

Informational Paper 47

Vocational Rehabilitation

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Introduction

The vocational rehabilitation program is a federal and state program to assist individuals with disabilities in obtaining employment. Funding for the program is primarily provided by a federal vocational rehabilitation grant (78.7%) and state matching funds (21.3%). The purpose of the vocational rehabilitation program is to provide comprehensive, coordinated, effective, efficient, and accountable programs of vocational rehabilitation that are designed to assess, plan, develop, and provide vocational rehabilitation services for individuals with disabilities, consistent with their strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice, so that such individuals may prepare for and engage in gainful employment.

To accomplish the goals of the vocational rehabilitation program, Wisconsin is divided into 11 workforce development areas (WDAs) that serve individuals with disabilities. Attachment 1 shows a map of Wisconsin divided into the 11 WDAs. Each WDA covers one or more counties and consists of a director, supervisor(s), counselors, and case coordinators located at several service sites within the WDA. Individuals with disabilities apply for vocational rehabilitation services at one of the service sites or online. If the individual is found eligible for services, a counselor at the service site where the individual is located provides guidance and counseling, helps create a plan for employment, and purchases services, on behalf of and tailored to meet the needs of each individual, from a third party which provides that specific service. Consistent with the purpose of the vocational rehabilitation program, the individual uses the services provided by the program to achieve gainful employment.

Background

Following World War I, federal legislation was enacted to assist disabled veterans with employment and educational opportunities. In 1920, the federal Smith-Fess Act expanded such opportunities to all disabled citizens. For the first time, the federal government provided funds to the states for vocational services, including vocational guidance, training, occupational adjustment, prosthetics, and job placement services, for all disabled citizens. The states were required to provide a 50% match to the federal funds.

Over the years, additional federal legislation expanded services and the definition of disabled, such as the inclusion of blindness. The Rehabilitation Act of 1973 replaced prior legislation and prioritized service for persons with severe disabilities, established affirmative action programs, and created the individual written rehabilitation program to ensure individual involvement in a rehabilitation plan of action. The Rehabilitation Act of 1973 was amended in 1978, 1986, and 1992 to establish independent living centers, focus on peer counseling and guidance, enhance support for rehabilitation engineering, support special projects and demonstrations, and guarantee individual choice in career opportunities.

According to the Rehabilitation Research and Training Center on Disability Demographics and Statistics, 2005 Disability Status Reports, in the United States, 12.6% of working age individuals reported a disability, 38.1% of these disabled workers were employed, and 24.6% of these individuals lived in poverty. In Wisconsin, 10.8%

of working age individuals reported a disability, 44.2% of these disabled workers were employed, and 21.2% of these individuals lived in poverty. The Rehabilitation Act of 1973, as amended, was enacted to: (a) empower individuals with disabilities to maximize employment, economic self-sufficiency, independence, and inclusion and integration into society; and (b) ensure that the federal government plays a leadership role in promoting the employment of individuals with disabilities, especially individuals with significant disabilities, and in assisting states and providers of services in fulfilling the aspirations of such individuals with disabilities for meaningful and gainful employment and independent living.

The Rehabilitation Services Administration (RSA), in the Office of Special Education and Rehabilitative Services (OSERS) in the U.S. Department of Education, administers funding under the Rehabilitation Act of 1973, as amended. OSERS provides funding and guidance based on the best available science and research in special education, vocational rehabilitation, and research. The RSA oversees formula and discretionary grant funding for vocational rehabilitation.

To be eligible to receive funding from the RSA, each state must file a state plan that describes how the state will conduct its vocational rehabilitation program in compliance with federal law and designates the state agency which administers the program. In Wisconsin, the Department of Workforce Development (DWD), Division of Vocational Rehabilitation (DVR), administers the vocational rehabilitation program.

DVR assists individuals with disabilities to obtain, maintain, or improve employment and is the state's primary provider of employment services to people with disabilities. Attachment 2 lists the statutory requirements of the DVR program.

