Director or his/her designee.

Section 4(e) – Rehabilitation Technology

Guidance

*Rehabilitation technology** is a broad term that encompasses the concepts of *rehabilitation engineering**, *assistive technology devices**, and *assistive technology services**. It must be expressly considered as a potential service for all applicants and eligible consumers as a component of the assessment to determine eligibility and vocational rehabilitation needs, and the throughout the Employment Plan. *Rehabilitation technology** is commonly thought of as an application to improve physical functions such as mobility, speech, and hearing. It is important that the potential of *rehabilitation technology** is also considered for assisting individuals with cognitive, emotional, or behavioral disabilities as well (for example, a memory or scheduling device to assist an individual with a learning disability with organization and recall). Because technology is constantly evolving, staff need to continually reassess whether *rehabilitation technology** solutions exist. Appropriate expertise should be consulted in making assessments and determining *rehabilitation technology** applications. Depending on the needs of individual consumers, examples of appropriate expertise might be rehabilitation engineers, automotive engineers, and architects on contract with the Bureau, or physical therapists, occupational therapists or speech/language pathologists available from the medical provider community.

Legal Requirements

- A. “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.
- B. *Rehabilitation technology** services may include one or more of the following:
 - 1. *rehabilitation engineering services**
 - 2. *assistive technology services**
 - 3. *assistive technology devices**
- C. *Rehabilitation technology** services may be provided only when they will benefit the consumer in removing, adjusting, or adapting to functional limitations that are barriers to required assessments for eligibility or Employment Plan development, or for achieving an *employment outcome**.

D. Functional limitations that are not expected to adversely affect the attainment of the vocational objective are not to be addressed through the provision of *rehabilitation technology** services by BRS.

Section 4(f) – Home Modifications

Guidance

Architectural modifications to a consumer's home or workplace may be provided under the following conditions:

- Modifications to the home will assist the individual to more independently gain egress and ingress to their home, or perform self-care and grooming activities needed in order for the individual to gain or maintain employment.
- In the case of the workplace, the modifications will allow the individual to perform or significantly increase independence in the job functions. BRS may be involved only in those cases where the employer is not required to provide the modifications under the Americans with Disabilities Act:
- The modifications are part of the individual's Employment Plan.

Counselors should contact the BRS consultant assigned to architectural modifications as soon as it becomes evident that a home or workplace modification is under consideration. The consultant can provide advice and technical assistance through assessment, planning, and procurement of architectural modification services (see also Appendix B-6 for guidance).

Legal Requirements

- A. Architectural alteration services may be provided to enable a consumer to accomplish safe egress from and ingress to the home or the workplace, or to enable a consumer to function vocationally within the home or workplace.
- B. BRS's participation in alterations shall be limited to those determined by the Bureau to meet the functional needs of the consumer at the least cost. Ramps, grab bars, lifts, or bathroom modifications are examples of such services.
- C. Alterations to work sites or business properties can only be considered when they are not covered under the Americans with Disabilities Act of 1990.

- D. Except as outlined in paragraph (E) below, BRS will not be responsible for financial participation in extensive or elaborate reconstruction, structural modifications, the addition of a room or rooms, or any other alteration that adds appreciable value to the property.
- E. The BRS director or his/her designee may approve Bureau participation in a structural addition or reconstruction where BRS determines that, with respect to removing the architectural barriers which need to be eliminated in order for the individual to achieve an employment outcome:
1. there is no other alternative; or
 2. such addition or reconstruction is the least costly alternative for the Bureau.
- In any case where the Bureau makes one of the above exceptions, BRS's participation will be limited to the minimum cost necessary to eliminate the architectural barriers.
- F. Architectural alterations will only be provided to the extent necessary for the successful completion of the consumer's Employment Plan. The case record will contain the following:
1. The limitation of activities and functioning that are due to the consumer's disability must be explained specifically and in detail. These should be supported by reports from appropriate sources;
 2. The consumer's vocational impediment or barrier to employment that will be eliminated or reduced by the provision of the architectural modification service must be thoroughly explained and supported; and
 3. The architectural barriers of the present site must be clearly and carefully delineated in the case record, together with an explanation as to how they impede the successful attainment of the *employment outcome** for the consumer. How these barriers will be eliminated or reduced through the planned alteration services must also be explained.
- G. BRS is not required to participate in alterations that are anticipated to meet the consumer's needs for a period of less than two years after the completion of the alterations, due to factors either related to the living situation or the consumer's disability. Alterations to a site may be made only after the consumer has provided written agreement that the consumer's planned occupancy is a minimum of two years beyond completion of alteration services.

This section applies primarily to situations where the consumer is expected to move within two years or where the disability is rapidly progressing, making certain modifications inappropriate as a longer-term solution. For example, a stair glide may currently be appropriate for a particular individual. However, due to the rapid progression of his/her disability, s/he is expected to need a different modification to move between floors (e.g., a minivator) within two years.

- H. The consumer must provide a signed agreement by the owner of the site to be modified, giving consent and authorization for the Bureau to provide or participate in the provision of the necessary modifications to the property occupied by the consumer. Without this written consent, BRS cannot provide or participate in the provision of such services.

- I. If the consumer or his/her family is building a home where the consumer is to reside, necessary alterations will be the responsibility of the consumer or his/her family. BRS will not participate in the financing of such construction.
- J. If the consumer or his/her family have entered negotiations with a vendor for alteration work to be done or for equipment or materials to be supplied, any resulting agreements will not be binding on BRS.
- K. BRS will not assume and is not responsible for the full restoration of structures or grounds that are disturbed in the process of alterations. Such areas will be functionally restored to the minimum level allowable by applicable codes. BRS will not be responsible for the matching of finishes, trims, and accessories when special sizing, tooling, and construction methods and materials would be required to do so.
- L. BRS's financial participation in alterations for a consumer will be limited to a one-time basis, with the exception of cases where there are changes in the consumer's disability, employment or other circumstances beyond the control of the consumer which warrant additional modifications.
- M. Once the alterations are completed, the consumer is thereafter responsible for upkeep, maintenance, insurance and repairs. BRS will not pay for these expenses or be responsible for the cost of removing ramps and restoration of property back to its original state after the accessibility-related construction is no longer needed.
- N. When BRS anticipates that alteration services may be part of a consumer's Employment Plan and BRS financial participation may be necessary, BRS will consult with a licensed architect or other qualified approved technical consultant approved by the Bureau.
- O. A local building permit must be issued for each project, which must be provided to BRS upon demand. Any zoning variance or other requirements necessary to secure this permit are the sole responsibility of the property owner.
- P. If BRS discovers a structural defect or building code violation on the property that has direct bearing on the proposed modifications, BRS will not proceed until corrective action or repair has occurred. Any cost of repair will be the sole responsibility of the property owner. Documentation of sufficient corrective action must be submitted to BRS before proposed modifications can resume.
- Q. BRS may deny assistance with any architectural modifications that it determines to be unsafe, unstable, in violation of applicable building codes or where, due to the nature of the site to be modified, the costs will be unreasonable.
- R. When an individual consumer's needs may not be met by strictly adhering to these policies, the Bureau Director or his/her designee may determine where exceptions will be made.

State of Connecticut
 Department of Rehabilitation Services (DORS)
 Bureau of Rehabilitation Services (BRS)



Authorization for Release/Disclosure of Personal Information

Instructions to BRS staff: Original copy to information holder. Copy to recipient of information.

I authorize: (name & address of person/organization that will release the information)

Date:

BRS

to release the information indicated below to: (name & address of person/organization to which information is to be released)

Bidding BRS Approved home modification
 Vendors, Architects and/or Rehabilitation Technologists

Purpose(s) of this release (check one):

- This information is being sent or requested by BRS for purposes associated with my eligibility for the provision of vocational rehabilitation services.
- Other purpose: to share background information for bidding process

Type of Information	Date of Authorization	Consumer's Initials	Type of Information	Date of Authorization	Consumer's Initials
medical			financial		
hospital records			school and/or transcript		
psychosocial			employment history		
psychiatric	(explain extent of authorization)				
psychological	(explain extent of authorization)				
alcohol and/or drugs*	(explain extent of authorization)				
HIV/AIDS**	(explain extent of authorization)				
Other	(specify) (see above)			X	X

Additional instructions to information holder: _____

Consumer name	Date of Birth	SS# (Last 4 digits only)
Signed (consumer) X	If minor, signature of parent or guardian; conservator, if applicable X	Relationship to consumer
<ul style="list-style-type: none"> ▪ If release is not related to my obtaining BRS services, my refusal to sign will not affect my ability to receive services from BRS. ▪ I understand that the information I authorize a person or entity to receive may be redisclosed and no longer protected by privacy regulations. ▪ This authorization may be revoked by me at any time by notifying BRS in writing, except to the extent that action has been taken in reliance on it. Unless expressly revoked earlier, this authorization expires as noted here (box to the right): 		SPECIFY DATE, EVENT OR CONDITION:

Note to Recipient of Information: The confidentiality of this record is required under chapter 899 of the Connecticut general statutes. This material shall not be transmitted to anyone without written consent or other authorization as provided in the aforementioned statutes.

* **Alcohol and/or drug treatment records:** This information has been disclosed to you from records protected by Federal confidentiality rules (42 CFR Part 2). The Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The Federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.

** **HIV Related Information:** This information has been disclosed to you from records whose confidentiality is protected by state law. State law prohibits you from making any further disclosure of it without the specific written consent of the person to whom it pertains, or as otherwise permitted by state law. A general authorization for the release of medical or other information is NOT sufficient for this purpose.

Section 4(g) – Vehicle Modifications

Guidance

Modifications to a consumer's vehicle may be provided if:

- They are necessary for an individual to enter or gain *competitive employment**; and
- The transportation needs cannot be met by public transit or other less costly means; and
- The service is part of a long-term plan that will meet the individual's transportation needs after BRS is no longer involved, and
- They are part of an individual's Employment Plan

Counselors should contact the BRS consultant assigned to vehicle modifications as soon as it becomes evident that a vehicle modification is under consideration. The consultant can provide advice and technical assistance through assessment, planning, and procurement of vehicle modification services.

Legal Requirements

- A. Vehicle modifications may be authorized when they are necessary in order for the consumer to enter, maintain or regain *competitive employment**.
- B. Vehicle modifications should be considered only after every other transportation option has been explored and only after it has been determined that vehicle modification is the most cost efficient approach for the consumer and BRS.
- C. Vehicle modifications may only be provided to those consumers who have been determined eligible for vocational rehabilitation services and are entering, maintaining or regaining *competitive employment**.
- D. BRS will not participate financially to equip a vehicle with anything that was available to the consumer as a factory/dealer option at the time the vehicle was ordered and was recommended to the consumer by the Bureau.

- E. BRS may arrange for a thorough mechanical inspection of any vehicle before determining whether or not it is feasible for the vehicle to be modified, remodified or adapted.
- F. BRS financial participation will be as follows:
 - 1. For the first modification for a consumer, up to 100%
 - 2. Remodification of the same vehicle or another vehicle may be provided under the following conditions, provided the consumer has maintained appropriate insurance on the original adaptive equipment:
 - a. If the last BRS-funded modification was within three (3) years and 54,000 miles, BRS will bear none of the cost;
 - b. If it has been more than three (3) years and at least 54,000 miles since the most recent BRS-funded modification, BRS may provide up to 50% of the transfer or remodification. The consumer must bear the cost of the balance.
 - c. If it has been more than five (5) years and at least 90,000 miles since the most recent modification funded by BRS, the Bureau may provide up to the entire cost.
- G. BRS's participation in modifying or adapting a vehicle will be limited to the least expensive type of vehicle modification that will accomplish the goal of enabling the consumer to enter, maintain or regain employment. This will be based on evaluations performed by the BRS vehicle assessment vendor and the Department of Rehabilitation Services' Driver Training Consultant or other entity deemed qualified by the Bureau.
- H. The consumer must cooperate in undergoing evaluation and testing as necessary to determine his/her ability to drive and needs for special equipment and vehicle modification. BRS may deny the provision of vehicle modification services where a consumer fails to cooperate in these evaluations.
- I. Vehicle modification can only be provided in conjunction with and to support the attainment of a specific vocational goal.
- J. The consumer will be solely responsible for basic vehicle repairs and routine maintenance, including special adaptive equipment.
- K. The consumer will be solely responsible for insurance on the vehicle, including any insurance on the vehicular adaptive equipment.
- L. If the consumer or his/her family has entered into negotiations or contracts for services with particular vendors, it will not be binding on BRS to provide services through these vendor(s). Any work that has been initiated or equipment that has been installed or ordered prior to approval under an Employment Plan will not be retroactively authorized by the BRS.
- M. When an individual consumer's needs may not be met by strictly adhering to these policies, the Bureau Director or his/her designee may determine where exceptions will be made.

Section 4(h) – Supported Employment

Guidance

Given the proper supports, the majority of persons with disabilities, including those *individuals with the most significant disabilities**, are capable of maintaining *competitive employment**. *Supported employment services** are available to *individuals with the most significant disabilities** who have been unable to maintain *competitive employment** because of the severity of their disabilities. The goal is to assist these individuals to achieve employment in the most *integrated setting** possible.

Legal Requirements

A. Supported employment is defined as employment:

1. which is in the competitive labor market;
2. that is *integrated**;
3. for which the individual earns a competitive wage (i.e., at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for similar work performed by individuals without disabilities) or where the individual is working toward a competitive wage;
4. for *individuals with the most significant disabilities**:
 - a. for whom *competitive employment** has not traditionally occurred or has been interrupted or intermittent because of the disability; and
 - b. who need *ongoing support services** throughout the term of employment, including both initial intensive time-limited *supported employment services** through BRS and *extended services** from another source.

B. An Employment Plan with a goal of *supported employment** must specify the source of *extended services** or the basis of determining that there is a reasonable expectation that *ongoing supports** will be available after BRS *supported employment services** are completed. This is required for persons who need *supported employment services**, regardless of whether regular Title I or supported employment Title VI-B (943) funds are used.

To ensure that *extended supports** will be available to the individual, a written commitment from the source of extended supports is generally required. Planning with that source needs to ensure that the level and type of supports available are appropriate to the consumer's needs. If there is no source of *extended services** that will be available, an Employment Plan with the goal of supported employment cannot be approved.

Examples of resources for *extended services** include but are not limited to the Departments of Developmental Disabilities or Mental Health and Addiction Services, BRS Employment Opportunities Program, natural supports, provider in-kind services, family resources and Social Security impairment-related work expenses.

See Ch. III Sec. 2 for additional Employment Plan requirements for persons in supported employment.

- C. BRS can provide only the initial intensive supports, for a period of not more than 18 months, unless under special circumstances the consumer and BRS counselor jointly agree to extend the time in order to achieve the rehabilitation objectives in the Employment Plan.

The length of BRS support will vary greatly, depending on individual client needs. For most individuals, the period of time needed for the initial intensive training through BRS is less than 18 months. BRS supported employment services may exceed 18 months, but only in those unusual individual circumstances where there are specific achievable objectives that can be reached in a relatively limited period of time.

- D. BRS may provide discrete post-employment services that are unavailable from the *extended services** provider and that are necessary to maintain the job placement. Examples include job station redesign, repair and maintenance of assistive technology, and replacement of prosthetic and orthotic devices.

Section 4(i) – Services Leading to the Goal of Small Business Ownership

Guidance

When considering the goal of small business ownership, the counselor and consumer need to first carefully consider what is involved in operating a business and consider whether the consumer has the strengths, abilities and resources necessary to be successful in such a venture. In those cases where it is determined that the individual has the personal ability to succeed in small business ownership, the other question is whether the business under consideration is viable. In order to answer this second question, BRS is likely to need the expertise of a counselor from the Connecticut Small Business Development Center (CSBDC). Additional guidance can be found in Appendix B-3 of this manual, Guidance for Working with Consumers Toward Self- Employment.

Legal Requirements

- A. Prior to approval of an Employment Plan with an *employment outcome** of business ownership, a business plan must be developed by the consumer and approved by a Connecticut Small Business Development Center as an economically viable proposal. BRS may provide business ownership services without this approval where the BRS director or his/her designee determine that there is clear and convincing evidence that the business is likely to be successful within a reasonable period of time.
- B. Before an Employment Plan is approved, BRS must approve both the *employment outcome** and the business plan. BRS may disapprove a business plan where it determines that the *employment outcome** is not feasible, as a result of:
 - 1. The earning potential of the business; or
 - 2. Inconsistency with the consumer's strengths, resources, priorities, concerns, abilities, capabilities, or *informed choice**.

- C. The limits of BRS's contribution toward the establishment of a small business (excluding training costs and excluding any needed costs for vehicle or work site modifications necessitated by the individual's disability) are as follows:
1. \$10,000, in cases where the net income that the business is projected to generate after two or more years in operation following the anticipated completion of services is at or above the amount recognized by the Social Security Administration as substantial gainful activity (SGA);
 2. \$5,000, in cases where the net income the business is projected to generate after two or more years in operation following the anticipated completion of services is less than substantial gainful activity level.
- D. **Consumers will be required to make a contribution toward the small business venture, in cash, materials, or in-kind labor, in an amount valued at no less than ten percent of the Bureau's contribution.** BRS may deny the provision of business ownership services in cases where the consumer will not fulfill this responsibility, except as noted in paragraph (F) below.
- E. Business ownership services may include start-up services and goods such as business consultants, bookkeeping, advertising, initial stocks, insurance, permits, fees, equipment, supplies, rent, utilities, transportation, telephone, and postage. It may also include technical assistance and other consultation services to conduct market analyses and develop business plans.
- F. If BRS staff determines that there are circumstances in an individual case that warrant an exception to paragraph (C) or (D) above, a full explanation and justification must be presented to the BRS director or his/her designee for consideration. The director may grant an exception in cases where s/he determines that:
1. Consumer hardship requires such exception; and
 2. Without such exception, there are no viable alternatives that would allow the consumer to achieve the *employment outcome**.

Section 4(j) – Services Leading to a Goal of Homemaker

Guidance

The purpose of the vocational rehabilitation program is to enable individuals to enter or maintain gainful employment. The goal of homemaker should be viewed similarly to any other goal, taking into consideration the following questions:

- Is the goal considered “employment”? For a homemaker, this means that the consumer is either caring for dependent children or must perform homemaker duties in order to enable another household member to enter full-time *competitive employment**.
- What are the essential functions of the job for this consumer, and are BRS services needed to eliminate barriers to these functions?
- Are there other resources available? In the case of homemaker, are there other members of the household who could reasonably be expected to perform the homemaker duties in lieu of the consumer?

Legal Requirements

- A. BRS may provide services that will enable a consumer to achieve an *employment outcome** of homemaker within the consumer’s home, only in such situations where the consumer:
1. is required to care for his/her dependent children who are under the age of eighteen or who have a severely disabling condition; or
 2. is required to perform homemaker duties in order for another member of the household to enter full-time *competitive employment**.

BRS would also consider providing services in situations where the consumer needed to perform homemaker duties in order for the household member to maintain competitive employment. However, in these situations, there must be clear evidence that circumstances have changed such that the household member's employment would be in jeopardy if the consumer is not provided services for the goal of gaining or maintaining homemaker duties.

- B. BRS services for the goal of homemaker will be limited to those which eliminate the barriers to performing the functions which,
1. are essential functions of the role of homemaker; and
 2. cannot reasonably be expected to be performed by other members of the consumer's household.

Section 4(k) – Transition from School to Work

Guidance

BRS plays an important role in the *transition** of students with disabilities to work. While a student is in the public education system, the local school system has primary responsibility for services needed by the consumer. However, BRS can play the following role during the last one or two years of a student's high school career:

- Determining student eligibility, initiating and completing the referral process prior to graduation;
- Getting to know the student and family so they are comfortable in maintaining a relationship with the BRS counselor after graduation;
- Participating in the Planning and Placement Team meeting during the last one to two years of high school to assist in developing appropriate transition goals and objectives;
- Consulting with staff, families and the students on approaches that promote employment experiences while the student is still in school;
- Consulting on curricula which will assist the student to prepare for employment, post-secondary education and independent living;
- Assisting the student and family to become familiar with, plan for and access needed adult service programs;
- Referring the student and family to advocacy organizations which can assist them to effectively advocate for needed services; and
- Developing an Employment Plan that specifies what services and supports BRS will provide directly upon graduation from high school.

Legal Requirements

- A. BRS must make *transition** planning available for students with disabilities that facilitates the development of the individualized education program (IEP) and the achievement of the *employment outcome** identified in the Employment Plan.
- B. The development and approval of an Employment Plan for students transitioning from school must be completed as early as possible during the *transition** process but, at the latest, by the time the student leaves the school setting.
- C. The Employment Plan for students transitioning from special education services must be developed in consideration of the student's individual education plan and in accordance with any cooperative agreements between the school systems and BRS.

See also: Appendix F - Guidance for Transition from School to Work

Section 4(I) - Personal Assistance Services

This guidance is intended to assist counselors when personal assistance services (PAS) are a necessary part of employment planning for their consumer. Any time that personal assistance services are being considered, the counselor must give a copy of this Guidance section to the consumer so that they understand the role of BRS in considering this service.

*“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 vocational rehabilitation services**.* The services may include training in managing, supervising, and directing personal assistance services.” * 34 CFR 361(b)(39)

**Similar to transportation services, Personal Assistance Services in support of Placement services may be provided to a consumer who has been placed into employment, until the consumer receives his/her first pay, if the consumer does not have other funding sources already in place and will need to use earnings to pay for all/part of their PA Services.