The remainder of this paper provides information regarding eligibility, services,

specialized programs, and funding for DVR. This paper also provides some statistics regarding the disabled population served by DVR and describes the Wisconsin Rehabilitation Council (WRC).

Program Eligibility

Under federal law, to be eligible for DVR services, an individual must have a physical or mental impairment that results in a substantial impediment to employment and require DVR services to prepare for, secure, retain, or regain employment.

A substantial impediment to work may include difficulty with: (a) getting to and from places; (b) communicating; (c) getting ready for work or taking care of oneself; (d) making realistic decisions and following through with plans; (e) getting along with others; (f) working full-time or performing all of the physical duties; and (g) learning new job skills. Attachment 3 lists examples of disabilities that could result in a substantial impediment to employment and require DVR services.

An individual eligible for Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) benefits is presumed eligible for DVR services provided that the individual intends to achieve an employment outcome. Completion of the DVR application process is sufficient evidence that the individual intends to achieve an employment outcome.

For individuals not eligible for SSI or SSDI benefits, DVR reviews information regarding the individual's disability, including DVR counselor observations, to determine eligibility. Other information may be obtained from other programs and providers, such as educational institutions, the Social Security Administration (SSA), physicians, hospitals, and other sources. The information used must describe the current functioning of the

individual. If the information does not describe the current functioning of the individual or is unavailable, insufficient, or inappropriate, DVR bases its determination of eligibility on an assessment of additional information that results from the provision of DVR services, including assistive technology devices and services and work experience.

Application Process. DVR has 70 sites throughout the state, in addition to the central administrative office in Madison. Attachment 4 lists these sites by workforce development area. An applicant may visit one of the sites or request an application on-line. DVR considers an individual to have applied for services when the individual: (a) has completed a DVR application or otherwise requested services; (b) has provided the information necessary to initiate an assessment to determine eligibility and priority for services; and (c) is available to complete the assessment process.

According to the DVR Program Policy Manual, eligibility must be determined within 60 days after the individual submits an application for DVR services. However, the counselor and the individual can agree on a specific extension of time due to exceptional and unforeseen circumstances beyond the control of either DVR or the individual.

A DVR counselor determines eligibility. The counselor must include a written statement of eligibility in the case record. Individuals who are determined not to be eligible for DVR services are informed of the decision, in writing, and provided with the reasons for the determination of ineligibility, notification of their appeal rights, and information about the Client Assistance Program (CAP). The rights of the applicants are discussed below in the section "Appeal and Other Rights."

Once determined eligible, the DVR counselor recommends, in writing, the category in which individuals should be placed according to the severity of the disability. The counselor's supervisor then reviews the recommendation and either accepts the recommendation or modifies the

recommendation. This system of categories is called order of selection (OOS). As indicated above, individuals with the most severe disabilities have priority for services.

Order of Selection

Under federal law, if DVR services cannot be provided to all eligible individuals with disabilities in the state who apply for the services, the state plan must: (a) show the order to be followed in selecting eligible individuals to be provided vocational rehabilitation services; (b) provide the justification for the order of selection; (c) include an assurance that, in accordance with criteria established by the state for the order of selection, individuals with the most significant disabilities will be selected first for the provision of vocational rehabilitation services; and (d) provide that eligible individuals who do not meet the order of selection criteria must have access to services provided through an information and referral system.

Prior to December, 1994, DVR provided services to all eligible persons with a disability, regardless of the severity of the disability. However, DVR implemented an OOS in December, 1994, that consisted of seven categories. Each eligible individual was assessed according to the severity of their disability in any of the following functional areas: (a) mobility; (b) communication; (c) self-care; (d) self-direction; (e) interpersonal skills/acceptance; (f) work tolerance/restrictions; and (g) work skills/history. Based on this assessment, the individual was placed in one of the seven categories--Category A through Category G.

Individuals in Category A through Category C met the federal definition of significant disability. Category A was the most severe category, with individuals who had three or more severe limitations within the seven functional areas and required multiple services over an extended period of time. Individuals in Category B had to have two

severe limitations and require multiple services over an extended period of time. Individuals in Category C had to have one severe limitation and require multiple services over an extended period of time. Multiple services over an extended period of time meant two or more services for more than one year.