When a counselor and consumer decide that personal assistance services are required to support a consumer's participation either in an evaluation or in training they should consider the following:

1. Who is providing personal assistance services now for the consumer?
2. When is that personal assistance provided (A.M., P.M. all day)?
3. What services are the personal assistants providing?
4. Is the personal assistant being paid?
5. How is the personal assistance being funded?
 - a. Is the consumer receiving Medicaid?
 - b. Is the consumer on the Medicaid PCA waiver?
 - i. If so, how many hours of personal assistance are authorized per week through the Medicaid PCA waiver?
6. Where will the consumer be living? Is that different than their current residence?
7. Is there technology or a simple modification that could be used instead of a personal assistant to complete some or all tasks?

The counselor should document the answers to the questions listed above and begin a discussion with the consumer about possible solutions to their personal assistance needs. There may be times when the counselor and consumer can discover ways to meet the consumer's personal assistance needs without actual provision of paid services, or through use of other resources

available to the consumer. The counselor may also want to consider using the BRS Case Conferencing model to create other appropriate solutions.

Consultation with Supervisor, District Director or BRS Personal Assistance consultant may be considered to assess appropriate “next steps”. To initiate a consult with the PAS consultant, use the PAS Consult Form; also refer to BRS Guidance on PAS (on the shared drive).

One outcome of a BRS case conference or BRS personal assistance consultation may be a recommendation to evaluate the consumer's PAS needs in the workplace and/or their ability to direct workplace personal assistants. When this information is needed, the PAS consultant can work with the counselor to authorize a vendor to evaluate the consumer's PAS needs in the workplace. The PAS Assessment Referral and the PAS Assessment Report can be found on the shared drive.

The counselor may decide that an evaluation of the consumer’s needs in the home by an Occupational Therapist (OT) or Physical Therapist (PT) would provide appropriate recommendations for treatment to strengthen the consumer’s abilities (PT, OT, etc.), or, for equipment to allow the consumer to be more independent (such as portable lifts, reach/grab equipment, etc). If equipment or devices are being considered, the counselor must also confer with the BRS Assistive Technology consultant for advice and assistance.

The counselor and consumer should also discuss “life planning” for the consumer and consider the option of applying for Medicaid and/or the Medicaid PCA waiver if there is no other coverage, and/or be able to explain how they will pay for personal assistance after BRS funds for personal assistance services in support of evaluation and/or training have ended.

What if the consumer does not currently have any funding for personal assistance?

- Sometimes a consumer may have all of their personal assistance needs met by family members and/or a paraprofessional at school (prior to exiting high school), and may not have explored funding.
- Since BRS will not be providing funding for personal assistance after an evaluation or training has ended, the consumer needs to have alternative funding in place when BRS funding ends. BRS expects that the consumer will apply for Medicaid and/or the Medicaid PCA waiver as soon as possible. Planning to pay for personal assistance "out-of-pocket" is generally not a reasonable solution, for most consumers due to the cost of this service.
- The counselor should advise the consumer to apply for Medicaid as soon as possible. A Medicaid application and Medicaid PCA waiver application can be found on the DSS website.
- If a consumer has no other funding available, BRS can pay for personal assistance for Activities of Daily Living (ADLs) needs as well as PAS in the community and for educational purposes, as an evaluation, or as a service on the IPE, until the consumer becomes eligible for other funding.

What if the consumer is receiving Medicaid?

- If the consumer is receiving Medicaid, BRS would expect that Medicaid coverage would be used for the consumer's ADLs (toileting, transferring, dressing, bathing and eating) in their residence (home or dormitory).
- If the consumer is receiving Medicaid, but will not be eligible for the PCA waiver or is on the waiver waiting list, BRS would expect the consumer to make every effort to use home health aides paid for through Medicaid (See BRS Personal Assistance/Home Health Aide Services for Post-Secondary Students; this can be found on the BRS website at the bottom of this page <http://www.ct.gov/brs/cwp/view.asp?a=3955&q=465120>).
- **CAUTION**
 - Currently both the BRS Personal Assistance Services and Medicaid PCA waiver services are using the same fiduciary agency.
 - If the consumer is receiving funding for personal assistance through the Medicaid PCA waiver AND BRS, the consumer and their personal assistants may be confused about what hours are funded by each program.
 - It will be very important for the BRS counselors and Allied to be very clear with the consumer and their personal assistants about what is being funded by each program.

Chapter IV - Successful Case Closure and Post-Employment

Section 1: Status 26 Case Closure

Guidance

The goal of the vocational rehabilitation program is to enable consumers to enter gainful employment that is consistent with their abilities and *informed choice**. A consumer's BRS file may therefore be closed as "successfully rehabilitated" when the individual is performing satisfactorily in employment that has been maintained for a minimum of 90 days and which is reasonably consistent with his/her choice. While the number of Status 26 closures is an important measure of the agency's success in meeting its goal, there should not be a rush to close cases where it is clear that the job placement is unstable or inappropriate and where additional *vocational rehabilitation services** are necessary and appropriate.

Legal Requirements

- A. The following criteria must be met in order to make a determination that a consumer has been rehabilitated and to close his/her case record in Status 26:
1. The *employment outcome** is consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities, interests, and *informed choice**;

There may be isolated situations where, despite BRS attempts to work with the consumer to develop a goal that is consistent with all of the above criteria (strengths, resources, etc.), the individual's choice continues to clearly be inconsistent with their abilities, resources, etc. In cases where it is determined that it is not likely that the consumer can be placed in employment that is both consistent with his/her *informed choice** and his/her abilities, it may be appropriate to close a case rehabilitated if the remaining criteria are nonetheless met.

2. The *employment outcome** is in the most *integrated setting** possible, consistent with the individual's *informed choice**;
3. Rehabilitation services provided under an Employment Plan have contributed to the achievement of the *employment outcome**;

4. The consumer 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 *vocational rehabilitation services**. ;

There may be a number of cases where it is inappropriate to close the case after only 90 days of employment. For example, persons in *supported employment** who require additional time-limited services until the transition to *extended services** will generally need to have their cases remain open for a longer period of time. Other persons who need assistance to maintain employment (such as individuals who are self-employed or who need other job-related supports) may also need the case open longer to ensure success on the job.

5. At the end of the 90-day period, the consumer and BRS consider the *employment outcome** to be satisfactory and agree that the consumer is performing well on the job.

When applicable, as consumers complete vocational rehabilitation services and enter employment, BRS should provide them with information and assistance in managing their government benefits with respect to their earnings. See Appendix H for further information concerning staff roles in this process.

6. The individual has been informed through *appropriate modes of communication** of the availability of *post-employment services**.

B. Annual Review of Cases Closed Status 26.

1. An annual review must be conducted on consumers whose *employment outcome** at the time of case closure is in extended (sheltered) employment or in any other setting where the individual is compensated below minimum wage or below the prevailing wage paid to non-disabled individuals performing the same or similar functions. The purpose of the review is to determine the interests, priorities and needs of the individual with respect to *competitive employment** or training for *competitive employment**.
2. This review must be done for two years after the individual achieves an *employment outcome**, and thereafter if requested by the individual or his/her *representative**.
3. The consumer or, if appropriate, his/her *representative** must be given the opportunity to provide input into the review and reevaluation and documents that are put into the case record.
4. The consumer or, as appropriate, his/her *representative** must provide a signed acknowledgment that the review and reevaluation have been conducted.

5. During the review, BRS must make maximum efforts to assist the consumer in engaging in *competitive employment**. This includes identifying and providing *vocational rehabilitation services**, reasonable accommodations and other necessary support services.

Section 2 – Post Employment

Guidance

*Post employment services** allow BRS to provide the expeditious delivery of services to persons who have had their cases closed as “rehabilitated” (Status 26). A case may be opened for *post employment services** (Status 32) when the previously agreed upon *employment outcome** is still valid, but the individual needs *short-term*, discrete services in order to maintain, advance in or regain employment. For persons who need services due to significant change in the disability or employment goal, or who need more extensive services for other reasons, the case should be reopened in applicant status (Status 02).

Legal Requirements

- A. After a consumer has been determined to have been rehabilitated, *post employment services** may be provided to assist a consumer to maintain, regain or advance in employment consistent with the individual’s strengths, resources, priorities, concerns, abilities, capabilities and interests.

*Post-employment services** are intended to ensure that the *employment outcome** remains consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities, interests, and *informed choice**. These services are available to meet rehabilitation needs that do not require a complex and comprehensive provision of services and, thus, *should be limited in scope and duration*. If more comprehensive services are required, then a new rehabilitation effort should be considered. *Post-employment services** are to be provided under an amended Employment Plan. Thus, a re-determination of eligibility is not required. The provision of *post-employment services** is subject to the same requirements as the provision of any other *vocational rehabilitation service**. *Post-employment services** are available to assist an individual to maintain employment (e.g., the individual’s employment is jeopardized because of conflicts with supervisors or co-workers, and the individual needs mental health services and counseling to maintain the employment), to regain employment (e.g., the individual’s job is eliminated through reorganization and new placement services are needed), and to advance in employment (e.g., the employment is no longer consistent with the individual’s strengths, resources, priorities, concerns, abilities, capabilities, interests, and *informed choice**).

*Post-employment services** may consist of any appropriate *vocational rehabilitation services** described throughout this manual.

SERIOUS FUNCTIONAL LIMITATIONS

Serious Functional Limitations are Defined as Follows:

A serious limitation in a functional area means a reduction, due to a severe physical or mental impairment, to the degree that the individual requires services or accommodations¹ not typically made for other individuals in order to prepare for, enter, engage in, or retain employment.

While limitations may result from or be compounded by external factors, such as: geographical location, poor public transportation, or lack of training, these factors should not be the basis of the limitation for purposes of defining a serious limitation.

Defining limitations in these functional areas relies on the professional rehabilitation counselor’s interpretation of the effect of the disability on the individual as well as on medical or diagnostic/evaluative information.

FUNCTIONAL AREA	OVERALL DEFINITION	DEFINITION OF SERIOUS LIMITATION	EXAMPLES
MOBILITY	The physical and psychological ability to move about from place to place inside and outside the home compared to people with normal mobility. This includes travel to and from usual destinations in the community for activities of daily living, training, or work.	A serious limitation indicates that most common life and work activities are impaired or prevented and/or the person usually (more than half the time) requires assistance from others to get around in the community. This includes limitations due to significant physical risks or the effects of psychological or cognitive factors. <u>or</u> their range of travel is severely limited, <u>or</u> they require modifications, adaptive technology, and/or accommodations ¹ (not typically made for other workers) in order to move around the community	<ul style="list-style-type: none"> • Regularly requires any of the following to get around in the community; <ul style="list-style-type: none"> * modification * adaptive technology * accommodations¹ * assistance from others • Range of travel is severely limited or • A comparable substantial functional limitation is present

¹ Accommodations are defined as special working conditions, job re-engineering, rehabilitation technology, or substantial support and/or supervision.

FUNCTIONAL AREA	OVERALL DEFINITION	DEFINITION OF SERIOUS LIMITATION	EXAMPLES
INTERPERSONAL SKILLS	The individual's ability to establish and maintain personal, family and community relationships as it affects (or is likely to affect) job performance and security.	A serious limitation indicates the individual has difficulty establishing and maintaining relationships at all levels (personal, family and community), <u>or</u> exhibit behaviors which significantly detract from the performance of other workers, as well as the individual's performance and employability, and requires more than normal intervention on the part of a supervisor.	<ul style="list-style-type: none"> • Work history includes recent negative references, firings, multiple short-term jobs or other evidence of work adjustment problems • Serious problems in interpreting and responding appropriately to the behavior and communications of others • Unable to understand acceptable levels and types of personal interaction appropriate to the work site • Social isolation/withdrawal or rejection by co-workers • Frequent conflict with co-workers or supervisors • Conversation is rambling/halting, weak or pressured; may be illogical, irrelevant or obscure or • A comparable substantial functional limitation is present

FUNCTIONAL AREA	OVERALL DEFINITION	DEFINITION OF SERIOUS LIMITATION	EXAMPLES
COMMUNICATION	<p>The ability to effectively exchange (give and receive) information through spoken words or concepts (writing, speaking, listening, sign language, or other adaptive methods). Limitations may occur because of physical, emotional, or cognitive impairments.</p>	<p>A serious limitation indicates the individual is not able to communicate effectively or is dependent upon a person, service, device, or alternate mode of communicating or augmentation in order to communicate. S/he may not be readily understood by others and/or has significant difficulty understanding others in the training or work environment. The emphasis is on limitations resulting from a disability related communication difficulty, not on a communication problem resulting from a language or cultural difference,</p> <p><u>or</u> the individual cannot independently express or receive meaningful communication or does so with extreme difficulty, due to physical, emotional, or cognitive impairments.</p>	<ul style="list-style-type: none"> • Can't participate in conversation without speech reading, sign language, or other visual cues (language board, written aids, real time captioning, etc.), can't interpret telephone conversation even with amplification • Requires the regular assistance of another person to coach, clarify or validate communication, either received or expressed or • A comparable substantial functional limitation is present
SELF-DIRECTION	<p>The ability to independently plan, initiate, problem solve, organize, or carry out goal-directed activities related to self-care, socialization, recreation, and work. This does not relate to the worth of an individual's goals or plans, but the capacity to know, plan and act on a course of action based on personal values or goals.</p>	<p>A serious limitation indicates the individual requires intensive supervision and direction on an ongoing or episodic basis in order to begin and carry through on tasks, monitor one's own behavior, and make decisions,</p> <p><u>or</u> is confused and disoriented and requires constant supervision.</p>	<ul style="list-style-type: none"> • Requires intensive supervision and direction on a frequent or ongoing basis to begin and carry through with goals and plans, job tasks, to monitor own behavior, or make decisions • Confused or disoriented and requires constant supervision and direction • Highly distractible/short attention span/severe difficulty concentrating on work • Significant difficulty shifting focus from one activity or task to the next • Unaware of consequences of behavior or • A comparable substantial functional limitation is present

FUNCTIONAL AREA	OVERALL DEFINITION	DEFINITION OF SERIOUS LIMITATION	EXAMPLE
SELF-CARE	The ability to manage self or living environment (i.e., eating, toileting, grooming, dressing, and money management), as they affect an individual's ability to participate in training or work-related activities. This includes an individual's management of any special health and safety needs which exist; for example, medication management. Limitations may occur because of physical, cognitive, or emotional impairments, and could extend to all tasks or only specific tasks.	A serious limitation indicates the individual is dependent upon devices or the services of others to complete these activities.	<ul style="list-style-type: none"> • Requires assistance on the job for personal needs • Places self at risk due to poor decision-making/reasoning. Requires assistance on the job for personal needs, judgement and requires extra attention or monitoring • Unable to manage money or • A comparable substantial functional limitation is present
WORK TOLERANCE	Capacity to effectively and efficiently sustain physical, cognitive and/or psychological demands of a job. Limitations may be due to physical disability, stamina/fatigue, effects of medication, or psychological factors.	<p>A serious limitation exists if the individual is unable to perform work activity because of physical or mental functional limitations</p> <p><u>or</u> the individual requires modification, adaptive technology, <u>and/or</u> accommodations¹ (not typically made for other workers) in terms of capacity or endurance.</p>	<ul style="list-style-type: none"> • Requires modification, adaptive technology and/or accommodations¹ not typically made for others in terms of capacity or endurance (e.g., extra rest periods, adjustments in starting or ending time, shorter work day or week) or • A comparable substantial functional limitation is present

FUNCTIONAL AREA	OVERAL DEFINITION	DEFINITION OF SERIOUS LIMITATION	EXAMPLE
WORK SKILLS	The ability to do specific tasks required to carry out job functions as well as the capacity to benefit from training in the necessary skills.	<p>A serious limitation exists if the individual, due to their disability, has:</p> <ul style="list-style-type: none"> • Markedly limited or absent work skills • Markedly limited capacity to learn working skills <u>or</u> • Inability to use present work skills 	<ul style="list-style-type: none"> • Because of the disabilities, s/he is unable to obtain or maintain employment usually available to persons of equivalent age and education and has no skills which could readily be used on a job which exists in the economy • Can only learn tasks which are routine and repetitive • Requires accommodations or rehabilitation technology to participate in training to develop work skills • Speed of performing basic employment tasks is significantly reduced • Serious limitations in the ability to recall instructions or the appropriate task sequence • Requires more training and supervision than other trainees or • A comparable substantial functional limitation is present

GUIDANCE FOR DETERMINATION OF MOST SIGNIFICANT DISABILITY

(Note: At the time of the original publication of this section BRS was not making a distinction between "significant disability" and "most significant disability").

The following guidelines are designed to assist counselors in making determinations whether individuals meet the criteria for Most Significantly Disabled; this information is also helpful in determining Significant Disability:

The analysis must be done in sequence, as follows:

1. Is the individual **eligible**?

Assuming the individual has an impairment that is an impediment to employment the primary question becomes whether or not the individual **requires** vocational rehabilitation services in order to enter or retain employment.

Obviously if an individual does not **require** services, regardless of how severely disabled he or she may be, the issue of determining significant disability becomes moot.

2. Does the individual have a **Significant Disability**?

In order for an individual to qualify for a **Most Significant Disability** he or she must first meet the definition of having a **Significant Disability**. To meet the federal definition, the individual must *have serious limitations in one or more functional areas and require multiple services over an extended period of time.*

One or more vocational rehabilitation services (*in addition to guidance and counseling*) that are required to achieve an employment outcome, will meet the multiple services requirement.

A period of six months or more, either for the duration of the provision of a required service, or for the duration of the use of a provided good, will meet the extended period of time requirement.

3. Does the individual have a **Most Significant Disability**?

To meet this criteria the individual must have serious limitations in a total of **three or more** functional areas.

Or

The individual must be expected to need **significant on-the-job** supports for the duration of employment (after closure from BRS services).

EXAMPLE #1

DISABILITY:

Learning Disability

FUNCTIONAL LIMITATIONS:

Behavior problems (has lost several jobs due to arguments with employers); poor academic and work skills; has not been able to successfully live away from parents (has tried and failed)

PRESENT CIRCUMSTANCES:

Unemployed

SERVICES NEEDED:

Job placement, counseling, job coaching (6 months)

ELIGIBILITY

This individual requires VR services and is eligible.

SD: Meets SD requirements

MSD: This individual has limitations in the skills and interpersonal areas. The inability to live independently may be an indication of limitations with self-direction in work. More investigation is needed. Problems with the boss may be an indication of his/her inability to understand communication. There is the likelihood that this individual meets the requirements for MSD.

EXAMPLE #2

DISABILITY: Learning Disability

FUNCTIONAL LIMITATIONS:

Individual lives independently but has very poor memory and needs frequent prompting and refreshing of skills. No significant behavioral problems.

PRESENT CIRCUMSTANCES:

Unemployed.

SERVICES NEEDED:

Job coaching (possibly on-going), counseling, placement.

ELIGIBILITY:

S/he requires services and is eligible.

SD: Meets SD requirements if services needed for at least **6 months**.

MSD: If s/he needs ongoing job coaching, then s/he is MSD. **If this is not the case**, three functional areas probably not present so the individual would not be considered MSD.

EXAMPLE #3

DISABILITY:

Learning Disability

FUNCTIONAL LIMITATIONS:

Academic deficits, but able to retain job skills once learned. No behavioral problems.

PRESENT CIRCUMSTANCES:

Unemployed.

SERVICES NEEDED:

Training, counseling.

ELIGIBILITY:

This individual requires VR services and is eligible.

SD: SD if the services needed for over 6 months.

MSD: Not MSD, as described. S/he only has limitations in one functional area (i.e., skills)

EXAMPLE #4

DISABILITY:

Controlled seizure disorder; learning disability

FUNCTIONAL LIMITATIONS:

Long history of working with family business. After business closed, s/he tried multiple jobs and was fired. Lacks awareness of impact of behaviors on others and has difficulty working with others. During a recent job interview, was disruptive and was asked to leave. He did not respond until employer resorted to yelling and grabbing the individual by the lapels. Some academic/skill problems.

PRESENT CIRCUMSTANCES:

Unemployed

SERVICES NEEDED:

Counseling, job placement, job coaching (6 months).

ELIGIBILITY:

This individual requires services and is eligible.

SD: Meets SD requirements.

MSD: Has functional limitations in the skill and interpersonal areas. The recent incident with the employer during the job interview may be an indication of problems with receptive communication as a result of the learning disability. Therefore, possibly MSD.

EXAMPLE #5

Same as Example #4, but services expected to be needed for 3 months.

SD: In this case, not SD, since s/he does not need services over an extended period of time.

MSD: Not MSD since does not meet SD requirements.

EXAMPLE #6

Same as Example #4, except s/he is now successfully working in a job, but he feels this position is not the equivalent of the previous employment in the family business and wishes to seek another position.

ELIGIBILITY:

If the present employment is commensurate with his/her abilities, s/he does not require services to gain or maintain employment and therefore is not eligible. No determination of SD or MSD needed if ineligible.

EXAMPLE #7

DISABILITY:

Drug abuse; oppositional defiant disorder.

FUNCTIONAL LIMITATIONS:

Poor academic skills (due to having been moved many times between institutions).
Engages in dangerous activities without consideration of consequences. Problems working with others.

PRESENT CIRCUMSTANCES:

Unemployed.

SERVICES NEEDED:

Counseling, psychotherapy (1 year).

ELIGIBILITY:

This individual requires services and is eligible.

SD: Meets SD requirements.

MSD: Shows deficits in skills, self-direction and interpersonal areas and would probably meet MSD.

EXAMPLE #8

DISABILITY

Hearing loss (profound)

FUNCTIONAL LIMITATIONS:

Uses sign language for communication. Lipreading ability is poor. Uses hearing aids, primarily for warning signals. Aids help to a very limited degree with lipreading.