Individuals in Category D through Category G did not meet the federal definition of significant disability. Individuals in Category D had to have four to seven severe limitations and lack either or both the requirements for multiple services (two or more services) over an extended period of time (more than one year). Individuals in Category E had to have one to three severe limitations and lack either or both the requirements for multiple services over an extended period of time. Individuals in Category F had to have four to seven non-severe limitations and may or may not have required multiple services over an extended period of time. Individuals in Category G had to have one to three non-severe limitations and may or may not have required multiple services over an extended period of time. Category G was suspended in December, 1994. Therefore, individuals placed in Category G no longer received DVR services.

The operation of these categories remained in place until August, 2000, when, due to funding shortfalls, DWD made the decision to close all categories to new applicants. As a result, individuals who were receiving services under a DVR approved plan for employment at the time of closure were not affected by the closure. However, individuals not yet receiving services under an approved plan were placed on a waiting list and were only served when the OOS categories opened.

DVR then implemented a new OOS that consists of three categories. Category 1 is equivalent to the former Category A for persons with three or more severe functional limitations requiring multiple services over an extended period of time. Category 2 is equivalent to the former Category B and Category C, for persons

with one or two severe limitations requiring multiple services over an extended period of time. Category 3 is for all other persons eligible for DVR services--those who have no severe limitation or do not require multiple services over an extended period of time. An SSDI beneficiary or SSI recipient is automatically considered to be, at least, an individual with a significant disability (Category 2). These three categories are still used by DVR.

Table 1 compares OOS categories before December, 1994, from December, 1994, to August, 2000, and after August, 2000.

Since the implementation of the three new categories, there had been waiting lists for one or more categories. However, as of December 1, 2006, all individuals have been activated off of the waiting list. All individuals in each of the three categories are now receiving DVR services.

When a waiting list is in effect, DVR, as the designated state unit, must contact each individual on a waiting list at least annually to determine if they want to continue as a suspended case or if the case may be closed. If the individual chooses to allow the case to be closed, it would not prejudice any future reconsideration of the individual for services. If contact is by mail and there is no response within 30 days or if the individual has moved and left no forwarding address, the case is closed with no further notice.

The OOS criteria are reviewed annually to ensure that individuals with the most severe disabilities are served before individuals with less severe disabilities. Any change to the OOS would affect applicants who do not yet have an approved plan for employment. The criteria for making this determination include whether the fiscal and personnel resources are available to meet the needs of the disabled population. The imposition, continuation, or termination of an OOS is publicly announced and in effect no sooner than 30 days after the date of publication. Placement into an OOS is determined without regard to length of

Table 1: Order of Selection Categories

Date	Category	Description
Prior to December, 1994	None	All eligible persons with a disability were served.
From December, 1994, to August, 2000	A	Severe disability: three or more severe limitations requiring multiple services over an extended period of time.
	B	Severe disability: two severe limitations requiring multiple services over an extended period of time.
	C	Severe disability: one severe limitation requiring multiple services over an extended period of time.
	D	Four to seven severe limitations that lack either or both the requirements for multiple services over an extended period of time.
	E	One to three severe limitations that lack either or both the requirements for multiple services over an extended period of time.
	F	Four to seven non-severe limitations that may or may not require multiple services over an extended period of time.
	G	One to three non-severe limitations that may or may not require multiple services over an extended period of time. This Category was suspended in December, 1994.
After August, 2000	1	Equivalent to Category A. Must be served first.
	2	Equivalent to Category B and Category C.
	3	All other eligible persons for DVR services (Category D through Category G).

residency, income level, type of disability, age, sex, race, color, creed, national origin, source of referral, expected employment outcome, type of service needs, costs of services, or length of time needed to complete services.