PRESENT CIRCUMSTANCES:

Recently graduated from ASD. Presently seeking employment.

SERVICES NEEDED:

Counseling, job placement, interpreter services.

ELIGIBILITY:

This individual requires services and is eligible.

SD: Because of the level of her hearing loss, interpreter services will probably be needed for over six months (on an intermittent basis). Meets SD requirements.

MSD: Even though s/he probably does not have deficits in **three areas**, s/he will probably need some interpreter services on an ongoing basis (**albeit intermittent**). Therefore, s/he probably meets the requirements for MSD.

EXAMPLE #9

DISABILITY

Hearing loss (severe)

FUNCTIONAL LIMITATIONS:

Uses hearing aids. Binaural speech discrimination in the sound field at 45db is 50% in quiet, 15% in noise, unaided. Speech is impaired, but intelligible. Cannot use telephone with ease, but does well with in-person communication when s/he uses hearing aids. Hearing aids are 6 years old and cannot be repaired to work at specifications of the manufacturer.

PRESENT CIRCUMSTANCES:

Employed as a teacher in a public school, but needs hearing aids in order to perform the job.

SERVICES NEEDED:

Binaural hearing aids, counseling.

ELIGIBILITY:

S/he requires services to maintain employment and therefore is eligible.

SD: Meets requirements for SD. The ongoing need for the hearing aids meets the “services over an extended period of time” requirement for SD.

MSD: Probably not MSD. The only functional limitation is with communication and this individual probably does not have ongoing on-the-job service needs. The ongoing need

for goods on the job does not make someone eligible for MSD under “significant ongoing services on the job.”

EXAMPLE #10

DISABILITY

Paraplegia due to multiple sclerosis

FUNCTIONAL LIMITATIONS:

Employed full-time as an engineer.

SERVICES NEEDED:

Van modification for transportation to work, counseling.

ELIGIBILITY:

This individual services to maintain employment and therefore is eligible.

SD: Meets requirements for SD. The ongoing need for the van modification would meet the “services over an extended period of time” requirement for SD.

MSD: Probably not MSD. The only functional limitation is with mobility and this individual probably does not have ongoing on-the-job service needs. The ongoing need for goods does not make someone eligible for MSD under “significant ongoing services on the job.”

EXAMPLE #11

DISABILITY:

Paraplegia due to multiple sclerosis

FUNCTIONAL LIMITATIONS:

Uses a wheelchair. Lives independently, but needs devices to assist with self-care. The employer had to install grab bars in the bathroom for the individual. S/he is increasingly having problems with fatigue due to the disability.

PRESENT CIRCUMSTANCES:

Employed full time as an engineer, but requires a flexible work schedule due to the problems with fatigue.

SERVICES NEEDED:

Van modification for transportation to work, counseling.

ELIGIBILITY:

This individual requires services to maintain employment and therefore is eligible.

SD: Meets requirements for SD. The ongoing need for the van modification would meet the “services over an extended period of time” requirement for SD.

MSD: This individual has functional limitations in the areas of mobility, self-care and work tolerance. Therefore, the requirements for MSD are met. The limitations associated with self-care and work tolerance have been addressed through ADA with the employer, but this does not affect the MSD determination.

Guidelines for Presumptive Eligibility For Consumers Receiving SSI or SSDI

General Information

Consumers who come to apply for services from BRS, and have been determined eligible for SSI or SSDI, have already been through an extensive review of their disability and its impact on employment. For that reason, the public vocational rehabilitation program now affirms that any individual who has been determined to have a disability under SSI or SSDI is:

- Presumed eligible for *vocational rehabilitation services** and
- Considered an individual with significant disability (for purposes of order of selection)
 - Unless BRS determines that the individual is not capable of benefiting in terms of an *employment outcome** from *vocational rehabilitation services** due to the severity of the disability.

While we are required to make a presumptive eligibility decision for all applicants that are receiving SSI or SSDI benefits, we still may consider the possible need for Extended Evaluation for some consumers. Whether the consumer is determined to be eligible for vocational rehabilitation services, or, it is determined that there is a need for a period of extended evaluation, a decision needs to be made within the first 60 days after the application for services.

In addition, it is important to bear in mind that development of an appropriate Employment Plan is a separate process from the eligibility determination. The BRS counselor will need to do an assessment for determining the rehabilitation needs of the individual that begins with both the counselor and the consumer having a clear understanding of the disability, and the impact of the disability on employment. As much as possible, information that is current and available will be used for this assessment. If additional data is necessary to determine the *employment outcome** and the nature and scope of services to be included in the Employment Plan, BRS must conduct a comprehensive assessment of the unique strengths, resources, priorities, concerns, abilities and capabilities, including the need for *supported employment services**, for the individual.

Documentation

If the consumer tells us that they are receiving SSI or SSDI benefits, then we need to work with the consumer to obtain verification of their eligibility for those benefits. There are a number of different ways to get this verification, including: Counselors may ask the individual to bring documentation of their eligibility for SSI or SSDI benefits to the initial intake appointment; an applicant for BRS services may call a Social Security toll free number to request a Benefits Planning Query (BPQY – 1-800-772-1213), and they should receive this BPQY within a few days, and can share it with the BRS counselor; the BRS counselor may ask the Applicant to sign an Authorization for Release/Disclosure of Personal Information form to send to SSA to obtain confirmation of benefits, etc.

At the time that the eligibility decision is made, the Certificate of Eligibility must be completed for the case record. The Certificate should be completed, signed and dated, as the date of acceptance for services, for all SSI or SSDI beneficiaries. The counselor should fill in the information regarding the specific disability, and how the disability results in a substantial impediment to employment, with the information that is available to them at the time of eligibility determination; additional information to clarify how the disability will impact planning may be gathered during the comprehensive assessment prior to IPE development.

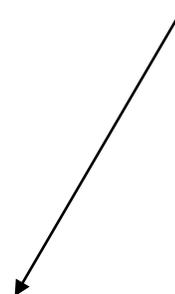
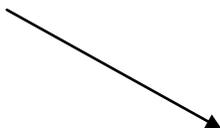
Applicant tells us he/she receives SSA
Status 02



Did not bring verification – need to obtain.
Hold in status 02, (or move to 06, if appropriate)
But discuss with the applicant that he/she will be presumed eligible; document in case record. Identify in case notes steps counselor/applicant will take to obtain verification, with time frames.

Verification received.
Move to status 10 (or 06 if approp.)
Complete Certificate of Eligibility if Moving to status 10, Extended Evaluation Plan if 06.

↓
Verification received:
Move to status 10
Complete Certificate of Eligibility.
If additional information is needed to move toward plan –



****Pursue assessment for determining the rehabilitation needs of the individual that begins with both the counselor and the consumer having a clear understanding of the disability, and the impact of the disability on employment. If additional data is necessary to determine the *employment outcome** and the nature and scope of services to be included in the Employment Plan, BRS must conduct a comprehensive assessment of the unique strengths, resources, priorities, concerns, abilities and capabilities, including the need for *supported employment services**, for the individual.**

Comprehensive Benefits Planning

In working with consumers who receive government benefits [e.g., Social Security SSI or SSDI benefits, Medicare, Medicaid, Temporary Assistance for Needy Families (TANF), SAGA, Section 8 housing assistance, etc.], it is critical that the counselor and consumer understand the impact of employment on these benefits. The success or failure of a rehabilitation plan is often contingent on the consumer's understanding of this impact and his/her willingness to accept any applicable change in benefits that may be the result of working.

It is therefore critical that the consumer and BRS counselor address this issue throughout the vocational rehabilitation process, beginning at the time of application, continuing through plan development and the securing of employment. BRS Benefit Specialists are available to assist the counselor and consumer in understanding and planning for any potential change in government benefits that may result from going to work.

Below is an outline of the respective responsibilities of BRS counselors and Benefits Specialists.

VR Counselor Responsibilities

- 1.) Provide basic benefits information to consumer.
- 2.) Refer consumer to resources as appropriate (i.e. MED-Connect - formerly called "Medicaid for the Employed Disabled" - if employed, Department of Social Services).
- 3.) Seek technical assistance/I&R from the Benefits Specialist throughout the rehabilitation process as needed.
- 3.) Refer consumer to Benefits Specialist for complex issues related to impact of employment on benefits.
- 4.) Use benefits information with consumer in employment planning process. Document use of benefits counseling in case notes.
- 5.) If case is open for more than one year, review benefits annually to identify possible changes and document in case notes.
- 6.) Review benefits before placement and refer to Benefits Specialist if new analysis is needed.
- 7.) At the time of rehabilitation closure, provide consumer with information on availability of continued benefits counseling assistance. Document benefits information in case notes.

Benefits Specialist Responsibilities

For Non-BRS consumers, Benefits Specialists will:

- 1.) Provide consumer and/or referral source with Benefits Assessment Checklist and/or Benefits Referral Form, as appropriate.
- 2.) Provide consumer with work incentive information relevant to the impact of work on benefits.
- 3.) Provide a summary of benefits analysis to consumer and anyone else the consumer chooses.
- 4.) Screen for BRS referral and provide consumer with information regarding services, including a BRS contact.
- 5.) Seek consultation from Project Director as needed.

- 6.) Remain available to consumer as a resource regarding benefits issues.

For BRS consumers, Benefits Specialists will:

- 1.) Meet with consumers, upon request.
- 2.) Provide consumer with work incentive information relevant to the impact of work on benefits.
- 3.) Provide a summary of benefits analysis to consumer and anyone else the consumer chooses.
- 4.) Meet and/or hold phone discussions with the VR counselor and consumer, as appropriate, during any part of the process.
- 5.) Seek consultation from Project Director when there is a need.
- 6.) Provide Technical assistance/I&R to VR staff as requested.
- 7.) Develop and provide ongoing training to VR staff and the community.

Project Director Consultant Responsibilities

- 1.) Coordinate, supervise development of and provide ongoing training to Benefits Specialists, VR staff and the community.
- 2.) Provide technical assistance to Benefits Specialists, VR staff and the community.
- 3.) Supervise benefits counseling staff including: hiring decisions, quality assurance, and employee service ratings.
- 4.) Participate in policy development in areas pertinent to the impact of work on benefits and services.
- 5.) Participate with other Connect to Work project staff regarding policy, public assistance, outreach, training, research and evaluation.
- 6.) Participate in development and assessment of technical materials/publications.
- 7.) Partner with other state agencies such as BESB, DMHAS and DDS.
- 8.) Provide ongoing mentoring and oversight of Benefits Information Network.
- 9.) Develop/maintain relationships with Social Security Administration.
- 10.) Participate in grant-writing opportunities.
- 11.) Report writing for MOA's and grants.

FUNDING OF TRANSITION SERVICES BY THE BUREAU OF REHABILITATION SERVICES

The funding of transition services or activities by BRS while the student is still in school continues to raise questions with many counselors assigned to school caseloads.

While each student's needs and situation must be looked at individually, there are some general procedures and questions that must be considered when making decisions to fund VR services during the transition period from special education:

1. If BRS counselors are asked to fund services during a Planning and Placement Team (PPT) meeting, without prior knowledge of this request or the student's specific needs, no commitments should be made at this time. The BRS counselor should inform the PPT administrator that they are unable to make this decision and it can be discussed outside the parameters of the PPT.
2. The BRS counselor should ask himself or herself,
 - "Is this service or activity the responsibility of the school district under the transition requirements of the Individuals with Disabilities Education Act (IDEA)?"

If the answer is yes, BRS should not be paying for this service, and a discussion with school district personnel should take place, outside of the PPT.

3. Recognizing that BRS counselors are often asked to fund services (particularly situational assessments) during the last few months of a student's high school program, the following questions should be asked:
 - "Will BRS need this information to assist the student and counselor in developing an appropriate Employment Plan?"
 - "Will denying payment for this service affect the student's ability to transition from high school with the "next steps" in place?"

If the answer is yes, a counselor may consider funding a particular service in this exceptional circumstance. However, BRS must begin the process of discouraging school districts from depending on BRS to pick up or provide services that could or should have been provided under the auspices of IDEA.

4. To begin this process, the following procedures must be followed if a counselor agrees to fund or co-fund a particular service:
 - The counselor should discuss the request with their respective supervisor or district director.
 - The counselor must initial any BRS financial commitment that is written into a student's individualized education program (IEP).

- The counselor should schedule a meeting with school personnel to discuss future commitments from BRS for an activity that clearly should have been provided under IDEA. School district personnel should be informed that this practice will not continue in the future and under IDEA, students should be prepared to transition to BRS and the adult world with the information needed to make definitive career plans and goals.
5. BRS counselors are encouraged to contact the State Department of Education transition coordinator to discuss if school requests are reasonable and are outside of their responsibilities under transition requirements of IDEA.

Guidance for Working with Consumers Toward Self-Employment

The following guidance is intended to assist counselors when considering an employment goal of self-employment and to supplement the guidance in the BRS Policy Manual for working with consumers toward a goal of small business ownership.

Distinguishing the Difference Between Business Ownership and Self-Employment:

Owning and operating a **small business** involves the selling of a product or service in the marketplace. The owner must develop and maintain a customer base in order to both achieve success and to remain successful. It generally involves an element of competition with similar businesses within the area, or in the absence of direct competition, the possibility of competition sometime in the future. In establishing the business venture, the individual must do a market analysis and develop a marketing plan (i.e., advertising). In cases where a consumer's goal is small business ownership, a referral to the Connecticut Small Business Development Center (CSBDC) will generally be required.

For BRS purposes, **self-employment** refers to an individual employed in the capacity of an independent contractor where a steady flow of work is assured, without the foreseeable need to market oneself or one's product and/or services. Independent contractors normally have a contractual relationship with one or more companies, non-profit organizations or governmental entities to deliver a good or service. The contract specifies what is required in the finished product or service only. The independent contractor exercises behavioral and financial control over the manner in which the good or service is produced and/or delivered.

There may be occasions in which the employment goal is a mix of **self-employment** (i.e., independent contractor) and **small business owner/operator**. Typically this would occur when the consumer has contractual relationship(s) for a portion, but not all, of their planned venture. Counselors are encouraged to discuss these cases with their supervisor or district director to determine if a referral to the CSBDC is warranted. In these cases, as well as any other where the counselor is unsure of the distinction between business ownership and self-employment, the assistance of the Central Office Consultant assigned to small business services should be sought.

Self-Employment (Independent Contractor):

When it has been determined that the goal is self-employment, a referral to the CSBDC *is not necessary*. Rather, attention should be given to determining that the consumer possesses the necessary knowledge, skills, and stamina required for the job, as well as the personality attributes associated with success in self-employment. These include good time management skills, organizational skills, and the ability to work independently without supervision (i.e., self-supervision). Counselors should also make sure that the consumer is aware of federal and state tax requirements for independent contractors, including the federal self-employment tax, requirements for filing quarterly estimated payments, record keeping, and the various deductions available to filers to lessen their tax

liability. Counselors should encourage consumers to seek advice from a qualified tax professional or from the Federal or State departments of revenue. A wealth of information is readily available online at www.irs.gov and www.drs.state.ct.us.

Prior to referring a consumer to the Connecticut Small Business Development Center:

Remember that when BRS agrees to support a plan for business ownership we have (1) agreed that the proposed business plan is an economically viable venture **and** (2) agreed that our consumer has the necessary strengths, resources, priorities, concerns, abilities, capabilities, and informed choice, to be successful. Before referrals are made to the CSBDC to develop a business plan we should take the following steps:

- Address the consumer's behavioral and/or other functional issues regarding the key attributes necessary in establishing a successful enterprise. The CSBDC will only address the viability of the proposed venture, not the suitability of the individual to succeed in the venture. That is the role of BRS.
- Make use of self-administered tests and tools designed to help consumers and counselors to determine if the individual has the personality attributes associated with success in self-employment or running a small business. One example is the Entrepreneurial Personality Test developed by the Institute on Rehabilitation Issues.
- Prospective consumers should be asked to attend CSBDC course called **Fundamentals of Starting Your Business** (A step by step overview of what it takes to get into business). These are half-day workshops held regularly at CT Small Business Development Centers throughout the state. There is a \$20.00 materials fee.
- Counselors and other VR staff are also encouraged to take advantage of the **Fundamentals of Starting Your Business** class. CSBDC has committed to making this class available to groups of VR staff or individuals can attend any of the publicly offered classes.
- Assure that prospective consumers have had benefits counseling to assist them in understanding the impact of income on cash or medical benefits and work incentives that may apply to them.
- **Counselor must consult with the BRS Central Office consultant assigned to small business development** on any and all issues you feel should be addressed; all small business plans should be reviewed with Central Office Business Consultant to maintain consistency of practice across the agency. The consultant can review written materials, consult with the counselor, or make himself available to meet with the counselor and consumer. S/he can also supply copies of the various tools and tests and assist with the interpretation of the results.
- Consider assigning the consumer to research similar ventures that have been successful or to do other relevant homework that would be useful in assessing the individual's abilities as well as an opportunity for them to learn from some reality testing.
- Clarify with consumers that BRS will require an agreement in the Employment Plan that the consumer will report their earnings to SSA and DSS if applicable, and to IRS, State Revenue Services, and BRS.

With the Connecticut Small Business Development Center:

When the above activities have demonstrated that our consumer is someone for whom the Bureau would consider supporting in a plan for business ownership it is time to make a referral to the local CSBDC counselor.

- Obtain a signed release by the consumer to share information with the CSBDC counselor regarding your consumer.
- *It is essential that the VR counselor and the SBDC counselor meet together with the consumer for the initial visit.*
- The SBDC counselor will guide the consumer in the development of a written business plan. He/she may recommend that the consumer attend any of several additional classes offered by the CSBDC. The consumer is responsible to write the business plan.
- Another benefit available through the CSBDC is free accounting service sponsored by certified public accountants in Connecticut who volunteer their professional services to help small businesses.
- The SBDC counselor will review the final business plan. Their signature attests to their opinion that the plan, if followed as written, has a reasonable chance of being economically successful.
- The “Standard” for judging economic viability will be at two levels as specified in the state regulations for vocational rehabilitation:
 1. After two years in operation the business expected to generate income for the individual (over and above expenses) **at or above** the amount identified by the Social Security Administration as “Substantial Gainful Activity (SGA)” (\$1,040/month as of January 2013), or
 2. After two years in operation the business is expected to generate income for the individual (over and above expenses) but the income expected to be **less than** “Substantial Gainful Activity (SGA)” (\$1,040/month as of January 2013).

Once the CSBDC has attested that the Business Plan meets either of the standards above, BRS must ultimately decide if we agree to the plan. Despite the endorsement from the CSBDC, we must still be able to support the idea that our consumer can succeed with the plan. If we do agree, the level of projected earnings will govern the maximum amount of purchased goods or services that BRS can contribute toward the plan.

- It is recommended at this point that the counselor review the final proposed plan with the Central Office Consultant assigned to small business development. If there are any final questions or concerns raised by this review they should be directed to the counselor and the counselor’s supervisor or district director for resolution.
- Include the reporting of income (to SSA, DSS, IRS, DRS, and BRS) in the Employment Plan as a consumer responsibility.

Guidance on the Provision of Tutoring Services

Tutoring services are available for BRS consumers in two distinct categories, Content and Strategy. Which type of tutoring to utilize will depend on whether the consumer needs to simply increase his/her skills or knowledge or whether the consumer needs to be taught how to better take in information, retain it, and make use of it. In either case the learning must be directly related to the attainment of the employment goal.

Content Tutoring

- Content tutoring is used to increase consumer's mastery of subject matter. This tutoring may be for academics (English, Math, English as a Second Language) or skill development (trade skills, computer skills, general software applications).
- Individuals providing content tutoring must be teachers for academics, or have demonstrated expertise and credentials in the skill area being addressed.
- BRS maintains a limited list of content tutors. Counselors are expected to identify and recommend providers based on criteria stated above. New providers may be added with the approval of the appropriate Central Office Consultant.
- Content tutoring is for functional skill acquisition or remediation and must be provided through a plan containing measurable objectives leading to the employment goal. Progress reports are expected from the tutors.
- Payment for content tutoring has been established at a statewide hourly rate.

Strategy Tutoring

- Strategy tutoring is used to increase cognitive functioning. Although it may utilize subject matter as a context, learning subject matter is not the goal. The goal of strategy tutoring is to develop or increase ability to process information which enhances overall employability i.e.: memory enhancement, organization, sequencing, structuring written work, etc.
- Strategy tutoring is provided to consumers with cognitive deficits i.e.: learning disabilities, brain injury, etc. to improve their cognitive functioning. However, it is not to be utilized when these consumers only need content tutoring.
- Strategy tutors must have at a minimum a Master's Degree in Education or Psychology, experience working with individuals with cognitive disorders and meet the criteria outlined in the guide to selecting a strategy tutor on the following page.
- BRS maintains a list of qualified strategy tutors. In order to qualify potential tutors must submit their resume and copy of a tutoring plan and progress report to the appropriate Central Office Consultant for review prior to providing services to BRS consumers.
- Payment for strategy tutors is a set rate in accordance with the BRS fee schedule.

Counselors are encouraged to contact the appropriate Central Office Consultant to discuss consumer's tutoring needs as necessary.

Identifying a Strategy Tutor

The following questions are to be used as a guide when identifying a potential strategy tutor.