Within 20 working days after the publication of an intention to impose or continue an OOS, DVR must notify, in writing, each individual who will not be served in the 12-month period beginning on the effective date of the OOS. The notice must include the reason for the decision, information regarding how and where to appeal the action, and information regarding how and where to submit new evidence for review by DWD. An individual may also request a review of his or her category within the OOS whenever new evidence is available by submitting a copy of the new evidence with a written request for a redetermination to the district director of the office which provided the notice of the OOS category. In addition, an individual may appeal the decision about the basis for category placement under an OOS for services

by sending a written request for a hearing with an explanation of specific issues to the district director of the office which provided the notice of OOS category within one year of the date of the notice mentioned above. OOS appeals are heard by impartial hearing officers under procedures established by DWD.

Individual Plans for Employment

Once an individual is assigned to an OOS category and activated from a waiting list, an individual plan for employment (IPE) is developed by the DVR counselor and the individual. The IPE must be developed within 90 days, unless an extension of time is approved by the individual, counselor, and DVR management.

The IPE begins with an assessment, completed by the counselor, to determine the needs of the

individual. Assessments determine eligibility and priority for services, vocational rehabilitation needs, and rehabilitation technology needs. For example, a self assessment eligibility worksheet provides a process for an individual to determine the limitations of a disability and whether DVR services would be appropriate. Attachment 5 provides a list of sample questions in the self assessment eligibility worksheet to obtain specific information regarding an individual's potential employment limitations.

The counselor must provide the individual, or the individual's representative, in writing and in an appropriate mode of communication, with information regarding options for developing an IPE. These options must include: (a) information on the availability of assistance to the extent determined to be appropriate by the individual from a counselor in developing all or part of the IPE; (b) the availability of technical assistance in developing all or part of the IPE; (c) a description of the full range of components included in an IPE; (d) as appropriate, an explanation of the DVR guidelines and criteria associated with financial commitments, additional information an individual requests or DVR determines necessary, or information on the availability of assistance in completing DVR forms required in developing the IPE; (e) a description of the rights and remedies available to the individual including recourse to due process and mediation; and (f) a description of the client assistance program and information about how to contact CAP.

The IPE itself contains a description of the specific employment outcome chosen by the individual, the timelines for the achievement of the employment outcome, a description of the specific services to be provided, and the timelines for the initiation of the services. The IPE also includes a description of the entity chosen by the individual, or the individual's representative, to provide the services and the methods chosen by the individual to procure the services.

The IPE also describes criteria to evaluate the progress toward achievement of the employment outcome and the terms and conditions of the IPE, including DVR responsibilities, individual responsibilities in relation to the employment outcome, expectations and outcomes needed to measure satisfactory progress, the individual's participation in paying for the costs of services, the individual's responsibilities in applying for and securing comparable benefits, and the responsibilities of other entities as the result of arrangements made pursuant to comparable services or benefits.

Finally, for an individual with the most significant disabilities with an employment outcome in a supported employment setting, the IPE includes information that identifies the extended services needed by the individual, the source of extended services or, if the source cannot be identified at the time of the development of the IPE, a description of the basis for concluding that there is a reasonable expectation that such source will become available, and, if necessary, a statement of projected need for post-employment services.

An IPE must be a written document prepared on DVR forms. The IPE must be developed and implemented in a manner that affords the individual the opportunity to exercise informed choice in selecting an employment outcome. For high school students eligible for an IPE, the IPE must be completed before the student leaves high school. The IPE must be agreed to and signed by the individual, or the individual's representative, and approved and signed by a DVR counselor. A copy of the IPE must be provided to the individual, or the individual's representative, in writing and, if appropriate, in the native language or mode of communication of the individual, or the individual's representative.

The IPE must be reviewed, at a minimum, annually by a DVR counselor and the individual, or the individual's representative. The review must

be signed by the counselor and the individual, or the individual's representative. The IPE is amended as necessary by the individual, or individual's representative, in collaboration with DVR staff. An amendment is necessary if there are substantive changes in the employment outcome, services to be provided, or the providers of the services. Amendments do not take effect until agreed to and signed by the individual, or individual's representative, and the DVR counselor.

Program Services and Providers

Services are provided to an individual based on the IPE. Services must be necessary to assist an individual in preparing for, securing, retaining, or regaining an employment outcome that is consistent with the strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of the individual. In addition to the assessments discussed above, other types of services are discussed below.

Guidance and Counseling. A DVR counselor provides information and shares knowledge about the impact disabilities have on employment. The counselor discusses the individual's abilities, needs, and interests to establish an IPE. Guidance and counseling also includes support services to assist an individual in exercising informed choice.

Referral. Individuals may be referred to other federal or state programs for services best suited to address their specific employment needs. For each of these programs, the individual is provided with the notice of the referral by DVR to the agency carrying out the program, information identifying a specific point of contact within the agency carrying out the program, and information and advice regarding the most suitable services to assist the individual to prepare for, secure, retain, or regain employment.

Job-Related Services. The goal of DVR is for an

individual to find and keep a job. These services include job seeking skills, job search and placement assistance, job retention services, follow-up services, and follow-along services. The individual learns to create a resumé and cover letter, to interview, to network, to find job openings, and to research employers.

Vocational and Training Services. These services include the provision of personal and vocational adjustment services, books, tools, and other training materials. However, for employment training goals that require attending a college, university, technical college, or vocational training program, the individual must apply for a training grant.

The training grant amount, effective May 9, 2006, is up to \$4,000 per academic year for a full-time student or \$125 per credit for a part-time student. The actual amount of a training grant awarded to an individual depends on how much financial aid is received and the unmet need based on other sources of financial aid. The student must apply for other financial aid in order to be considered for a training grant. The grant is paid directly to the student, divided in equal payments by academic year semester or quarters. DVR must receive a grade report or transcript at the end of each semester or quarter to verify adequate completion before the next installment of the grant can be issued. The grant may be used to fund tuition and fees, books and supplies, transportation, room and board, dependant care, student loan fees, and other personal and disability-related expenses.

Diagnosis and Treatment. If financial support for diagnosis and treatment of physical and mental impairments is not readily available from another source, such as health insurance, diagnosis and treatment may be covered DVR services.

Covered services include: (a) corrective surgery or therapeutic treatment (including hospitalization) necessary to correct or substantially modify a physical or mental condition that constitutes a

substantial impediment to employment, but is of such a nature that such correction or modification may reasonably be expected to eliminate or reduce such impediment to employment within a reasonable length of time; (b) prosthetic and orthotic devices; (c) eyeglasses and visual services prescribed by qualified personnel who are selected by the individual; (d) special services (including transplantation and dialysis), artificial kidneys, and supplies necessary for the treatment of individuals with end-stage renal disease; and (e) diagnosis and treatment for mental and emotional disorders by qualified personnel who meet state licensure laws.

Maintenance for Additional Costs. Additional costs incurred while participating in a DVR assessment or while receiving services under an IPE may be covered. Maintenance is provided when relocation is necessitated by the IPE, is feasible, and results in increased costs to the individual. If commuting and relocation are both feasible, then the individual may choose between the two. However, DVR costs will be limited by the least costly of the two alternatives.

Transportation. Services include transportation to employment or connected with the provision of any other service that the individual needs to achieve an employment outcome. Transportation services also include adequate training in the use of public transportation vehicles and systems.

Interpreter Services. Interpreter services may be provided by qualified personnel for individuals who are deaf or hard of hearing or deaf-blind. Services also include reader services for individuals who are determined to be blind after an examination by qualified personnel who meet state licensure laws.

Services for Blind. Rehabilitation teaching services and orientation and mobility services may be provided to individuals who are blind.

Licenses and Supplies. To achieve an employment goal or to start up a business

consistent with the goals of an established IPE, services may be provided to obtain an occupational license, tools, equipment, and initial stocks and supplies necessary to achieve the goal.

Self-Employment. For individuals who complete a thorough and well-researched business plan on self-employment or the operation of a small business, services may be provided to achieve self-employment or small business goals. These services may include technical assistance and other consultation services to conduct market analysis and the provision of resources to individuals who are pursuing self-employment or telecommuting or establishing a small business operation as an employment outcome.