1. What is the experience and training of the potential tutor? Does the individual have training in the fields of education, psychology? Does the potential tutor have knowledge of teaching strategies?
2. Does the potential tutor have training and/or experience in working with individuals with special learning needs? (NOTE: it is important that the tutor has knowledge of issues concerning the specific disability of the consumer).
3. Has the individual had experience working with adults?
4. Does the potential tutor know how to individualize the tutoring to the needs of the consumer? Can the tutor's style be tailored to the learning style of the consumer?
5. Does the tutor know the difference between remediation, accommodation, and compensation? Is he/she able to determine which method(s) is best for in working with a specific individual?
6. Does the tutor know specific cognitive learning strategies? Does the tutor know when to teach learning strategies vs. subject matter? Do they know how to develop basic skills such as study skills, organization, and compensation strategies? Does the tutor know alternate reading, language or educational techniques?
7. What types of material does the tutor use? Can it relate to life skills or specific vocational competence?

Guidance on the Provision of Hearing Aid Services

Note:

When BRS is providing services under an Order of Selection, BRS is required to focus on providing services to persons with the most significant disabilities. In determining to what extent a hearing disability is considered “significant”, the counselor will need to carefully review the audiological information in the case record. As a guide in determining severe impairment for individuals who are hard of hearing, the counselor should look for one or more of the following criteria:

- 1) a hearing loss of 55db or greater (unaided) as measured by the Speech Reception Threshold (SRT) or Pure Tone Average (PTA) or,
- 2) Under 54db SRT or PTA unaided in the more useful ear with:
 - a) speech discrimination less than 70% measured at 45db in quiet (measured binaurally, in the sound field),
 - b) speech discrimination less than 70% measured at 45db in noise if noise is a significant factor in the employment setting, or,
 - c) a statement from an ENT physician indicating a rapidly progressive loss in which a consumer's hearing is very close to meeting the speech discrimination scores of less than 70% measured at 45db in quiet and in noise (if noise is a significant factor in the employment setting).

These criteria are to be used in conjunction with the specific functional limitations and the need for multiple services over an extended period of time (see Appendix A, “Guidance for Determination of Most Significant Disability”).

Counseling

Hearing aids may be provided as part of a consumer’s Employment Plan when the consumer requires amplification to manage the required communication on the job. The technology involved with hearing aids changes rapidly, and it is important that we understand the consumer’s employment related communication requirements, and the available options, when providing amplification.

The BRS counselor must review the **BRS Guidance on the Provision of Hearing Aid Services** with each consumer, *prior to the appointment with the audiologist*. This will help the consumer to work cooperatively with the audiologist to identify the hearing aid that will meet their basic communication needs in their job, allowing the consumer to maintain or regain employment.

Consumers who will be using hearing aids, especially first-time users, will need counseling in a variety of areas to ensure adjustment to using amplification –

- Adjustment to hearing loss – helping the consumer to appropriately handle the perceived “social stigma” of wearing a hearing aid; accepting that the hearing aid may not “fix” every communication problem; being aware of the need to assertively request good communication behaviors from others, etc.
- Self-advocacy – being aware of his/her rights under ADA and how to discuss the effects of the hearing loss, and necessary accommodations, with co-workers, supervisors, and employers as needed, etc.
- Communication strategies – how to assess and modify communication barriers in the workplace.
- Information on assistive technology – awareness of other devices, techniques, resources, etc, for improving communication.

Hearing Aids alone seldom resolve the communication barriers and other disability issues experienced by people with hearing loss, so further discussion of individual functional limitations, coping skills, accommodations, etc is necessary. The case record must document the need for and provision of this necessary counseling.

BRS Purchasing Procedures for hearing aids

The BRS contribution to the purchase of hearing aids is limited to that which meets the functional vocational rehabilitation needs of the consumer at the least cost to BRS -

- Wholesale cost –for a linear, conventional hearing aid or basic or mid-level digital or programmable digital hearing aid, BRS will pay up to \$800 per hearing aid wholesale cost, including discounts (additional cost for telecoil if recommended, verified by manufacturer’s list price sheet, can be added to this wholesale cost). Several hearing aid manufacturers have created their own BRS price list which is updated yearly and can be found on the BRS H-Drive. Price quote must be verified by actual invoice cost or manufacturer’s wholesale cost attached to the VR-24 Hearing Aid Price Quotation form. It is understood that the initial cost on the Hearing Aid Price Quotation form may sometimes be higher than actual cost, and must be adjusted to reflect actual cost to the vendor, at the time of billing to BRS; a copy of the invoice must accompany the final bill (RS-15) to BRS. BRS does not pay shipping for hearing aids.
- Audiologist recommendation for higher level or higher cost aid - Any recommendation *where the audiologist determines that the consumer requires a higher level, or more costly hearing aid to meet their vocational needs* must be reviewed by the BRS Central Office Consultant for Deaf/Hard of Hearing services, to determine the appropriateness of the recommendation.

- Ear mold fee- BRS will pay up to \$47.00 per ear mold and \$94.00 for a pair of ear molds. BRS does not pay shipping for ear molds.
- Dispensing fee - For programmable digital aids -\$525.00 for a monaural aid, and \$800.00 for binaural aids (for conventional, linear aids or for non-programmable digital aids the dispensing fee for a monaural aid is \$275.00 for monaural aid and \$425.00 for binaural aids; the reason for the increased dispensing fee for programmable aids is the additional time necessary for programming the aid).
- Hearing Assistive Technology Systems (HATS) Product Fee- Up to \$800.00 per HATS product with copy of invoice from manufacturer when approved. This also includes shipping for the product. Any recommendation *where the audiologist determines that the consumer requires a HATS product to meet their vocational needs* must be reviewed by the BRS Central Office Consultant for Deaf/Hard of Hearing services, to determine the appropriateness of the recommendation. BRS will only pay the invoice fee for a HATS product. The invoice fee must be included along with the **Hearing Assistive Technology Systems Price Quotation Form**.
- Hearing Assistive Technology Systems (HATS) Training Fee- Up to \$150.00. When HATS is approved by the BRS Central Office Consultant for Deaf/Hard of Hearing services; HATS Training Fee should be authorized if requested by the audiologist. Audiologists should provide counselors with an estimate of how much time they will need to train a consumer on their HATS. The HAT Training Fee is available in 15 minute installations at \$25.00 per installment. The maximum time one can authorize for the HATS Training Fee is an hour and half (\$150.00).
- Additional cost for optional features, hearing assistive technology systems (HATS), accessories, or upgrades - A consumer has the option of paying the additional cost required in order to obtain a higher level higher cost hearing aid, additional optional features, HATS, or accessories if they wish. BRS will not participate in additional costs for features chosen by consumer that are not required for their employment-related communication needs.
- Approval for payment of hearing aids - In order to avoid cumbersome refund processes, BRS should generally not approve payment for aids until after the return visit and receipt of the VR-22 (“30-day re-check report”) from the vendor, assuring that the originally dispensed aid is appropriate and effective.

- **Replacement** - BRS will replace current hearing aids only when the consumer has shown that they have been cared for properly (aids have not been not misused or neglected, consumer has followed manufacturer’s instructions; not “chewed by family pet”, “flushed down toilet”, etc) and only for the following reasons:
 - The consumers’ hearing aids are no longer working up to specifications and repairs will not restore them to that condition
 - The consumer’s hearing loss has changed significantly requiring different amplification, or
 - The communication needs on the job have changed notably, requiring different amplification.

If a consumer who is already a hearing aid user comes to BRS to request replacement of aid(s), they must bring a report from an audiologist explaining why a replacement is required. *Any case where the counselor believes that there may be other reasons for replacement of hearing aids must be reviewed by the BRS Central Office Consultant for Deaf/Hard of Hearing Services*

- **Repairs** – BRS will not generally participate in paying for repairs for hearing aids; repairs are considered normal upkeep and care for the aids, and are the responsibility of the consumer. It is expected that the consumer will plan for regular care and upkeep, including repairs, identifying a savings plan as part of their Employment Plan/IPE to be prepared for this. Any exceptions must be reviewed by the BRS Central Office Consultant for Deaf and Hard of Hearing Services.

Required Case Record Documentation and Steps for Purchasing Hearing Aids

1. **Medical clearance** for the use of amplification – an Otological examination within the past six (6) months by a licensed otologist or otolaryngologist, preferably reported on the Otological Exam Report (VR-20), that specifies medical clearance for amplification for the consumer.
2. **Audiological and hearing aid evaluation** performed by a State Licensed Audiologist and reported on the BRS Audiometric Exam Report (VR-19). **The VR-19 form** must be sent to the audiologist, with the completed **Workplace Assessment form** attached, when the consumer is referred for a hearing and/or hearing aid evaluation. If the consumer has recently had an audiological assessment and a copy is in the case record, only the hearing aid evaluation needs to be completed and reported on the VR-19 form. The audiologist must complete the VR-19 form, and return it to the counselor, with a narrative that explains the

hearing aid recommendation. The specific features of the recommended hearing aid that are required to meet the communication needs of the consumer must be explained in the narrative. BRS will only provide the hearing aid that is reasonably necessary when considering the individual consumer's communication needs on the job. The consumer must pay for any additional features, or "upgrades" suggested by the audiologist and preferred by the consumer. The hearing aid evaluation report is expected to document significant improvement in speech reception and discrimination with the new aid(s), or improvement in awareness to required environmental sounds on the job.

If a consumer prefers to purchase their hearing aid through a licensed hearing aid dealer, not a licensed audiologist, the consumer's audiological and hearing aid evaluation by a licensed audiologist must be completed within 90 days prior to the of purchase of the hearing aid per state regulation sec. 20-406-9, unless prohibited or expressly not required, by a licensed physician or an otolaryngologist in writing.

If an audiologists is also recommending a Hearing Assistive Technology Systems (HATS) product they must send a thorough written report documenting their recommendation for the product and its significant improvement i.e. increase in speech discrimination, speech reception, decibels, for a consumer's communication needs in the workplace along with a **Hearing Assistive Technology Systems Price Quotation Form**.

Note: Consumers who are already hearing aid users *must be tested* with their current hearing aid(s), and the results of these tests appropriately verified on the VR-19, in order to document the need to replace these aids.

3. The completed **Workplace Assessment form**; copy to be sent with the VR-19 to the audiologist. The counselor should review this form carefully with each consumer, so that there is agreement and understanding of the consumer's significant work-related communication barriers and possible solutions. The case notes must corroborate that there is sufficient evidence that the consumer requires hearing aid services in order to work.
4. **Hearing Assistive Technology Systems (HATS) Evaluation** is a service only to be authorized when a Deaf or Hard of Hearing consumer needs to be evaluated with their current hearing aid for a HATS product. If a Deaf or Hard of Hearing consumer is being referred an audiologist to be evaluated for hearing aids, this service is included in the Audiometric and Hearing Aid Evaluation service. Audiologists are asked to send a thorough written report documenting their recommendations for the HATS product and its estimated significant

improvement i.e. increase in speech discrimination, speech reception, decibels, for a consumer's communication needs in the workplace along with a **Hearing Assistive Technology Systems Price Quotation Form**.

5. **The Hearing Aid Quotation Form (VR-24)** completed by the vendor, with documentation of the cost to the vendor from the manufacturer. This information is needed for the BRS counselor to be able to authorize purchase of the amplification (invoice, or manufacturer's wholesale price list can be used for price quote documentation; *It is understood that the initial cost on the Hearing Aid Price Quotation form may sometimes be higher than actual cost, and will be adjusted to reflect actual cost to the vendor, at the time of billing to BRS.*).
6. **The Hearing Assistive Technology Systems Price Quotation Form** must be completed by the vendor, with documentation of the cost to the vendor from the manufacturer, shipping costs, and an estimate of office time needed for the audiologist to train the consumer on the HATS product. This information is needed for the BRS counselor to be able to authorize purchase of the product (invoice, or manufacturer's wholesale price list can be used for price quote documentation; *It is understood that the initial cost on the Price Quotation form may sometimes be higher than actual cost, and will be adjusted to reflect actual cost to the vendor, at the time of billing to BRS.*).
7. **The Employment Plan/IPE & Counseling** - Counselors must help consumers to plan for how replacement needs will be met by non-VR sources after the VR case is closed. Since the consumer will be working, it is expected that consumers will plan for taking care of their hearing aids – including annual check-up with the audiologist; repairs if needed, batteries, etc. Consumers should ask the audiologist/hearing aid vendor for estimated costs for repairs, annual check-up and upkeep of the hearing aids, so that they can prepare and save for these costs. The counselor and the consumer will identify a savings plan as part of the IPE to ensure that the consumer will be able to provide for maintenance of the hearing aid(s) and replacement of same.
8. **Verification of medical insurance coverage** - BRS will only authorize purchase of the appropriate hearing aids after the consumer has provided verification of the amount of coverage, or denial of coverage, by the consumer's medical insurance carrier in writing, for the case file. Any insurance benefit will be used as the required comparable benefit.

9. **Follow-up Report, VR-22** -Within thirty (30) days after the consumer receives a hearing aid from the vendor, the consumer must return for the follow-up visit with the audiologist to determine the effectiveness of the hearing aid. This follow-up visit is included under the original authorization for a hearing aid evaluation, and the report must be prepared on our hearing aid re-evaluation report form (VR-22). *This follow-up visit is extremely important, as it provides the opportunity for the consumer to let the audiologist know how effective the hearing aids have or have not been in the workplace.* The audiologist may be able to make adjustments based on information from the consumer, to increase the effectiveness of the hearing aid in the workplace. In addition, another purpose for this follow-up visit is to decrease the use of inappropriate aids. Under Public Act 77-743, an aid can be returned to the vendor within thirty (30) days of purchase and a refund of at least 88% of the purchase price provided. Every effort should be made to get the 30-day re-check report back from the audiologist to put into the case record. If the counselor is not able to obtain the VR-22 report, the counselor must document that they have spoken with the consumer, the aids are working satisfactorily, and the consumer accepts responsibility for any problems that may come up by not having returned for the re-check.
10. **Returning hearing aids within 30 days**- A consumer can return a hearing aid to their audiologist anytime within the first 30 days of purchase if they find that the hearing aid is not benefiting them. Prior to retuning the hearing aid, the consumer should work with their audiologist to find another hearing aid that works for them if possible. If no hearing aid is found or the consumer decides that they will not use the hearing aid, they must return the hearing aid within 30 days (before we pay for the hearing aids).

CT Public Act 99-111 states that we can then pay 12% of the hearing aid cost plus cost of ear mold (if purchased) for restocking fee. If an audiologist requests a cancellation fee, the audiologist can submit their cancellation fee invoice to the counselor and the counselor can pay up to:

- a. 12% of the hearing aid
- b. 12% of the dispensing fee
- c. The cost for the ear mold if purchased
- d. The shipping and handling fee originally authorized when purchasing the hearing aid

Selecting the Right Hearing Aid

- 1) **Monaural** (rather than binaural) hearing aids will be considered when the audiologist documents sufficient improvement in speech reception threshold and/or speech discrimination with use of one aid, to meet the consumer's work-

related communication needs. If the vocational benefits of binaural versus monaural amplification for the consumer are *questionable*, a monaural aid should be authorized, and the consumer should use it for a 30-60 day period. At the conclusion of this period, consumer input regarding the benefit of the aid will be used to determine if a second aid is necessary (if the second aid is necessary, BRS will then pay the additional dispensing fee, equal to one-half of the dispensing fee paid for the first aid).

- 2) **Binaural hearing aids** may be provided when the consumer has used binaural amplification previously, and/or when the audiologist provides justification for binaural rather than monaural hearing aids that applies to the consumer's work situation.
- 3) **Cros or Bicros hearing aids** may be provided when the consumer has a one-sided hearing loss. Cros hearing aids allow sound to be transmitted via a receiver from the poor ear to the better ear. Bicros hearing aids allow sound to be transmitted via a receiver from the poor ear to the better, yet impaired ear that requires a hearing aid to amplify sound as well.
- 4) A **canal aid** or **CIC** (completely in the canal) may be purchased by BRS **only** when the audiologist and the counselor agree that there is substantial medical or vocational justification. Two examples might be where the consumer has an ear deformity that makes it impossible to use a different type of hearing aid, or, where the consumer's job duties would require the use of the smaller aid for safety or for other strong vocational reasons. If such substantiation cannot be provided, the consumer must pay the difference between the canal aid and standard type of hearing aid (ITE) that would be appropriate for the consumer, if she/he prefers the canal aid. Concerns about "cosmetics" – how the hearing aid looks – are not sufficient reason for BRS to purchase these smaller hearing aids.
- 5) The overwhelming majority of hearing aids that are now available are **digital or digital programmable** hearing aids. **Linear conventional style hearing aids** are made by very few manufacturers and will most likely only be recommended for profound hearing loss where the primary benefit is to help the consumer to be aware of sounds in the environment. Individually programmable hearing aids should be considered for special circumstances, such as the consumer with Meniere's disease where his/her residual hearing fluctuates, therefore requiring appropriate program changes.
- 6) A **telecoil** should be included in (one of the) hearing aids as a T-coil is required for telephone communication and use of other Assistive Listening Technology.

There may be an additional “add on” fee for telecoil being added to the wholesale cost of the aid.

- 7) **Hearing Assistive Technology Systems (HATS)** are devices that can be used with or without hearing aids or cochlear implants to make hearing easier and thereby reduce stress and fatigue. Examples of HATS products include, but not limited to T-Coil Loops and Silhouettes, FM Systems, Amplified or Bluetooth Stethoscopes, Pocket Remotes, Bluetooth accessory adapters, and HATS products produced by hearing aid manufacturers.

Any recommendation *where the audiologist determines that the consumer requires a HATS product to meet their vocational needs* must be reviewed by the BRS Central Office Consultant for Deaf/Hard of Hearing services, to determine the appropriateness of the recommendation. These devices may be approved for purchase when required for a consumer to maintain employment, comparable devices of lesser cost have been explored, and they are not reasonable accommodations through their employer.

The BRS counselor will provide guidance to the consumer on how to communicate and negotiate with their employer and ask for the recommended or comparable HATS product as a reasonable accommodation. Audiologists are encouraged to provide both the BRS counselor and consumer with a list of comparable devices that employers may elect to purchase. While employers have purchased HATS products produced by hearing aid manufacturers that only work with one’s personal hearing aid, they may be more likely to purchase a device that can be used by other employees who use different brands of hearing aids.

When a HATS product is approved for purchase, BRS will pay the invoice price which includes shipping and a HATS Training Fee if requested by an audiologist. Invoice prices for HATS products and shipping must be provided to counselor along with an estimate of how much time is required for training the consumer on this device on our **HATS Product Price Quotation Form**. Our HATS Training fee is \$25.00 per 15 Minute Installment up to an hour and half (\$150.00) per device

If a consumer’s HATS product is not required for employment but recommended for the consumer’s personal gain, the consumer can purchase the HATS product at its own expense or apply for a loan through the CT Tech Act Project.

- 8) **Cochlear Implant and Bone Anchored Hearing Aid (BAHA) services** – are covered by most insurances, including Medicaid. The use of cochlear implants to

augment hearing/communication is becoming more common. However, as with all of the services that are provided by BRS, these services must be vocationally necessary for the successful completion of the IPE, and can only be considered after all the other possible options and similar benefits are ruled out. If hearing aids are providing appropriate benefit, such that the consumer is functioning on the job, the additional cost of cochlear implant services may not be considered. *Any decisions for providing services related to cochlear implants and BAHAs must be made in consultation with the SCD (BRS Consultant on Deaf/Hard of Hearing Services). All consumers who use Cochlear Implants and BAHAs should be served by the RCD in the appropriate region.*

Use & Care of the Aids

The hearing aid vendor should teach the consumer how to use and care for the aid. The life span of an aid is approximately 5-7 years and *the maintenance and repair of the aid are the consumer's responsibility*. Consumers will need to demonstrate that they have appropriately cared for the hearing aids provided, if they are seeking replacement aids at anytime (show records of repairs, annual check of aids, etc).

Consumer's responsibilities

It is the counselor's responsibility to discuss with the consumer his/her responsibilities for on-going care for the aid, including purchase of batteries, repairs to the aids, annual check-up of the aids with annual hearing test, and replacement if lost, damaged or stolen. Loss and damage coverage is standard with most hearing aids. One year is typical, however some brands offer two or more years, including an occasional option for an extended warrantee; BRS will not provide care/repair or replacement for any hearing aid that is under this warrantee period.

Consumers should also be strongly encouraged to obtain supplemental insurance coverage for the aids against loss, damage or theft. The hearing aid manufacturer may offer this insurance for sale, there are private companies who offer such insurance, and/or the consumer should check with his/her home Owner's/Renter's insurance for possible coverage.

Hearing Aid Services Required Forms, Codes, and Fees:

Required forms:

Audiometric Exam Form; with Workplace Assessment form (completed by the consumer and/or counselor)

Hearing Aid Quotation form
Hearing Aid Re-evaluation Form (30-day re-check)
Hearing Assistive Technology Systems Price Quotation Form

BRS fees for assessments:

Audiological- \$75.00 /EVAL
Hearing Aid Evaluation- \$55.00 /EVAL
Hearing Assistive Technology Systems Evaluation- \$55.00

Fees for hearing aids:

\$800.00 /PAIR Binaural Dispensing Fee Programmable Hearing Aid
\$525.00 /ITEM Monaural Dispensing Fee Programmable Hearing Aid
Wholesale cost to Dealer up to \$800.00/** Binaural Hearing aids
Wholesale cost to Dealer up to \$800.00 **/ Monaural Hearing Aid
Up to \$94.00/PAIR Custom molded ear molds (two aids)
Up to \$47.00/MOLD Custom molded ear mold (one aid)
\$425.00/PAIR Binaural Dispensing Fee
\$275.00 /AID Monaural Dispensing Fee
Up to \$800.00 /ITEM Hearing Assistive Technology System (HATS) product
\$25.00/15 Minute Installment up to \$150.00 Hearing Assistive Technology Systems Training Fee

Exceptions to the above guideline or “waivers” to the procedures must be reviewed and approved by the BRS Central Office Consultant for Deaf and Hard of Hearing Services (SCD), or other BRS Director’s designee.

Guidance on the Provision of Home Modification Services

This guidance is intended to assist counselors when considering modifications to a home or business that may be required to allow independent entrance/egress or to allow the consumer to perform self-care or grooming activities in preparation for going out to work. This guidance is a supplement to the section in the Policy Manual on Home Modifications. Any time that Home Modification services are being considered, the counselor must give a copy of both the Home Modifications section from the Policy Manual, and this Guidance section, to the consumer so that they understand the role of BRS in considering this service.

When a consumer indicates that he/she believes that they have barriers in the home that prevent them from accomplishing the tasks of daily living that are necessary to prepare to go out to work each day, the counselor should arrange to visit the home with the consumer. The counselor should document and list the specific barriers that exist, and begin a discussion with the consumer about possible solutions to the barriers. There may be times when the counselor and consumer can discover ways to resolve the barrier, without actual provision of paid services, or through use of other resources available to the consumer. The counselor may also want to consider using the BRS Case Conferencing model to come up with other appropriate solutions, such as use of Personal Assistance Services, technology solutions, “low-tech” solutions, etc.

There may be instances when a simple change in the home can be done without involving Architectural services; in these cases, the District Director must confer with the Bureau Chief to determine steps in proceeding with the service.

Consultation with Supervisor and District Director must be made after the home visit has created a list of barriers, to assess appropriate “next steps”. The counselor may decide that an evaluation of the consumer’s needs in the home by an Occupational Therapist (OT) or Physical Therapist (PT) would provide appropriate recommendations for treatment to strengthen the consumer’s abilities (PT, OT, etc.), or, for equipment to allow the consumer to overcome the barriers (such as portable lifts, reach/grab equipment, etc). If equipment or devices are being considered, the counselor must also confer with the BRS Assistive Technology consultant for advice and assistance. Once the treatment or equipment has been identified, the counselor can work with the consumer to determine whether other resources or benefits, such as medical insurance, will cover the cost of the service; as always, this is required before BRS can commit to helping with the purchase of the required service.

If it is determined after consultation with the District Director/Supervisor that architectural modifications to the home are the appropriate solution to barrier removal, the counselor should notify the Central Office Home Modification liaison (COHML). The consumer selects an architect from the approved BRS vendor list. The counselor completes the “Architectural Referral Form” and contacts the architect to develop a preliminary proposal and estimate for the project; counselor does four-hour fiscal authorization for “Initial

Architect Consultation”. Modifications should be done in coordination with the PT or OT if they are involved in the planning and recommendations for equipment/services for the consumer.

When the Architect’s estimated cost for the proposed home modification exceeds \$20,000, the case will need to be reviewed by the District Director to ensure that the proposed services are within the scope of BRS’s policy to provide only minor modifications. The District Director will provide a written decision for the counselor regarding whether to proceed with modifications in these cases; a copy of the decision will be sent to the Bureau Director.

As stated in the Policy Section for Home Modifications (Chapter III, Section 4(f)) “BRS’s participation in alterations shall be limited to those determined by the Bureau to meet the functional needs of the consumer at the least cost. Ramps, grab bars, lifts, or bathroom modifications are examples of such services.” Services incidental to the modifications being provided to address functional limitations may also be provided, such as moving some electrical wiring in order to widen a doorway. Major home modifications such as ceiling lifts and interior elevators will generally not be considered, as they require structural modifications and construction within the consumer’s home which is beyond the scope of the BRS Home Modification policy. *If structural defects or building code violations are discovered during the course of modifications, BRS will not be able to proceed unless the consumer is able to take care of the problem. If it is determined that the consumer is not able to correct the problems, and modification cannot go forward, BRS will discontinue any work that has been done to that point, and will restore the consumer’s home to the pre-construction condition.*

As with all VR services being considered, modifications should be done so as to present the least possible cost to BRS, utilizing all available comparable benefits, such as Medicare or Medicaid for lifts and other equipment. If the consumer should require extensive or expensive home modifications that are outside of the responsibility of BRS to provide minor modifications, other resources can be sought out to cover those modifications (such as – the Tech Act Loan program; home equity loan, etc). The consumer will need to understand and plan for the ongoing costs associated with any home modifications and/or equipment (regular repairs, possible replacement, etc). If the consumer is on benefits and chooses to go forward with extensive modifications using other financial resources, counselors may request assistance from the Connect to Work Center CWICs (Community Work incentives Coordinators) to provide asset and life planning information and counseling to the consumer.

The BRS counselor may also need to inform the consumer that he/she may need to make arrangements for alternative living space during the time that the modifications are taking place, if the modifications will cause significant unavailability of critical areas of the home, such as the bathroom, for an extended period of time. *BRS will not assume responsibility or cost for these alternative living arrangements during construction.*

The counselor and consumer should also discuss “life planning” for the consumer and consider the option of relocating to another area of the state where a more accessible living situation, and possibly more accessible transportation and other supportive services, can be found that will enable the consumer to plan for employment and self-sufficiency.

Guidance for Home Modifications – Steps to Follow

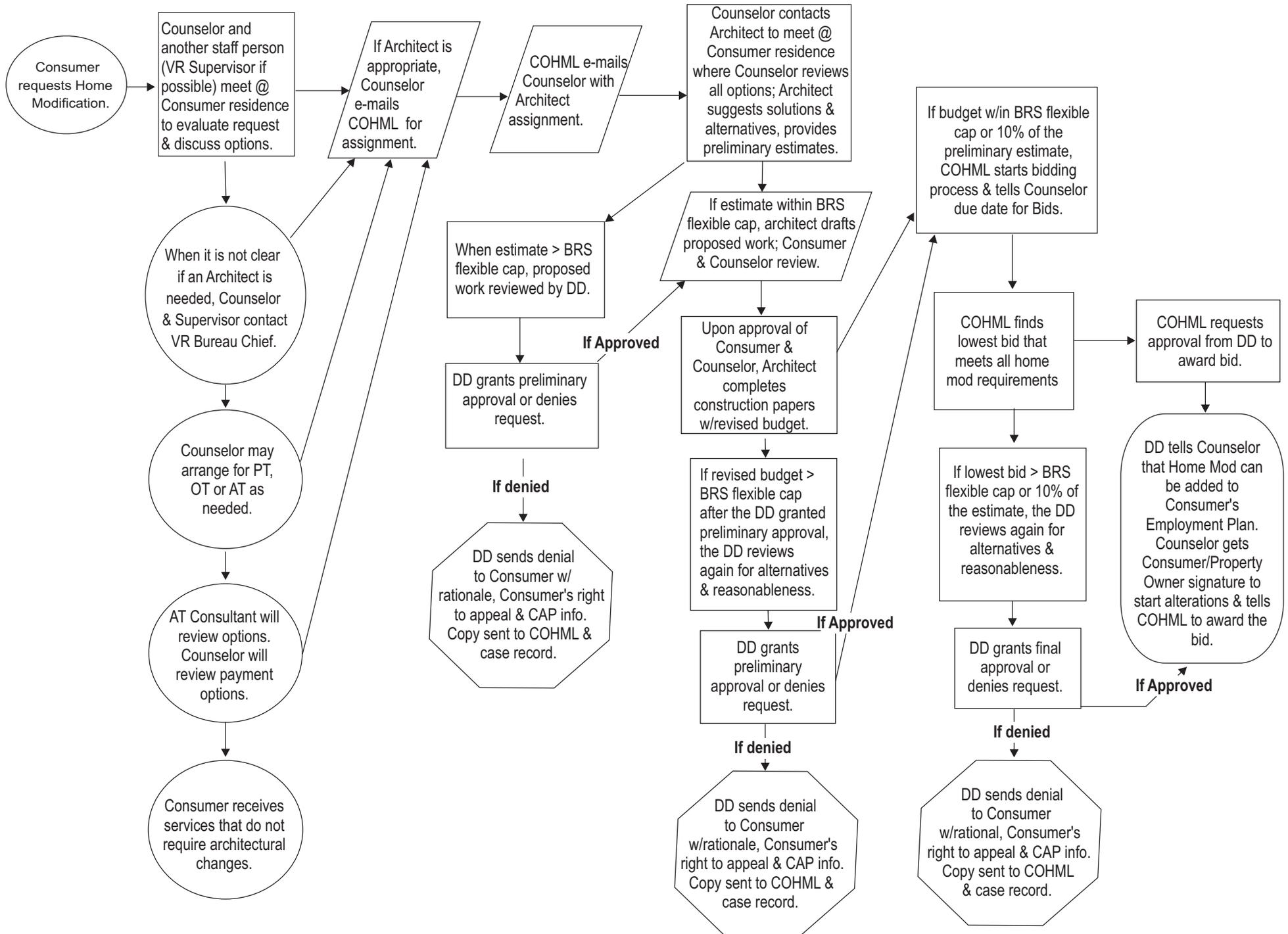
1. Counselor and Consumer discuss accessibility-related issues within the home that are likely to be barriers to the achievement of an employment goal. Counselor and/or VR supervisor meet with Consumer at his/her home to identify the barriers, review agency policy, and propose possible solutions. (The counselor may use the optional form “BRS Home Modification Site Questionnaire” to assist in looking at consumer barriers in the home. This form is found on the H: drive under “Other Forms.”)
2. If the proposed solutions do not appear to require the involvement of an architect, counselor and supervisor should contact the VR Bureau Chief to discuss possible options.
3. If the proposed solutions may include treatment/strengthening for the consumer, counselor should consider arranging an assessment by a Physical Therapist; if the proposed solutions may involve devices and/or equipment, the counselor should consider arranging an assessment by an Occupational Therapist, or, contact the Central Office Assistive Technology consultant.
 - a. If devices or equipment are recommended, recommendations should be reviewed with the Central Office Assistive technology consultant before proceeding.
 - b. If treatment, devices, or equipment are recommended (such as PT, portable lifts, shower chair, reach/grab equipment, etc) counselor and consumer must explore similar benefits for purchase (such as private insurance, Medicare, Medicaid)
4. If the proposed solutions appear to be within the scope of the agency’s Home Modification Policies and the counselor’s supervisor and District Director (as applicable) approve, the consumer selects an architect from the approved BRS list (found on the H: drive under “Other Forms”). The consumer initials, dates and signs a release of information for the home modification bidding process (found in the BRS Policy Manual, Chapter III, Section f). The counselor completes the “Architectural Referral Form” in System 7 and emails this form to the architect and to the BRS Central Office Home Modification Liaison.
5. The counselor will next contact the architect and arrange for a meeting at the consumer’s home (architect – consumer – counselor). Counselor completes four (4)-hour fiscal authorization for "Initial Architect Consultation." At the home meeting,

counselor and consumer review the identified barriers and proposed solution with architect. Architect advises as to the feasibility of the proposal and offers alternatives where appropriate. Architect also provides a preliminary estimate of the proposed work. If the estimate is within the established BRS flexible cap of Home Modification Services (\$20,000.00), proceed to step #6.

- a. If the preliminary estimate exceeds the BRS flexible cap amount, the proposed work and projected costs MUST be reviewed by the District Director. The director should consider whether the proposed modifications are consistent with the BRS Home Modification policies, the alternatives available to the consumer and Standards of Reasonableness.
 - b. The director can either grant a preliminary approval for the work to go forward (proceed to step #7) or deny the exception to the flexible cap. The director should notify the consumer in writing of the reasons for denial and provide information regarding the consumer's right to an appeal, including information on the Client Assistance Program (CAP). Copies of the District Director's written decision should be placed in the consumer's case record and be sent to the COHML.
6. Architect proceeds with drafting preliminary drawings of the proposed work. Counselor authorizes appropriate fees (per architect recommendation of hours) for these drawings through System 7 "Initial Architect Consultation." Copies of the drawings are sent to both the consumer and the counselor for review.
7. Upon approval of the preliminary drawings by both the consumer and the counselor, architect will complete construction documents, including a revised estimate of the cost of the work. If the revised estimate of cost is within the established BRS flexible cap or within 10% of the preliminary estimate when a preliminary exception to the flexible cap has been granted, proceed to step #8.
- a. If the revised estimate exceeds the BRS flexible cap amount or exceeds the preliminary estimate by greater than 10% in those cases where a preliminary exception to the flexible cap has been granted, the proposed work and projected costs MUST be reviewed by the District Director. The director should consider whether the proposed modifications remain consistent with the BRS Home Modification policies, the alternatives available to the consumer and Standards of Reasonableness.
 - b. The director can either approve the work to go forward (proceed to step #8) or deny the exception to the flexible cap. The director should notify the consumer in writing of the reasons for denial and provide information regarding the consumer's right to an appeal, including information on the Client Assistance Program (CAP). Copies of the District Director's written decision should be placed in the consumer's case record and be sent to the COHML.

8. The counselor notifies the designated Central Office support staff that the project has been reviewed and approved by the consumer, counselor, supervisor, District Director and COHML, and that it is ready to go out to bid. The Central Office support staff puts the proposed work out to bid, using the DAS State bidding portal. Central Office support staff note the time and date the bids are due in consumer's electronic case file.
9. Once the bids are opened, the COHML reviews all bids to insure they meet all requirements specified in the bidding documents. If the bids are found to be qualified, the COHML instructs Central Office support staff to forward all qualified bid results to the counselor to review with the consumer. The counselor must verify with the consumer that the contractor visited the consumer site prior to placing bid. The consumer then selects the bidder. BRS will pay the lowest bid amount; however, the consumer may choose a higher bid. In this instance, the consumer will pay the difference between the lowest bid and the consumer's selection.
 - a. If the lowest qualified bid exceeds the BRS flexible cap amount or exceeds the revised estimate by greater than 10% in those cases where an exception to the flexible cap has been previously granted, the director should consider whether the cost of the home modification services are consistent with the Standards of Reasonableness.
 - b. The director can either approve the work to go forward (proceed to step #10) or deny the exception to the flexible cap. The director should notify the consumer in writing of the reasons for denial and provide information regarding the consumer's right to an appeal, including information on the Client Assistance Program (CAP). Copies of the District Director's written decision should be placed in the consumer's case record and be sent to the COHML.
10. The counselor notifies the COHML of the consumer's choice and the bid is awarded. The Home Modification service can now be added to the consumer's Employment Plan and authorization should be written for "Home modification – Architect Services" Counselor then must obtain consumer/property owner's signature on the "Permission to Undertake Alterations" form.
11. Upon counselor receipt of copy of building permit (or application) from the home improvement contractor, the counselor authorizes 25% of the lowest bid cost to the contractor. Upon midway completion of project and architect approval, the counselor authorizes another 25% to contractor. After project final inspection report is completed and signed by the consumer and the architect and no project items remain, the counselor authorizes the final 50% payment to the contractor. (Please note that architect must make site visits to approve midway and final project completions.)

BRS Home Modification Flowchart



Guidance for On-the-Job Training (OJT)

Definition

As part of the BRS program, on-the-job training (OJT) is defined as a vocational rehabilitation service where the consumer learns job skills within the context of a competitive work situation. The employer may be reimbursed for a portion of the consumer's training time and/or may be reimbursed for part or all of a consumer's wages. When the employer is fully reimbursed for the consumer's wages but not paid for providing training, the service is considered to be a Paid Internship/OJT. In any OJT, consumers are placed on the employer's payroll and are paid in accordance with the Fair Labor Standards Act.

Purpose of OJT's

The purpose of an OJT is to provide the consumer with work experience and/or specific skills in order to "level the playing field" so that s/he may secure competitive employment. The goal is for the consumer to possess a skill level consistent with entry level employees in that occupation through hands-on experience by the end of the OJT. There are numerous benefits to OJT for all those involved:

Consumer & Counselor Perspective: It is a great way for an individual to gain hands-on experience, job-specific skills and resume-building material, all while earning wages and either qualifying for a permanent position within the organization where the OJT takes place, or becoming prepared to seek another employment opportunity in that field after gaining this experience and skills. OJT's may take less time and offer training that better matches the consumer's learning style, when compared with other methods of training. In some cases, there may be opportunities to "carve" out specific portions of a job that match the consumer's abilities. After a review of a consumer's circumstances a recommendation should be made by consumer and counselor for a specific OJT model to be developed by BRS, Employer and/or CRP.

Employer/Trainer Perspective: It can be an excellent resource to support the training for a new employee and be able to see that individual's potential as an employee before finalizing an offer for a permanent position.

Community Rehabilitation Program (CRP) Perspective: There is the potential for less collateral time spent with consumer and more time spent in development of OJT opportunity. CRP's will be reimbursed a portion of their usual placement rate (per fee schedule) after the OJT contract is successfully negotiated.

Marketing an OJT

An OJT is a *mutually beneficial* employment scenario wherein a consumer can obtain a new skill set, and an employer may receive *subsidized training and/or wages* of a worker, as well as *potentially a long-term employee* solution. OJT participants have been determined to have strengths and abilities that make them suitable for an OJT opportunity in the desired field as a result of vocational guidance and counseling provided by their vocational rehabilitation counselor versus an employee that is coming in without the support of our agency. In other words, consumers are *prescreened by BRS* and *matched with the needs of the employer*.

The task of locating an OJT site should be a collaborative effort between the consumer and counselor. The counselor should assist the consumer in understanding what to say to a potential Employer/Trainer in order to get a contact person within the organization to set up a meeting. In addition, a referral may be made to a CRP who has an OJT development rate to assist in locating a suitable training site.

Set a meeting whenever possible. It is harder to say “no” in a face-to-face meeting than marketing an OJT over the phone. Meetings can be the result of consumer, CRP and/or BRS development efforts, by following up on job leads or simply calling local businesses. If the potential employer sounds interested, book a meeting—try not to settle for sending the brochure through the mail.

OJT Models

<i>Type of On-the-Job Training</i>	<i>Rate Configuration</i>	<i>When is it used?</i>	<i>Time Period</i>	<i>Type of Employee</i>	<i>Service Name</i>
Training Rate OJT	Reimbursement for hourly wage of trainer at host company.	Consumer lacks training and experience and will require a significant amount of up front training to address needs.	1-3 months max of 6 *	W-2 on company payroll	“On the Job Training”
Partial Wages OJT	Reimbursement for a portion of consumer’s wages that tapers during the training.	Consumer lacks job experience and will learn the job mostly by performing the job duties.	1-3 months max of 6 *	W-2 on company payroll	“On the Job Training”
Paid Internship	Reimbursement of consumer’s wages at an hourly rate equal to 130% of consumer’s agreed upon wage.	Consumer lacks experience and an employer is identified that may not have a long term opportunity available.	1-3 months max of 6 *	W-2 on company payroll	“Paid Internship (On the Job Training)”

*Any OJT that is being considered for longer than 6 months must be reviewed and approved by the District Director

Contract Negotiations

Time is money. Be prepared for your meeting and have everything you need to complete the contract. Nothing can stall negotiations faster than being ill-prepared. Have all the necessary paperwork to complete with the Employer/Trainer at the meeting. During the meeting, the following pieces of information will need to be determined in order to complete the agreement:

- **Job Title**: Identify the specific job title and skill set that will be learned as a result of the contract and to make sure it is congruent with the goal on the IPE
- **Training Structure**: Counselors have options in negotiating an OJT:
 - a. **Training Rate OJT** - BRS may pay a portion of the trainer’s wages. This may be most appropriate when the consumer 1.) lacks the training needed to perform a particular job and 2.) will require significantly more instruction from the supervisor or co-worker than would be expected for other newly-hired employees in this position. In this situation, BRS would reimburse the employer for the trainer’s wages during the portion of the time that the trainer is directly instructing the consumer, with the number of hours decreasing as the consumer requires less one on one training time. BRS support of the instructor’s wages would generally cease when the training time no longer exceeds that which is required to train other new employees in the same position. In general, this option would be utilized in those positions requiring a higher level of skill.

- b. **Partial Wages OJT** - In some cases, it may be more appropriate to consider reimbursing the employer for a portion of the consumer's wages. This model would generally be used when 1.) the consumer lacks the prerequisite work experience needed for the position which s/he is seeking and 2.) the individual will primarily learn the job skills through performing the job duties, with minimal one-to-one instruction needed from a supervisor or co-worker. In this type of OJT, BRS would reimburse the employer for a portion of the consumer's wages for a limited period of time, with a decreasing percentage of the hours paid by BRS as the consumer gains the skills necessary to perform the particular job.
- c. **Paid Internship** - In some cases it may be more appropriate to set up the OJT as a Paid Internship. This may be most appropriate when 1) the consumer may already have the basic skills to do the job and 2) does not require intensive or one on one training or instruction, but will gain more experience and strengthen work skills by having an extended period of time working on the job. The employer is initially unable to offer a job position, but is willing to provide the opportunity for the consumer to gain employment experience. In this type of OJT BRS will reimburse the employer at 130% of the Intern's gross hourly wages for a period of 1-3 months; the internship can be extended by mutual agreement up to 6 months.