Assistive Technology. Individuals may receive technological aids and devices that can make it easier to do a job or to continue with the training needed. Rehabilitation technology includes telecommunications, sensory, and other technological aids and devices. Replacement of equipment must be disability-related and linked directly to an IPE.

Transition Services. These services attempt to provide a smooth transition for disabled students from high school to post-secondary education or employment in order to facilitate the achievement of the employment outcome identified in the IPE. Eligible students with disabilities are contacted in high school to formulate an IPE so that a plan is in place for either employment or additional education when the student graduates from high school. Transition services are discussed in further detail in the "Specialized Programs" section below.

Supported Employment Services. Supported employment (SE) services are ongoing support services and other appropriate services needed to support and maintain an individual with a most significant disability in employment.

Ongoing support services consist of: (a) a particularized assessment supplementary to a

comprehensive assessment; (b) the provision of skilled job trainers who accompany the individual for intensive job skill training at the worksite; (c) job development, job retention, and placement services; (d) social skills training; (e) regular observation or supervision of the individual; (f) 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; (g) facilitation of natural supports at the worksite; (h) any other DVR services; and (i) services similar to any other services listed in this paragraph.

The services are provided singly or in combination and are organized and made available to assist the individual to achieve competitive employment. SE services are provided based on a determination of the needs of the individual and specified in an IPE. SE services are provided for up to a maximum of 18 months unless, under special circumstances, the individual and the counselor agree to extend the time in order to achieve the rehabilitation objectives identified in the IPE. SE is discussed in further detail in the "Specialized Programs" section below.

Family Services. Services to the family of an individual may be provided if they are necessary to assist the individual to achieve an employment outcome. For example, transportation or child care may be provided to family members if needed in order for the family members to participate in the individual's evaluation or IPE.

Post Employment Services. Post employment services are services that are necessary to assist an individual to: (a) retain employment when the limitations resulting from the disability result in the individual being at risk of losing the job; (b) regain employment when the individual is unable, due to the disability, to seek employment without assistance; or (c) advance in employment, when the job is no longer 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 complex and comprehensive services. Post employment service plans are not to exceed two primary services and/or more than six months in duration.

Planned Trial Work. Planned trial work is provided in a realistic, integrated work site in the community which evaluates the individual's abilities, capabilities, and work capacity. The selection of specific work sites for trial work experience must be consistent with the individual's exercise of informed choice. Trial work experiences may include supported employment work situations or on-the-job training. If the individual has accommodation needs which can be addressed through provision of assistive technology devices, assistive technology services, or personal attendant care services, those must be addressed when trial work experience is provided. The IPE for trial work experiences must incorporate and document periodic assessments to be carried out during the trial work experiences.

Other Goods, Services, and Assistance. Any other goods and on-the-job or other related personal assistance services not listed above may be provided if they are necessary to assist an individual to retain, regain, or advance in employment. These services may be provided while receiving other DVR services.

Service Providers and Partners. DVR purchases services from providers to assist individuals with disabilities to obtain and maintain employment. The individual chooses the service provider based on information provided by DVR, including: (a) a list of providers; (b) the cost, accessibility, and duration of potential services; (c) consumer satisfaction with those services, to the extent that information is available; (d) qualifications of potential service providers; (e) types of services offered by the potential providers; (f) the degree to which services are provided in integrated settings; and (g) the outcomes achieved by individuals working with the services providers, to the extent that information is available.

All purchased services are authorized prior to the provision of services. Most services are provided on a fee for service basis. Once services are completed for the individual, the provider submits an invoice to DVR for the authorized service. Direct payments are made to individuals for situations such as the provision of bus tokens. A receipt or other appropriate documentation that the funds were used as intended is required for direct payments. DVR provides vouchers to individuals attending post secondary education programs to cover approved education costs in the IPE. In addition, DVR contracts with county agencies for job development services and supported employment assessment services.

Providers of DVR services must be licensed, certified, registered or otherwise accredited, as applicable, for the occupation, facility, or service provided or, in the absence of these requirements, must possess other equivalent competency assurance. Any facility in which services are provided must meet the accessibility and the civil rights compliance standards required by law, including meeting the special communication needs of individuals. Providers must also take affirmative action to employ and advance in employment individuals with disabilities.