* **In some instances it may be appropriate to combine aspects of the Training Rate OJT with the Partial Wages OJT, if the consumer's particular situation requires both. This type of OJT contract must be approved by the District Director before contract is finalized with employer.**

- **Length of Contract**: Establishing a length of time to learn the targeted job skills should take into consideration a person's disability and individual learning styles. Discuss with the employer how long it would take to learn job specific skills. Most OJT's take place between 1 to 4 months, with most taking three months to complete. However, the model is flexible to accommodate the needs of either the consumer or the employer, as the training of new employees varies greatly among individual consumers and across different industries.
- **Training Time**: It is unusual that the consumer will need or be able to get individualized training for the entire time s/he is working under the OJT agreement. Also, as the trainee becomes more familiar with the job, begins to attain skills and to "do the job," his/her value as an employee increases and the need for training decreases. Therefore, a training structure where the hours are tapered is preferred.
Example: If a consumer is working for 40 hours/week for two months, then the first week may consist of 40 hours of OJT, second week consist of 30 hours, third week consist of 20 hours and fourth week consist of 10 hours. The second month could be structured at 10 hours of training per week for all four weeks. Total training time for the contract would be 140 hours.
- **Consumer Wages**: The trainee must be placed on the company payroll, paid in accordance with the Fair Labor Standards Act and covered under any applicable payroll taxes (such as Workers Compensation, Social Security and IRS Withholding). The wage rate should be commensurate with other employees of similar work experience and skill levels for the desired training opportunity. If the employer has concerns or questions whether it may be liable for Unemployment Compensation in the event the individual is not hired permanently, refer the employer to the Dept. of Labor's Program Policy Division in Hartford or §31-222(a)(1)(E) of the Connecticut General Statutes.
- **Consumer Hours**: When possible, the number of hours worked by the consumer during an OJT should be consistent with the hours worked if the position becomes permanent, but may vary depending on the consumer's needs or trainer's availability.

- Supervisory Assessment: The counselor should discuss timeliness and means of communication between all parties regarding feedback on consumer progress and the submittal of the OJT Progress Report by the employer.
- Payment Structure: Inform the employer about BRS invoicing and that the processing of payments will generally take 4-6 weeks from the time each bill is submitted. The employer will receive installments after part or all of the training is completed.
- Support Services: The counselor must determine whether or not any additional supports will be needed in order for the OJT to be successful, such as job coaching, PCA's, interpreters, etc. Any supports that have been identified to be needed on the job should be discussed with the employer during the meeting.

Responsibilities

For BRS:

- Assist with OJT site development
- Oversee the OJT
- Complete necessary forms
- Provide technical assistance, support services and recommendations, as appropriate

For Employer:

- Provide training in accordance with the agreement with BRS
- Pay consumer in accordance with Fair Labor Standards Act and other applicable labor and tax laws
- Complete monthly progress reports and billing forms
- Notify BRS of any problems

For Consumer:

- Assist with OJT site development
- Follow the employer's personnel policies
- Learn and perform tasks of the job
- Notify BRS of any problems on the job

For CRP (if applicable):

- Locate OJT site
- Provide employer with the OJT information from BRS

Required Paperwork

- OJT service listed on current IPE or IPE Amendment
- OJT Agreement (see sample form, below – available on H-Drive)
- New Vendor Application
- OJT Progress Report (completed by employer)
- Invoice(s) together with time sheets or other documentation verifying hours worked (completed by employer)

It is further understood that you as employer agree not to discriminate or permit discrimination against any person or group of persons on the basis of race, sex, sexual orientation, color, religion, disability, or national origin in any manner prohibited by the law of the United States or of the State of Connecticut and further agree to provide the Connecticut Commission on Human Rights and Opportunities with such information as may be requested by the Commission concerning the provisions of this paragraph.

In the unlikely event that a problem arises with our consumer at any point during this program, please notify the Department promptly so that we may take appropriate action to help resolve it. The terms of this plan may be renegotiated at the agreement of the parties.

Our consumer understands that continued sponsorship by this office is dependent upon regular attendance, acceptable performance in the tasks in which he/she is being trained, and his/her cooperation with both of our organizations.

We thank you for your cooperation, and look forward to a successful partnership.

Sincerely,

Vocational Rehabilitation Counselor

The following persons are in accord with this agreement.

Employer

Date

Client

Date

Counselor

Date

Supervisor (*Required*)

Date

Financial Aid/VR-21 Guidance

Best Practices for the Development of Post-Secondary Education Programs

Choosing a Training Program:

Important considerations prior to sending a VR-21 (Consumer/Student Financial Information Exchange Form)

Commensurate Programs – Before considering a private school for training, we need to check on whether there is a commensurate state program (state university, community college, and/or regional vocational-technical school) available that prepares the consumer for the same job goal. Therefore, public post-secondary training programs leading to the same basic certification or degrees as those offered by private programs are commensurate. (Examples: a BA Degree in English from Central Connecticut State University is considered commensurate with a BA in English from Trinity or Wesleyan, an Associates Degree in Accounting from Capitol Community College is commensurate with an Associates Degree in Accounting from Briarwood College). When a program is determined to be commensurate, consumers may choose to attend a private school, but BRS will only participate up to the cost of attending a commensurate state program.

Disability Accommodations – BRS can provide certain disability accommodation services if needed by students as they attend post-secondary education. However both private and state colleges have a responsibility to provide services and supports that students with disabilities need to access their programs. In general BRS can provide the types of support services needed by students whether or not they are in post-secondary education. Examples of such services would be personal assistance services, special transportation, or technological aids and devices to aid in mobility or communications. Such services, when needed, are not subject to the financial aid determination.

Examples of services that would be the responsibility of the school would be architectural accessibility and the provision of interpreters. Consumers should contact the school ahead of time and begin negotiations for appropriate services that will be the school's responsibility.

Learning Disability Programs - When a consumer is considering college or residential programs designed primarily or exclusively to serve individuals with learning disabilities the case should be reviewed by a supervisor or by the Bureau's consultant for learning disabilities. Likewise for any consumer considering a college with separate costs for LD support services.

Defaulted Loans - Situations may arise where consumers are determined by an FAO to be in default of previous loans and/or repayment of grant over-awards. Usually they will be ineligible for any forms of financial assistance, including BRS, until such time as the "default" status is resolved. This can be accomplished through repayment, cancellation, deferral, bankruptcy, or a new repayment agreement between the consumer and the lending institution. A verification letter from the lending or training institution must be part of the case record. Instances may occur where an individual has limited or no financial resources, has made a responsible repayment effort, and still fails to reach an agreement with the lender/grantor. Under such circumstances, it may be reasonable to conclude that maximum efforts have been made to secure grant assistance and comparable services and benefits are not available. In such cases, after careful examination of all the circumstances involving an individual's default status and financial situation, BRS assistance may be appropriate, with District Director approval.

Working While Attending School - Good career counseling at this phase should include the importance of gaining work experience while in school. People graduating from college with paid or unpaid work experience are much more employment ready than those who do not.

Part-Time School – It may be reasonable for a student to attend school on a part-time basis, due to disability related reasons. If so, an appropriate plan might be to support this for one semester and then begin to build up to full-time training. We need to apply a standard of reasonableness regarding the amount of time we are allowing for a student to complete a training program. Employers do not look favorably upon applicants who have taken an unusually long amount of time to complete their degrees, so we must include this issue in our career counseling.

Summer School - Attendance will only be considered if necessary due to course sequencing or is necessary due to disability-related needs. Sponsorship for summer school may also be considered when it can be demonstrated that it is cost-effective, by allowing the consumer to complete the program sooner.

Graduate School - Generally, college training will only be provided up to a bachelor's degree. In some cases, graduate level training may be provided when the employment goal agreed upon requires advance degree training and the consumer's disability is of such severity that he/she is unable to enter an appropriate career position and pursue graduate studies simultaneously.

The FAFSA and the VR-21 Exchange Agreement with CAPFAA can be used for part time students as well as with graduate students. Part time undergraduate students may still qualify for Pell grants. *Even if traditional federal financial aid is not available, as with graduate students, the application process still allows BRS to determine and apply any available parent, student, or family contributions.* The "Financial Aid Year" runs from September or fall semester through September. Any unused financial aid or resources available to a student for a "Financial Aid Year" may be applied to summer school if the student was less than full time during the preceding fall or spring semesters.

It is possible for individuals to complete the FAFSA on-line and receive an immediate "estimate" and printout of expected parent, family, or student contribution. CAPFAA has indicated that the "estimates" are generally very close to the actual amount that ultimately gets reported out on the VR-21. For new program starts when there is no time to get a completed VR-21 back from the school, BRS can use this process and apply the "estimated" personal contributions at the onset of the plan without having to reconcile after receiving the VR-21. (When we do this we should stipulate in the plan that we will make any corrections ourselves if the VR-21 comes in slightly different from the "estimated" amounts). Students and their families can be given access to BRS computers with Internet service if they do not have personal access in their homes.

There is a web site, <http://www.finaid.com/>, where counselors and students/clients can access on-line FAFSA applications. They can also access a feature called "Calculators" that allow students and families to enter different scenarios to help them determine the affordability of various schools or to help them explore various resource alternatives.

Authorizing Funds

Financial support for occupational training in associates degree or certificate programs will not exceed the cost of a commensurate program in the Connecticut Community College (SCC) system. Likewise, support for training in baccalaureate programs will not exceed the cost of the state SCC system until completion of the equivalent two academic years or if and when the credit requirements for the agreed upon goal cannot be achieved within the SCC system. At that point the cap will change to the cost of the state university system (SUS), (Central, Southern, Eastern, or Western) for the remainder of the program. The cap at the SUS level will move to the University of Connecticut level if and when the credit requirements cannot be offered at the SUS level. Each year the cap for

each of the three tiers will be provided to staff and will be based on the highest of the community/technical colleges and the highest of the state universities.

- In all cases where the SCC cap cost is applied, living and transportation expenses will only be applied based on the additional costs incurred by the individual to attend the nearest applicable state community college or university.
- For those subject to state university caps, living expenses will only be applied if the individual needs to be in residence to complete the training. Allowable expenses may not exceed the published on campus residence costs.
- For all commuters, family and student contributions will be first applied to the living expenses reported by the school in the VR-21. Any additional family contribution will then be applied to the general educational costs. BRS will not make up the difference when a student and family contribution totals less than room and board costs reported on the VR-21. Transportation will be applied based on actual additional costs incurred.

Commensurate programs in the private sector may offer speedier enrollment or shorter programs that allow participants to finish sooner than if they attend a program in the state community/technical system. In general this will not be a basis for overriding the caps set by the state community college and university system. The principle of cost-effectiveness overrides the concern for more timely completion. Consumers may elect to attend any certified public or private, in-state or out-of-state institution that will meet the training needs to attain their goal, so long as they or their families take responsibility for the cost differential. Likewise, private vocational/technical schools may be chosen, provided the consumer takes responsibility for the cost differential.

Vocational Rehabilitation Supervisors will be required to review all post-secondary training plans to assess what commensurate programs are available to attain the goal and to assure the accuracy and consistency of applying this policy. If the VR Supervisor and Counselor wish to seek an exception, they should make a thorough presentation of the facts to the District Director. The District Director will make a decision based on consultation with the Chief of Client Services and appropriate Central Office Consultants.

Exceptions will generally be limited to programs for which there is no commensurate public program or reasonable equivalent. . Time delays in completion of programs in the public systems compared with commensurate private programs would warrant an exception if completion of the public program would take at least 18 months longer than the private program or when a time delay will cause an extreme economic hardship on the consumer.

Exceptions may also be based on a determination that the overall costs would be lower_(e.g., It may be cheaper to provide a first year student with on-campus residence at a state university rather than support the cost of daily special transportation to a community technical vocational college).

Disability accommodations and supports will rarely be a basis for exceptions since under federal law are already the responsibility of VR or the institution. Learning Disability support services are usually met by a combination of school-based and BRS services. Therefore schools specializing in that population may not warrant exceptions. For deaf students who elect to attend Gallaudet University or the National Technical Institute for the Deaf (NTID), the SCC cap will apply for the first two years if the required coursework is available at Northwest Community College (NWCC). For coursework beyond the first two academic years or for coursework not available at NWCC, the caps will be waived.

VR-21's and correct worksheets must be fully completed and filed with Employment Plan in case file. For accuracy and uniformity of interpretation supervisors should review all VR-21's.

In all cases, BRS may not provide funding beyond what is needed. That amount must be less than or equal to the amount at the bottom line of the VR-21 worksheet.

Students who receive SSI or SSDI may not be required to contribute financially toward their Employment Plan. Student contributions identified on the VR-21 should be disregarded if the student is on SSI or SSDI. Instead those students should be asked how much they can voluntarily contribute and any amount voluntarily contributed should be used as the student contribution figure on the VR-21.

Student loans to meet "unmet needs" as determined by the VR-21 are encouraged but not required. Student loans are certainly a legitimate resource for students or their families to cover the portion of the expenses that BRS will not cover.

When applying public college caps to a private school program, loans and campus-based aid from the private school should not be deducted as a resource from the public education caps, since it would not be available at the state college or university. However, other family and individual resources, and public financial aid such as Pell grants would be deducted from the public college cap in determining the maximum amount the BRS can contribute. This is based on the rationale that those resources are equally available at either institution. Students who elect to attend more costly institutions may use loans and campus-based aid to meet the additional cost.

If the VR-21 indicates work-study, unless participating in the work-study would clearly present a problem from a disability standpoint, then the work-study needs to be included as a resource. Work-study is an important employment experience that will enhance the individual's ability to secure employment upon graduation.

When BRS funding has the effect of lowering the amount of other financial aid, we must reduce our commitment in order to maintain the full benefit of the other resource.

When computers are required of incoming students, we will consider them as books and supplies on the VR-21. Under these conditions, they will not be exempt from the financial aid determination as a disability-related expense.

During a Post-Secondary Training Program

If a student withdraws from courses, especially if they do not notify the school and/or the counselor in time to receive financial credit, BRS will not be responsible for paying for that course a second time in the future. This also applies when a student fails a course.

BRS supports training, including college training, to help a consumer reach a vocational goal. If a student elects to change his/her major without discussing it with the counselor ahead of time, BRS is not under any obligation to continue to support that program. If changes in major are mutually agreed upon, they can then be supported.

Students are required to bring in grades after each semester. Students must make satisfactory progress toward completion of their program. Academic probation is not satisfactory.

STATE OF CONNECTICUT
BUREAU OF REHABILITATION SERVICES

BRS CONSUMER/STUDENT FINANCIAL INFORMATION
EXCHANGE FORM

Original Revised (Enter revised or new information & affix to original)

Terms Dates (inclusive): _____

Part A. To be completed by counselor and any consumer planning a post-secondary educational program with potential BRS funding. Forward form to FAO at institution to be attended, within institution's time frames.

FAO Name & Address: _____

Student Name & Address: _____ **SS#:** _____

I, the undersigned, authorize exchange of information between the Bureau of Rehabilitation Services (BRS) and the Financial Aid Office (FAO) at the institution named regarding my financial status, and/or that of my family, for the purpose of determining my eligibility to receive financial aid. I understand and agree that the BRS & FAO may discuss aspects of my case as may pertain to my functional limitations and resulting special needs, and my financial aid application. I further understand that Federal Perkins and/or Stafford Loans are encouraged but not required to cover of schooling which would otherwise be covered by the Bureau.

BRS Counselor Name and Address: _____

BRS Telephone #: _____

Student's Signature _____

Parent/Guardian signature (if student is a minor) _____

Part B: To be completed by the Financial Aid Officer if Part C cannot be completed.

Part C of this form cannot be completed by this Financial Aid Office at this time because:

- No record student applied for financial aid
- Need additional information to make decision
- Expect decision by _____
- Please call FAO – reason _____

Financial Aid Officer's Name: _____ **Tel:** _____ **Date:** _____

Part C. To be completed by FAO & returned to BRS when proposed award package is completed.

<u>Educational Expenses</u>		<u>Family Contribution</u>		<u>Other Resources</u>		<u>Loans</u>	
<u>Tuition</u>	\$	<u>Parents</u>	\$	<u>Pell Grant awarded</u>	\$	<u>Perkins accepted</u>	<input type="checkbox"/> \$
<u>Fees</u>	\$	<u>Spouse</u>	\$	<u>Tuition-Assist</u>	\$	<u>Stafford accepted</u>	<input type="checkbox"/> \$
<u>Books/Supplies</u>	\$	<u>Student</u>	\$	<u>SEOG</u>	\$	<u>Other (list) accepted</u> <input type="checkbox"/>	
<u>Room (type)</u>	\$	<u>Other (list)</u>		<u>Work Study</u>	\$		
<u>Meals (plan)</u>	\$			<u>Other (list)</u>			
<u>Transportation</u>	\$						
<u>Other Personal Expenses (list)</u>							
<u>Gross Need</u>	\$			<u>Total</u>	\$	<u>Total</u>	\$

Student is: Independent Dependent

<u>Financial Aid Officer's Name</u>	<u>Telephone</u> ()	<u>Date</u>
-------------------------------------	-------------------------	-------------

Part D. To be completed by BRS & returned to FAO when BRS funding is determined.

Student will not receive financial sponsorship by the Bureau of Rehabilitation Services for the above term.

BRS plans to provide funding (as described below) for the period _____ to _____ on behalf of the above-named student. Funding for subsequent years should not be anticipated by your program until verification of such is received.

<u>Tuition and Fees</u>	\$	<u>Transportation</u>	\$
<u>Books & Supplies</u>	\$	<u>Other Personal Expenses</u>	\$
Room and/or Board	\$	Total	\$
<u>BRS Counselor's Signature</u>		<u>Telephone</u> ()	<u>Date</u>

POST-SECONDARY INSTRUCTIONS AND WORKSHEET

I. Designate the cap status that applies to this student

<input type="checkbox"/>	Community College	<input type="checkbox"/>	University of Connecticut
<input type="checkbox"/>	State University	<input type="checkbox"/>	Exempt (<i>see case note dated</i> _____)

II. Determine the maximum allowable VR contribution if the student were to attend the appropriate state college or university.

A. Tuition and Fees at the designated cap level: _____

The Bureau will annually publish the current rates for each of the three levels of state colleges and cite the web addresses where this information can be obtained. Note that the community college rates are based on the number of credits taken. Be sure to assign the cap rate based on the number of credits that the student will be taking.

B. Books and Supplies: Use the amount on the VR-21 _____

C. Room and Board: _____

For consumers subject to a cap, assume they will attend the nearest community college or state university in their cap status that meets their academic needs. Based on their personal circumstances and abilities, determine whether they would need to be a resident or a commuter student. As a general guide it is more cost effective for a full time (five days per week) student to commute when the daily round trip is 100 miles or less. Beyond that distance it becomes more cost effective for the student to reside at school.

Resident Students, enter either:

- The published rate at the designated cap level _____
- The appropriate community college's estimated living costs for an independent student _____

This information can be obtained from the financial aid director of each community college.

Commuter Students - enter "0" _____

D. Transportation (based on actual costs of attending the appropriate state community college or university) _____

Use: I) # of miles Round Trip (RT), x RT's per week, x 30 (2 semesters, 15 weeks each); ÷ 20 mpg (BRS standard mpg), = total # of gallons. II) Total # of gallons x \$3.75/gallon (2013/14 \$/gallon rate) = transportation allowance.
(Ex: 20 miles RT x 5 RT's/week (=100m.) x 30 (= 3000m.) ÷ 20 mpg. = 150g., x \$3.75 = \$562.50)

**For resident students include no more than 6 round trips from home to school per academic year.*

E. Total of lines A through D

This is the **Maximum Allowable VR contribution.** _____

Proceed to **page 2** if the student will be a **resident** student (either on or off campus) at the school they will **actually** attend. Proceed to **page 3** if the student will be a **commuter** at the school that they **actually** attend.

**USE THIS PAGE TO DETERMINE VR CONTRIBUTION FOR STUDENTS WHO
WILL BE RESIDENTS (EITHER ON OR OFF CAMPUS) AT THE SCHOOL THEY
ACTUALLY ATTEND**

III. Determine and apply available resources.

(1) Enter Maximum Allowable VR Contribution from II. E. _____

(2) Enter the total amount of resources from the VR-21* _____

** This figure should include loans if they have already been accepted.*

** For students on SSI/SSDI, disregard the amount reported as student contribution on the VR-21, regardless of its source. In such cases the student should be asked what amount they can voluntarily contribute toward their program and count the amount of any voluntary student contribution as a student resource. All other applicable resources, including family contribution, should be counted.*

** When applying public college caps to a private school program, loans, work-study, and campus-based aid from the private school should not be deducted from the public education caps, since it would not be available at the state college or university. However, other family and individual resources, and public financial aid such as Pell grants should be deducted from the public college cap in determining the maximum amount that BRS can contribute. This is based on the rationale that those resources are equally available at either institution. Students who elect to attend more costly institutions may use loans and campus-based aid to meet the additional cost.*

(3) Subtract Line A.(2) from A. (1)
If the amount is less than zero, enter 0 _____

(4) Disability Related Expenses - Itemize:

(5) **Net Agency Funding**
Add lines (3) and (4) _____

Consumer _____ Academic Year _____

VR Counselor/Supervisor _____ Date _____

USE THIS PAGE TO DETERMINE VR CONTRIBUTION FOR STUDENTS WHO WILL BE COMMUTERS AT THE SCHOOL THEY ACTUALLY ATTEND

- (1) Enter maximum allowable VR contribution from II. E. _____
- (2) Calculate **Adjusted Family/Student Contribution**
 - a. Enter the family/student contribution from the VR-21* _____

** For students on SSI/SSDI, disregard the amount reported as student contribution on the VR-21, regardless of its source. In such cases the student should be asked what amount they can voluntarily contribute toward their program and count the amount of any voluntary student contribution as a student resource. All other applicable resources, including family contribution, should be counted.*

- b. Enter the combined room and board amount from the VR-21 _____
 - c. Subtract b. from a. If b. is greater than a., enter zero. This is the **Adjusted Family/Student Contribution** _____
- (3) Resources** - Enter all resources from the VR-21, substituting (2) c. for the Family/Student Contribution. Include loans only if the student has agreed to take the loan _____

*** When applying public college caps to a private school program, loans, work-study and campus-based aid from the private school should not be deducted from the public education caps, since it would not be available at the state college or university. However, other family and individual resources, and public financial aid such as Pell grants should be deducted from the public college cap in determining the maximum amount that BRS can contribute. This is based on the rationale that those resources are equally available at either institution. Students who elect to attend more costly institutions may use loans and campus-based aid to meet the additional cost.*

- (4) Subtract line (3) from line (1). If the result is negative enter zero _____
- (5) Disability Related Expenses - Itemize: _____

(6) **Net Agency Funding.** Add lines (4) and (5) _____

Consumer _____ Academic Year _____

VR Counselor/Supervisor _____ Date _____

***Guidance on Commonly used Community Rehabilitation Program (CRP) Services Definitions and Rate Structures**

The following guidance is intended to assist counselors and consumers to take advantage of the full range of services available from Community Rehabilitation Programs and to choose only those that are necessary and that will meet the specific needs of the consumer.

Note: When working with a CRP to determine appropriate services, it may at times be appropriate to consider also utilizing the CRP as the employer for the consumer. This practice will only be considered if the CRP can demonstrate through its organizational chart that the consumer is to be placed in a separate branch from the one that will provide vocational assessment or support. To maintain consistency and to prevent any prohibited practices from occurring, anytime that a counselor is considering using the CRP as employer, whether for assessment or for placement/hire, this must be done in consultation with the Central Office consultant responsible for CRP relations.

JOB COACHING

DEFINITION:

Job coaching is training and related supports provided on a one-to-one basis to an employed consumer who needs these supports in order to learn or maintain skills related to the job. It may include learning job skills (such as job tasks, appropriate behaviors, how to work with co-workers and supervisors, how to travel to work, etc.), teaching the employer or co-workers strategies of working with the consumer, advocating with the employer on behalf of the consumer, developing natural supports, etc. Supports are generally provided in person on the job, but in some cases may be provided off site, but only when on-the-job supports are not appropriate (e.g., to discuss personal issues) or when off-site services are requested by the consumer and approved in advance by the BRS counselor.

METHOD OF PAYMENT:

Providers are reimbursed on an hourly basis solely for the time spent by the job coach in providing one-to-one support to the consumer, as described above. Phone and off-site contact with the consumer may be billed only with prior approval of the BRS counselor. Job coach travel time¹, report writing and other administrative costs are included in the rate and are therefore not separately billable under the job coaching codes. Time worked by the consumer without the job coach present, job coach time spent performing the job for the consumer and "no shows" are also not billable. ***Providers should bill in increments of 1/4 hour.***

WHAT THE RATE INCLUDES:

The rate includes the following costs, which are not separately billable:

- The cost of job coach direct service time
- Job coach travel (mileage and time spent) between assignments^{1 & 2}
- Progress Report writing
- Administrative costs

¹ Several providers that regularly cover large geographic areas have a separate rate to cover job coach travel beyond their normal catchment area.

² Job coach rate does not include transporting the consumer*

INDIVIDUALIZED SITUATIONAL ASSESSMENT

DEFINITION:

A situational assessment is a type of vocational evaluation where the individual is evaluated in one or more real work situations in the community in an individual placement. The assessment site(s) must be developed based on the individual consumer's interests, abilities and needs. BRS may therefore decline to approve an assessment site and/or pay for the costs related to site development in cases where the provider has used a site for multiple consumers. Depending on the agreement of the BRS counselor, consumer and provider, the evaluation site may be one where a potential job may exist for the consumer, or may be a real job, which is being used for assessment purposes only. All consumers are expected to be paid at least minimum wage and in accordance with state and federal labor laws during the assessment. In cases where the employer is paying the consumer, BRS will not authorize this component of the Situational Assessment rates.

Note: In general, BRS may not approve situational assessment sites where the consumer performs work for the provider. In cases where an exception is required, staff must obtain approval from the Central Office consultant responsible for CRP relations. Any such evaluations that are approved should not include the cost of site development.

BRS is currently providing two different types of community situational assessments – Work Evaluations (WE) and Working Interviews (WI)

METHOD OF PAYMENT/WHAT THE RATE INCLUDES:

CRPs will be paid for each separate component of the WE or WI as agreed upon before the start of the assessment with the counselor and consumer. The Site Development Component of an SA will be paid in 1 or 2 installments depending upon the goal of the Assessment. Work Evaluation (WE) is for assessment purposes only with a job offer NOT being a goal. Working Interview (WI) is conducted with the end goal being a job offer, but with evaluation of consumer's appropriateness for the position and disability issues taking place. Site development for a Work Evaluation or Working Interview is payable when the assessment site is located. The second installment of site development for a WI is payable when the consumer has been hired as a result of the service and has retained the job for 90 days. These rates are based upon a formula that utilizes the Provider's Placement rate. These rates are payable when unique sites are developed by the Provider. This excludes payment where:

- there is an on-going contract with the employer
- there is a standing relationship with the employer and minimal development is needed
- The CRP has assessed multiple consumers at the same site (CRP has placed another consumer with the same employer, in the same site, in the same department *and* with the same employer contact person within the previous six months)

Exception : BRS requests the same site (must be noted on the SA Referral form or otherwise in writing to the CRP).

The **On-Site Evaluator time** will be paid as an hourly rate for the time spent by the Evaluator on the job with the consumer. The number of hours will vary, based on the agreement between BRS, the Provider, and the consumer. The number of hours that the consumer is on the job, and the number of hours that the Evaluator is with the consumer on the job may also vary. Included is an abbreviated report, using the BRS specified report format, if a Comprehensive Report is not requested by the BRS Counselor.

The **consumer wages** will be paid to the consumer by the vendor. The wages include the consumer's hourly wage (minimum wage), applicable taxes, worker's compensation, etc, and the Provider's administrative costs (not to exceed \$3.10 above minimum wage).

If requested by the BRS Counselor, the Provider will do a **Comprehensive Report**, using the BRS Comprehensive Report format. This rate is equivalent to 2 hours at the Provider's Job Coaching rate. The report must be submitted within 2 weeks of the completion of the assessment.

WAGES ONLY ASSESSMENT (USING CRP as FIDUCIARY)

When it is determined that it is not feasible to have an Evaluator accompany the consumer to the worksite, a situational work assessment may be conducted using specifically designated CRPs to act as fiduciary agents in paying the consumer's wages. This can occur when the employer asks not to have the CRP Staff person at the worksite due to space or safety or other reasons. It may also occur if the BRS Counselor and Consumer agree that there are no additional Assessment component services required to be authorized in conjunction with Wages.

Under this service, the consumer's wages are paid by the CRP and include the hourly wage (minimum wage), applicable taxes, worker's compensation, etc, and the Provider's administrative costs (not to exceed \$3.10 above minimum wage), the same as noted above. The employer needs to be willing to provide verification of the hours worked by the consumer as well to offer feedback as to their impression of the consumer's qualifications and to comment regarding whether the consumer meets the expected performance standards for the position. Below are the steps to follow in arranging for this type of assessment:

Process:

1. a. BRS completes section I of the *BRS Verification of Consumer Work Hours* form (below).
b. Consumer completes:
 - Section 1 of the INS Employment Eligibility Verification form,
 - Completed W-4 form
 - Completed CT-W4 (questions 1 to 4)
- c. The above are sent to the CRP, together with:
 - BRS fiscal authorization, authorizing payment to provider
 - Copy of documents as required in the INS list of acceptable documents
- d. BRS sends host Company letter to Employer
2. CRP completes section II of the *BRS Verification of Consumer Work Hours* form and returns signed form to BRS
3. BRS submits *BRS Verification of Consumer Work Hours* form to host company, who completes section III and returns to BRS after assessment completed.
4. BRS checks form, and provided there are no issues, signs in section IV and submits to CRP.
5. CRP pays consumer wages due to him/her in accordance with the documented hours, as approved by BRS, and bills BRS for reimbursement at provider's approved rate for processing consumer wages.

**State of Connecticut
Bureau of Rehabilitation Services**

Date:
(Employer Name)
(Employer Address)
(Town, CT; zip code)

Dear (Employer):

Thank you for allowing our consumer, _____, to participate in an employment assessment in the position of _____ within your company. The purpose of this assessment is to determine whether our consumer has the necessary skills and capabilities to hold the above position within your company or a similar job elsewhere. We request that you as a “host company” be willing to offer us feedback as to your impression of our consumer’s qualifications, and comment regarding whether they meet your expected performance standards for the position. This letter will serve to formalize your responsibilities as a host company, as well as those of all parties involved.

Our consumer will begin working at your company under our agreement as a _____ beginning on (date), for a period of _____ hours and concluding on (date). Our agency will coordinate payment to our consumer for their hours worked. We will also arrange the necessary employer liability coverage under the Worker’s Compensation insurance of our fiduciary agent.

We must require you as the host company to complete section III of our “Verification of Consumer Work Hours” form and return it to us as soon as possible after our consumer has completed the assessment. We will be unable to generate payment to our consumer for their work until we receive this form completed and signed by you.

As a host company, you may terminate the above arrangement with us and our consumer at any time. If you identify any issues with our consumer that we have not anticipated or require our assistance in any way, we ask that you contact us immediately. If you do find our consumer an acceptable candidate, it is our hope that you will extend a job offer. If for any reason you do not wish to retain our consumer as an employee, you are under no obligation to do so.

We thank you for your cooperation and willingness to work with us in facilitating employment opportunities for people with disabilities.

Very truly yours,

Vocational Rehabilitation Counselor

The following persons are in accord with this agreement:

Employer:	Date	Consumer	Date
Counselor	Date	Supervisor	Date

JOB PLACEMENT

DEFINITION:

Job placement is the process of locating and securing a permanent job in the competitive labor market for a client of BRS. Placement services may be used only for securing independent employment or for an individual who needs time-limited or ongoing support in an individual placement site. It does not apply to group employment placements, temporary jobs or situational assessment site development.

METHOD OF PAYMENT:

Providers will be paid in three equal installments:

1. The first to be made after, a.) the referral has been made by BRS to the provider for placement services, b.) the individual has been seen for an initial interview by the provider, and c.) the provider and consumer mutually agree to work together in securing employment
2. The second will be made at the time a suitable placement is located and secured by the provider. A placement is considered "suitable" if the consumer has had an opportunity to see the job site and it is approved by both the BRS counselor and consumer.
3. The third installment will be made after the individual has successfully maintained employment for 90 calendar days. The provider must verify that the employer remains satisfied with the consumer's performance. In addition, the BRS counselor must verify with the consumer that s/he is satisfied with the placement and it is good practice for the counselor to also make contact with the employer before the third installment is made.

In those cases where all three installments are not made due to the inability to secure employment or maintain employment for 90 days, the provider must submit a written report to BRS detailing the reason why this has occurred and the consumer's need, if any, for additional services.

The placement rates are based on an estimated statewide average time to secure placements for BRS consumers (33 hours). With using this average, it is anticipated that many placements will take less time to secure, while some may require significantly more.

WHAT THE RATE INCLUDES:

- Placement specialist's time to secure placement (rate is based on a statewide average time to place consumers)
- Placement specialist's mileage
- Administrative costs

OTHER SERVICES PROVIDED BY CRP'S

All other services provided by CRP's are based on proposals submitted by the provider. Staff should refer to those proposals for more information about the particular service and provider. Proposals should be available in the district offices or can be obtained from the central office consultant responsible for CRP relations.

Customized Services Procedures:

Each referral will be custom designed from the following menu:

Service	Payment Rate	Terms and Conditions
Assessment Site Development - Two Options:	Rates are configured based upon single Installment of Fee-for-Placement Rate:	Provider must develop an individualized site acceptable to VR Counselor. Cannot replicate a site developed within the previous six months unless specifically requested by VR Counselor at time of referral.
Work Evaluation	Equivalent to first Installment of Fee-for-Placement Rate plus \$50. Payable when acceptable site is developed.	
Working Interview	Equivalent to first Installment of Fee-for-Placement Rate. Payable when acceptable site is developed.	
On-Site Evaluator	Hourly rate for SA without site development. For most providers this is the same Hourly Rate as their Job Coaching Rate.	VR Counselor and Consumer must agree that site is appropriate. Number of hours of on-site evaluation to be mutually agreed upon by consumer, BRS, and CRP. Rate includes Standardized Abbreviated report, if comprehensive report not requested.
Job Coaching	Hourly Job Coaching Rate	Number of hours of on-site coaching to be mutually agreed upon by consumer, BRS, and CRP. Job Coaching reports included in hourly rate.
Consumer Wages	Rate encompasses: - Actual wages paid to Consumer (usually minimum wage) - Administrative overhead costs to CRP - Worker's Compensation Coverage - FICA Not to exceed \$3.10 above min. wage	Number of hours of Consumer Wages to be mutually agreed upon by consumer, BRS, and CRP. Number of Consumer Wage hours can exceed number of On-Site Evaluator Hours.

Comprehensive Assessment Report	Two Hours at Job Coach Rate	Report must be submitted utilizing Standardized Comprehensive Report format. Report must be submitted to BRS within two weeks of conclusion of Assessment/On-Site Evaluation. Approval by VR Counselor for payment.
90 Day Job Retention	50% of Third Fee-for-Placement Installment plus \$50. Payable at 90 calendar days from date of hire.	Provider must have done the original site development under referral for Working Interview
Fee for Placement	Approved Fee for Placement payable in three equal installments: (1) at referral, (2) at placement, (3) upon successful job retention for 90 days	Placement must be in integrated, competitive employment with no consumer wages provided by the CRP. Must be approved by the consumer and the BRS counselor.

On the Job Training Opportunity Development

The purpose of this service is to request a Community Rehabilitation Provider to arrange an opportunity for a VR Counselor to negotiate an On-the-Job Training (OJT) contract with an Employer. The role of the CRP in providing this service is limited to their finding an employer willing to hire and provide training to a BRS Consumer under the general terms of our standard OJT Contract. It is to be understood that the VR Counselor is solely responsible for negotiating and approving the specific terms of the contract, including but not limited to the per hour training rate, duration of the training period and training progress reporting requirements. The CRP's involvement in providing this specific service will cease upon the contract being signed by all required parties. In most situations, the additional service of Job Coaching will not be authorized in conjunction with On the Job Training. However, should Job Coaching be necessary for the Consumer to fully benefit from the training they will receive under the OJT Contract it may be authorized. (Example: A Consumer with a cognitive disability may require employment of specific compensatory strategies to remediate for memory deficits on the job)

Guidance: Under ideal conditions the Consumer will be specifically referred to a CRP for "On the Job Training Opportunity Development". Under less ideal conditions a CRP may contact a VR Counselor requesting a switch to "On the Job Training Opportunity Development" from another Job/Site Development model. This can be considered an acceptable practice, but Counselors are encouraged to base their decision-making with respect to the individual needs of the Consumer and not out of respect to the employment opportunity at hand.

If a CRP who is working with a Consumer referred by BRS to develop a "straight" **Fee for Placement** (with no OJT) finds an OJT opportunity, the Counselor is encouraged to examine whether additional training is necessary for successful Placement in a job commensurate with the Consumers Employment Plan. If it is determined to be appropriate, the Counselor may cancel authorization for the second and third installments of Job Placement and authorize funding under "On the Job Training Opportunity Development". Once the requirements for payment listed below under "Payment Terms" are satisfied, the CRP will be eligible to bill for an amount equal to 50% of their Total On-the-Job Opportunity Development Rate, which will be equivalent to an additional "Fee for Placement" installment.

If a CRP who is working with a Consumer referred by BRS to develop a “**Working Interview Site**” finds an OJT opportunity, the Counselor is encouraged to examine their initial reason for referring the Consumer for an “Assessment Service” to begin with and whether they have all the necessary information to determine whether the Consumer will be able to capitalize on an OJT opportunity. As above, the Counselor must also examine whether additional training is necessary for successful Placement in a job commensurate with the Consumers Employment Plan. If the decision is made to switch models, the authorizations for WI should be cancelled and funds authorized under the full rate for “On the Job Training Opportunity Development”. If the offer of OJT should occur any time after the start of a Working Interview, the offer will be viewed as an outcome of the assessment and the CRP WILL NOT be eligible for any additional reimbursement. The CRP should be paid ONLY under the guidelines of the Working Interview Model.

Referral Process: *A written referral detailing the desired Employment/Training outcome of the service is essential (standardized form is attached).* An intake meeting with the CRP and Consumer may be scheduled at the Counselor’s discretion. At a minimum, a discussion with the CRP regarding the Consumers functional limitations and how/if they will be presented to prospective employers/trainers is expected to occur.

Rate Structure: specific to each CRP and based upon 66.7% of their total (i.e. all 3 installments) “Pay for Placement” Rate and thus equal to two “Fee for Placement” installments. This service is to be authorized and payable as a single installment. Rates are established and present for all providers who have a Fee for Placement Rate.

Payment Terms: Payment is to occur upon the following condition being met:

- An OJT Contract is successfully negotiated and is signed by the Employer, the Consumer, the VR Counselor and by a Supervisor (if required)

CRITERIA FOR BRS PROVIDER AND RATES APPROVAL

As much as possible, BRS defers to other recognized authorities or accrediting bodies in the approval of vendors and in determining rates that providers will be paid for the goods or services that they provide. For example licensure by the state is recognized by BRS as the criteria for approval of all health care providers and Medicaid Rates are recognized by BRS as the rates they will be paid. Similarly, national accreditation is recognized by BRS for the approval of colleges as providers.

Service providers that are **not** approved through some other BRS recognized licensure or accrediting body as identified in the following chart are subject to a BRS provider approval process and/or rate setting process either at the Central Office level or at the District level.

1. For health care services not recognized by Medicaid or Medicare, such as neuro-psychology assessments, learning disability assessments and neuro-optometry services, Independent Living Centers, rehabilitation technology consultants and trainers including augmentative/alternative communication services:

Central Office has a process that generally consists of a committee of at least three BRS staff members, the two Bureau Chiefs, and a staff consultant assigned to the respective area of service under consideration. That committee may seek additional expertise and input as it determines necessary. Provider approval will be based on a review of the proposed vendors qualifications, experience, proposed services, and expected results of the services and make case by case determinations.

2. For on-the-job training providers and rates, miscellaneous training providers and rates, miscellaneous equipment and supplies vendors, and “other” service providers and rates:

A district level process is used that involves the District Director, VR Supervisor, and VR Counselor to determine appropriate vendors and rates of payments. Districts must seek consultation from Central Office to be sure that state fiscal and procurement practices are followed.

3. For Community Rehabilitation Programs:

The Bureau has a Community Rehabilitation Program Committee, made up of a cross-representation from the Districts and Central Office that approves providers and recommends rates. Final rate approval is by the State Director or his designee. Contact Central Office Consultant liaison to CRPs for Criteria for Community Rehabilitation Program approval.

4. For services through cash disbursement:

When services such as child-care or mileage/travel are provided through cash disbursement, BRS is not taking a role in approval of the provider. In these cases, in recognition of choice and responsibility, BRS has agreed that the consumer is capable of making that decision. BRS is determines rates of payment with the consumer and gives responsibility to the consumer to account for cash payments.

Description	Basis for Provider Approval	Basis for Rate(s) of Payment
Architectural Modifications	<ul style="list-style-type: none"> • For consultation, state licensed architects on contract with BRS • For actual modification work, state registered home improvement contractors 	<ul style="list-style-type: none"> • For consultation, BRS Central Office sets rates per contract • Costs for modification work is based on DAS General Letter 71, or DAS DPA 8
Bookstore	<ul style="list-style-type: none"> • College-run, college affiliated, or book sellers on state purchasing contract are recognized vendors. • When not part of a college or vocational training program, use state purchasing contracts, if available, or BRS approved vendor per DAS General Letter 71 and or DPA 8 	<ul style="list-style-type: none"> • Use the list cost of required books and supplies. • When provided in conjunction with a college or vocational training program, these costs are subject to the financial aid determination.
Business School or College	National Accreditation or approval by state Department of Higher Education	Same as Colleges and Universities above
Clinics and Labs	State Licensure	(1) Medicaid Rate (2) If no Medicaid, then Medicare Rate
Colleges and Universities	National Accreditation	<ul style="list-style-type: none"> • Financial Aid Determination of the school's Financial Aid Office • State Community College, College/University caps apply unless the academic program is not offered at a state facility or if a state facility cannot accommodate the individual's functional needs (see Appendix C-1 for current procedures) • Disability related costs not subject to financial aid determination

Community Rehabilitation Providers	BRS Community Rehabilitation Provider Committee approves providers. (contact Central Office Consultant liaison to CRPs for details)	BRS Community Rehabilitation Provider Committee recommends rates based on costs submitted by each provider. BRS Director approves rates.
Day Care	(1) Licensure by the State Department of Public Health as a: - Family Day Care Home - Group Day Care Home, or a - Day Care Center or (2) Approval by BRS District Director when using a non-licensed provider	(1) For licensed providers, use rates established by DSS (2) For non-licensed providers BRS may provide cash payments to consumers for them to procure the services directly at a rate not to exceed the Connecticut minimum wage.
Durable Medical Equipment	Vendors must have a Title 19 provider number issued by DSS	(1) Use Medicaid Rate. If there is no Medicaid Rate defer to (2) Medicare Rate. If there is no Medicare Rate defer to (3) Manufacturer's suggested retail price minus 15%
Hearing Aid Dealers	State Licensure	BRS sets Rate: Documented manufacturer's wholesale cost (not to exceed \$800; see Hearing Aid Guidance, Policy Manual, appendix B-5 for details) plus dispensing fee of: - \$275 for a monaural linear aid - \$425 for binaural linear aids - \$525 for a monaural programmable aid - \$800 for a pair of programmable aids.
Hearing Officers	BRS Central Office approves and contracts with qualified hearing officers	BRS Central Office sets rates

Home Care Providers	State Licensure	(1) Medicaid Rate (2) If no Medicaid, then Medicare Rate
Hospitals	National and State Accreditation	(1) Medicaid Rate (2) If no Medicaid, then Medicare Rate
ILC's	BRS Central Office approves ILC Providers	BRS Central Office Sets Rates
Individual Health Care Practitioners	State Licensure	(1) Medicaid Rate (2) If no Medicaid, then Medicare Rate (3) If neither Medicaid nor Medicare, then BRS sets rate.
Interpreters for the Deaf	State Licensure: 1. Must be registered with the DORS Interpreting Services Unit 2. Must have passed written generalist exam of the Registry of Interpreters for the Deaf and - Passed Level 3 of the National Registry of Interpreters for the Deaf, or - Graduated from an accredited interpreter training program, or - Hold certification by the National Registry of Interpreters for the Deaf	1. Through DORS Interpreting Services Unit: use rates set by DORS Interpreting Services Unit based on the individual interpreter's hourly contract rate plus mileage and auto usage fee. 2. If DORS interpreters not available: use FSW, Inc. rates as established and approved by BRS.
Mediators	BRS Central office approves and contracts with qualified mediators	BRS Central Office sets rates
Misc. Equip. and Supplies	<ul style="list-style-type: none"> • DAS Purchasing Contract, or • Approval by BRS District Director 	DAS purchasing contract rate, or DAS General Letter 71, or DPA 8

Miscellaneous Training	<ul style="list-style-type: none"> • First determine that the service does not fall under tutoring or other training categories • If not then approval by Bureau Chief or C.O. Consultant 	BRS Central Office Sets Rate
On-the-Job-Training	Approval by a BRS District Director (maximum rate per hour set by C. O.)	Rates negotiated by the district and specified in BRS/Employer/Consumer Agreement Letter
Other	<ul style="list-style-type: none"> • If none of the above vendor approval processes pertain then BRS will approve vendors for other services. • The State Comptrollers Office must approve any service vendors when using the state credit card purchasing mechanism. This approval is not necessary for the purchase of goods. 	If none of the above rate setting structures pertain, then BRS will set the rate
Personal Assistance Services	BRS is using Allied Community Services as the fiduciary for funding PAS	Rates established by contract with Allied Community Services.
Rehabilitation Technology (RT)	<ol style="list-style-type: none"> (1) For RT consultation, BRS holds contracts with qualified vendors (2) For individual RT training, BRS Central Office approves providers (3) For RT equipment and devices, <ul style="list-style-type: none"> • state purchasing contracts, or • approved by BRS District Director 	<ol style="list-style-type: none"> (1) BRS Central Office sets consultation rates (2) BRS Central Office sets training rates (3) DAS purchasing contract rate or DAS General Letter 71 or DPA 8
Social Workers	State Licensure/ LCSW	Rate set by BRS Services; no longer limited to treatment, includes diagnosis. See BRS fiscal documents (System 7) for current rate. (Rev. 3/30/12)

Transportation	Public Transit Carriers	<ul style="list-style-type: none"> • Use common carrier rates when public transit is used • For personal vehicles, reimburse based on actual mileage at the rate currently used for reimbursing BRS management employees • For personal vehicles, reimburse based on actual mileage at the rate currently used for reimbursing BRS management employees • Published rates for livery services
Tutors - Content	<p>(1) State Teacher Certification in specific academic or skill area, or</p> <p>(2) Demonstrated expertise in the content area based on a review of credentials and approval by a District Director</p>	Payment for Content Tutoring has been established at a statewide hourly rate.
Tutors – Strategy	Approval by Central Office staff based on: demonstrated proficiency in teaching learning strategies and a minimum of a Masters Degree in Education or Psychology, and meet the criteria in “Guidelines to Select a Strategy Tutor.”	BRS set rate. See System 7 Strategy Tutor Service form for current rate.
Vehicle Modifications	<p>(1) For Driving Assessment and Equipment Specifications, BRS holds a contract with a qualified vendor.</p> <p>(2) For Automotive Engineering consultation and inspection BRS has a contract with a Community Rehabilitation Provider/mobility center.</p> <p>(3) Vendors must meet the National Mobility Equipment Dealers Association's Quality Assurance Standards for the level of work required</p>	<p>(1) BRS Central Office sets consultation rate</p> <p>(2) Rate is based on pay scale of the CRP engineer</p> <p>(3) Per DAS DPA 8, competitive bid, or quote from sole source when justified</p>

Vocational Schools	<p>(1) Approval by State Department of Higher Education</p> <p>(2) Approval by a Regional Workforce Development Board</p>	<ul style="list-style-type: none"> • Financial Aid Determination of the school's Financial Aid Office • Disability related costs not subject to financial aid determination
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PROCUREMENT PROCEDURES

<u>TYPE OF SERVICE</u>	<u>AUTHORIZATION PROCEDURE</u>	<u>COST BASIS</u>
Medical	BRS Authorization for Planned Services	Medicaid rates - (CGS Sec. 4-67c.)
Community Rehabilitation Providers	Purchase of Services Contract; BRS Authorization for Planned Services	BRS Fee Schedule
Post Secondary Training	VR-21 and BRS Authorization for Planned Services	BRS Financial Aid Policy (Based on published costs of the institution, state college/university caps as applicable, and financial aid determination)
Tutoring Academic	BRS Authorization for Planned Services	BRS determined rates (a regional average)
Learning Strategy	BRS Authorization for Planned Services	BRS Policy (rates not to exceed \$36/hr.)
OJT	OJT Contract/letter and BRS Authorization for Planned Services	BRS Policy (rates negotiated with employer; maximum \$40/hour unless authorized increase by C. O.)
Cash Disbursement Maintenance	BRS Authorization to Consumer	BRS Policy (additional costs incurred by participation in the Employment Plan)
Transportation	BRS Authorization to Consumer	BRS Policy (common carrier rates, livery rates, or federal mileage reimbursement rate rounded to nearest whole cent)
Other (out of pocket goods and services)	BRS Authorization to Consumer	BRS Policy (negotiated with consumer based on individual needs)
Equipment up to \$10,000 • if on fee schedule • if on state contract* • if sole source** • if open competitive*** -if under \$2,500 -if between \$2,500 and \$10,000	BRS Authorization for Planned Services to accepting vendor (cite General Letter 71(d)) BRS Authorization for Planned Services to vendor (cite contract #, and General Letter 71(d)) BRS Authorization for Planned Services to sole vendor (cite General Letter 71(d)) BRS Authorization for Planned Services to chosen vendor (cite General Letter 71(d)) (bidding or quotes are recommended) Written competitive bids are required. BRS Auth.for Planned Services to lowest qualified vendor (cite General Letter 71(d))	DAS Procurement Services, General Letter Number: 71(d), December 31, 2009.

<u>TYPE OF SERVICE</u>	<u>AUTHORIZATION PROCEDURE</u>	<u>COST BASIS</u>
Equipment over \$10,000 <ul style="list-style-type: none"> • if on fee schedule • if on state contract • if sole source* • if open competitive** 	BRS Authorization for Planned Services to accepting vendor (cite General Letter 71(d)) BRS Authorization for Planned Services to vendor (cite contract #, and General Letter 71(d)) BRS Authorization for Planned Services to sole vendor (cite General Letter 71(d)) Written competitive bids are required BRS Authorization for Planned Services to lowest qualified vendor (cite General Letter 71(d))	DAS Procurement Services, General Letter 71(d) August 20,2002

Notes:

***state contracts**

State contracts must be used for all equipment purchases unless it can be clearly demonstrated that the contract is unable to meet our needs. For updated contract information please consultant DAS Web Page at <http://das.ct.gov/cr1.aspx?page=12>

Decisions to override a state contract should be made by the district director in consultation with the bureau chief. The case record should clarify the rationale for such decisions.

****sole source:**

A vendor can be determined to be a sole source if there is no other manufacturer or in-state distributor from which to buy the product.

The district director in consultation with the bureau should make sole source decisions chief. The case record should clarify the rationale for such decisions.

*****open competitive**

If a consumer has a preference for a particular vendor, that vendor, if qualified, should be included in the bid solicitation. The consumer then may elect to have the vendor of choice by agreeing to pay the difference between the lowest qualified bid and the bid by the preferred vendor. In such cases, the BRS Authorization for Planned Services should be authorized to the preferred vendor in the amount of the lowest bid with the notation that the consumer is responsible for the difference. Bid notices should specify that consumers have the option of going to their vendor of choice under such circumstances. Care should be taken in advance to assure that preferred vendors are willing to accept authorizations on that basis.

Other circumstances may justify purchasing without going to competitive bid. For example there may be a prior vendor/customer relationship as with a prosthetist, or geographical proximity of a vendor may be a requirement so that the consumer can readily access service. The district director in consultation with the bureau chief should make such decisions.

BRS CONSUMER BUDGET WORKSHEET

Consumer Name _____

WHEN MAINTENANCE SERVICES ARE PROVIDED BY BRS, COMPLETE THIS SECTION

Item:	Current Weekly Expenses Prior to Employment Plan	Anticipated Weekly Expenses During Employment Plan	Additional Weekly Expenses Due to Employment Plan* (anticipated minus current expenses)
BASIC SHELTER			
Room (rent or mortgage):			
(if head of household, include utilities) -			
Phone:			
Power:			
Heat/fuel:			
Water:			
Method(s) of Verification:			XXXXXXXXXXXXXXXXXXXX
BASIC FOOD (or board):			
BASIC CLOTHING:			
OTHER: (Specify)			
TOTALS:		\$	

WHEN CASH PAYMENTS ARE USED FOR SERVICES OTHER THAN MAINTENANCE, COMPLETE THIS SECTION

	Amount incurred as a result of participation in the Employment Plan	Available comparable benefits	Need (amount incurred minus comparable benefits)
TRANSPORTATION:			
TUTORS/NOTETAKERS			
OTHER – (Specify):			
TOTAL NEED FOR EXPENSES OTHER THAN MAINTENANCE:		\$	

I certify that the amount(s) which I have reported (above) are an accurate statement of my financial needs and resources.

Signature: _____

Date: _____

Verified by: _____

Date: _____

Bureau of Rehabilitation Services
CASH PAYMENT AGREEMENT

Consumer Name: _____

Address: _____
(where checks
are to be sent) _____

Social Security # XXX-XX-__ __ __

The following is the plan of direct payments to be made in connection with my rehabilitation plan for the following service: _____

One-time payment:

Amount \$ _____

Check date: _____

OR

Bi-weekly

From _____ To _____ Number of
Checks _____ @ \$ _____/check Total Amount _____

No Checks for Weeks Ending:

(e.g. exclude school holidays if payment is for notetakers)

I understand that I am required to [Check all that apply]:

- Sign and send the check stub immediately upon receipt of each check.
- Send a monthly log of the services provided.
- Send a receipt for the equipment purchased.

If I do not comply with above, any further checks will be cancelled. If required by my counselor, I accept responsibility for completing the monthly log verifying the services provided to me by each individual.

Signed: _____ (must provide copy to consumer)
Consumer Date

Counselor Date

Supervisor Date

**State Of Connecticut
Bureau of Rehabilitation Services**

Documentation of Cash Payment Service Hours

(For use when cash payments are used to purchase recurrent services such as
Childcare, transportation, etc.)

Consumer Name _____ Month _____ Year _____

Providers(s) 1. _____
2. _____

This form must be submitted by the vendor to the BRS district fiscal unit within one week after the end of the month listed above.

In the space below, list the hours that services were provided each day

Date	Provider
1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____
8	_____
9	_____
10	_____
11	_____
12	_____
13	_____
14	_____
15	_____
16	_____
17	_____
18	_____
19	_____
20	_____
21	_____
22	_____
23	_____
24	_____
25	_____
26	_____

Consumer's Signature _____

Signed: Provider (1) _____ Total # of hours _____
Provider (2) _____ Total # of hours _____
Provider (3) _____ Total # of hours _____
(If additional providers, sign on the reverse side)

Report has been checked and adjustments to payment made, if necessary. _____
(Counselor's initials)

Cc: To District Fiscal Unit

**MAINTENANCE AND OTHER SERVICES THROUGH
CASH PAYMENTS TO CONSUMERS**
(Please review Chapter III, Section 4(d) – Maintenance before proceeding)

Maintenance services –

“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 vocational rehabilitation services under an individualized plan for employment.” (From CFR 361.5(b)(35), Applicable Definitions)

- 1) When the counselor and consumer determine that maintenance is a necessary service, the method of payment may be either:
 - direct authorization to a post-secondary training institution or other provider (e.g., room and board at college) **or**
 - cash payments to the consumer. *See Appendix C for guidance when authorizing payments for students in post- secondary training institutions.*
- 2) The availability of benefits or resources to a consumer such as Worker's Compensation, unemployment compensation, welfare payments, consumer earnings, etc., must be taken into consideration prior to committing BRS funds for maintenance payments. *Assistance with maintenance from BRS cannot be used to replace these programs.*
- 3) *The counselor and consumer must use the BRS “Consumer Budget Worksheet” to document additional expenses incurred and determine the amount of payments.* This does not apply to situations where direct payment is being made to an institution with a published rate from room and board (e.g., college or rehabilitation facilities) or for room and board for dependent commuting students, when utilizing the VR-21 Client/Student Financial Aid Information Exchange form.

When expenses appear to be out of the norm, consumers may be requested to provide documentation. The consumer's signature on the worksheet will attest to the accuracy of the information provided.

Maintenance by direct cash payments:

1. *Prior to beginning any cash payments to the consumer, the counselor must check with fiscal staff to be sure that the consumer is a vendor on CORE CT. If not, a completed W-9 and an Agency Vendor Form must be completed. Maintenance cannot be started before the consumer information has been entered into CORE CT.*
2. The counselor must review with the consumer the purpose of maintenance or other cash payments and inform the consumer of the beginning and ending dates of the plan. The consumer must be instructed to sign the check stub and mail it to the district fiscal unit immediately upon receipt of each check. The consumer must also be advised that the continuation of the cash payment plan is contingent upon the timely receipt of these signed check stubs at the district office. ***Continued payments will be cancelled if the consumer fails to submit a check stub within two weeks of receiving the previous/last check.*** The consumer must notify either the counselor or district fiscal unit if the check is not received or if a check stub cannot be returned on time. Consumer responsibilities are spelled out on the Cash Payment Agreement form, which must be signed and a copy given to the consumer.

3. The consumer, counselor and supervisor prior to the initiation of any maintenance payment(s) must each sign the Cash Payment Agreement Form. An authorization for the provision of maintenance must be prepared specifying whether the payment will be a one-time payment or weekly (maintenance checks are only sent out on a bi-weekly schedule; if amount to be paid to consumer is a weekly amount, they will receive double this amount in a bi-weekly check). In all cases the payment period must be designated as commencing on Sunday and running through Saturday. Checks shall be made payable to the consumer and mailed directly to the consumer's address. In some cases, a counselor and consumer may determine that the checks should be sent (for security or convenience) in care of a third party.
4. To insure timely payments, authorization should be submitted at least two weeks in advance of the first payment week.

Cash Payments for Services Other Than Maintenance:

- 1) The counselor and consumer must determine whether cash payments are the most practical and appropriate means for the provision of services. Typically this is used in cases where the only alternative means of authorization is by cash payment to the consumer, such as childcare or transportation*. **The cash payment method should be used only when the consumer has the capability or support system to properly manage and account for the money and services.**
- 2) When the cash payment mechanism is used to provide funds for services such as a child care provider, the consumer must be advised that it will be his/her responsibility to maintain a log of the services performed. The Documentation of Cash Payment Service Hours form is to be used for this purpose. It is to be completed by the service provider or the consumer, and must be signed by both the consumer and service provider. The form is to be submitted to the district fiscal unit within one week of the end of each calendar month when payments are made. *The district fiscal unit must share a copy with the counselor*, who must note any discrepancies between the amount authorized and the actual amount utilized and make adjustments as necessary. The district fiscal unit will withhold further payments to consumers if these are not received.
- 3) **On rare occasions**, a single maintenance check may be provided to a consumer for the purchase of equipment required as part of an Employment Plan (e.g., miscellaneous small equipment), which cannot readily be provided through normal purchasing procedures. This may be done if the cost of the equipment is less than \$2500. **Three verbal bids must be obtained and documented. The consumer must be advised that s/he is required to provide a receipt for such a purchase, which must be filed in the case record.**

***Please Note: If the consumer will be using the cash payment to pay an individual directly for driving, care of children or other service (rather than for paying a business to provide the service), we must advise the consumer that they are acting as an employer and must make arrangements for applicable taxes to be paid – see following page for additional information to provide to your consumer)**

Information for Consumers acting as Employers -

AN EMPLOYER'S GUIDE TO UNEMPLOYMENT COMPENSATION – page 4 talks about domestic employees

<http://www.ctdol.state.ct.us/uitax/empl-guide.pdf>

Employer Tax Help – <http://www.ctdol.state.ct.us/uitax/tax.htm>

Frequently Asked Questions – <http://www.ctdol.state.ct.us/uitax/FAQs.htm>

Ticket to Work Procedures for Vocational Rehabilitation Counselors

The following procedures are for counselors to follow when working with consumers who are eligible for the Ticket to Work Program. The purpose of these procedures is to assure that the Bureau of Rehabilitation Services (BRS) performs in a manner that is consistent with the principles of consumer choice, partnership, and quality economic outcomes that are common to both the Ticket Program and the public Vocational Rehabilitation Program. As we strive to maximize long term employment for all individuals with significant disabilities we will be advocating for our consumers to engage in follow along services provided by the Ticket as they leave the VR program successfully employed. By so doing we will also maximize the allowable payments to the Bureau from the Social Security Administration for consumers who become employed as a result of vocational rehabilitation services and continued employment supports. These administrative procedures should not substantially influence the vocational rehabilitation counseling process.

I. APPLICATION

Ask whether individuals are beneficiaries of either SSI or SSDI. **Refer to the Desk Reference Guide SSDI and SSI Beneficiaries.**

Ask if the consumer has a Ticket. If the consumer does not know about the Ticket program, give an overview using the following materials:

- Just the Facts on Ticket-To-Work
- Benefits Counseling Program

If the individual has received a Ticket, the counselor should discuss the opportunity for employment supports after the consumer becomes employed under the Ticket Partnership Plus Program.

If an individual still has questions about where to assign their Ticket, or about the services of other Employment Networks, they should be given contact information for both Maximus at 1-866-968-7842 and the Protection and Advocacy for Beneficiaries of Social Security (PABSS) project at 1-800-842-7303.

II. PLAN DEVELOPMENT

Ticket consumers are eligible for CDR protections while the Ticket is in-use with BRS. Verify from the RSA-911 that the individual is on SSI/SSDI.

- For those consumers who are not sure if they are eligible for the Ticket program, let them know when the Ticket will be available for assignment with an EN when they BRS case is closed. It is at that time the consumer will assign their Ticket to an Employment Network.
- Consumers who sign an IPE with BRS will have a Ticket in-use status which will give CDR protection while the Ticket is being used.
- Refer consumer to Benefits Counseling for follow up.

Plan Development when the consumer signs the Employment Plan:

As appropriate, encourage the individual to consult with a benefits counselor regarding the potential impact of employment on their benefits and healthcare coverage.

Discuss the opportunity/benefits for consumer to engage in ongoing employment supports with an EN. Consumer will be able to assign Ticket to an EN when the case is closed with BRS. Consumer should be given a list of ENs to choose from with counselor guidance.

Plan development when the individual has assigned the Ticket to an Employment Network with or without BRS as a partner:

Provide the Ticket Coordinator with the name of the EN that has received the consumer's Ticket. If the EN is not in partnership with BRS, the Ticket Administrator will initiate efforts to develop a cost sharing agreement with them.

Even when consumers assign their Ticket to an Employment Network BRS is still legally responsible to serve them. However the Employment Network is responsible for providing whatever services are specified in its Individual Work Plan for that consumer. Counselors should view those services as "comparable benefits" and thus not purchase or directly provide those particular services. The Ticket Coordinator is available to assist counselors in determining this information.

Consumers should be asked to present the counselor a copy of the Individual Work Plan (IWP) that they hold with the other EN. Sharing this copy and all amendments of the IWP will be required as part of the consumer responsibility in BRS's Employment Plan. If you are unable to get the IWP plan right away, proceed with IPE development. A Plan amendment may be necessary once the IWP is received.

III. ONGOING PROCEDURES

- Review cases for any changes in Ticket status that will need to be discussed with the consumer. Discuss follow along services with EN and consumer.
- Review the Ongoing Employment Support Desk Guide while in Plan development and ongoing Plan activity.
- Review Employment Plans for those consumers who have provided IWP plans signed with other providers, for potential comparable benefits and BRS plan amendments.

IV. CASE CLOSURE

For all SSI/SSDI consumers who are served and closed by BRS in competitive employment, the following issues should be addressed and incorporated as needed in the closure amendment to the Employment Plan:

- A Referral form to EN for services when closing the case should be done before closure; send copy to Ticket Coordinator. Consumer will have 90 days after case closure to assign the Ticket to an EN in order to keep CDR protection. In the BRS closure letter, provide the consumer with EN contact information.
- A long term Benefits Management Plan developed in cooperation with a Benefits Counselor when appropriate. Changes in employment over time generally lead to changes in benefit status.