DVR also partners with state agencies, educational institutions, state and national organizations, American Indian VR programs and services, and community partnerships to provide needed services. Attachment 6 lists the partner agencies.

Comparable Benefits or Services. Prior to providing any vocational rehabilitation services to an individual, except services exempted, DVR staff must determine if comparable benefits or services exist under any other program and whether those benefits or services are available to the individual. If available, the comparable benefits and services must be used in whole or in part to cover the cost of services, unless the use of these benefits and services would interrupt or delay: (a) the progress

of the individual toward achieving the employment outcome identified in the IPE; (b) an immediate job placement; or (c) the provision of such service to any individual at extreme medical risk.

If an SSI or SSDI recipient has assigned their Ticket to Work to an employment network other than DVR, all services required to achieve their employment objective must be provided by the employment network or governed by a cooperative agreement with that employment network. The Ticket to Work program is described in further detail below under the "Specialized Program" section.

Exemptions from the determination of comparable benefits include assessments for eligibility and IPE needs, counseling and guidance, referral and other services to secure services from other agencies, placement services, and rehabilitation technology. Comparable benefits do not include awards and scholarships based on merit.

Financial Contribution and Fees. DVR does not require a financial needs test as a condition for providing services. However, individuals are advised that they may voluntarily contribute to the cost of the services listed in the IPE, but are not required to do so.

Federal guidelines permit DVR to establish limits on fees that DVR counselors may pay providers for services in order to ensure a reasonable cost to the program for each service. DVR has established maximum fees that DVR counselors may pay to providers for specific goods and services. Attachment 7 lists these services, along with the maximum fee and other limitations. Attachment 8 describes the process to request an exception to the maximum fees and limitations listed in Attachment 7. If the individual chooses a product or vendor that exceeds the established fee schedule and does not obtain an exception, the individual is responsible for the excess amount.

DVR also requires prior written authorization before specific services can be rendered and payment can be made. Attachment 9 lists the services and their fee amounts that require prior authorization.

Case Closure

Cases may be closed for a variety of reasons at any point during the DVR process. The following paragraphs describe the reasons cases may be closed.

Too Severely Disabled to Benefit from Services. A case cannot be closed because the individual is too severely disabled to benefit from services during the OOS process because of the presumption of being able to benefit. If, however, at any other time in the case process there is a suspicion that the individual is too severely disabled to benefit from services, an IPE will be written or amended to assess the individual's ability to participate in and benefit from services. Trial work experiences are required services for these plans. If trial work experiences are not available, alternate evaluation services must be provided in integrated settings and consistent with the individual's informed choice. The decision to close the case due to the severity of the individual's disability can be made only after a variety of work experiences over a sufficient period of time result in clear and convincing evidence that the individual is incapable of benefiting from vocational rehabilitation services in terms of an employment outcome. No one assessment strategy alone can result in clear and convincing evidence.

Prior to Eligibility. An individual's case will be closed without an eligibility determination when the individual declines to participate, refuses services, fails to cooperate, has died, or is institutionalized. The case will also be closed if the individual is unavailable during an extended period to complete an assessment for determining

eligibility and DVR has made a reasonable number of attempts to contact the individual or, as appropriate, the individual's representative to encourage participation.

Due to Ineligibility. The individual or, if appropriate, the individual's representative must be provided an opportunity for a full consultation of an ineligibility decision before the individual's case is closed due to ineligibility. The individual must also be offered referral services.

Individuals who are ineligible because they are incapable of benefiting from services in terms of an employment outcome must be provided an opportunity for a review of that determination a year after case closure and, thereafter, at the request of the individual. The review must assess whether their condition may have changed and they may now be eligible for services.

After Eligibility Determination. An individual's case will be closed after eligibility when it has not been possible to develop an IPE, the IPE has been completed, services are no longer necessary or appropriate, the individual fails to cooperate, the individual does not achieve satisfactory progress in an IPE, or the individual is no longer eligible. The individual or the individual's representative must be provided an opportunity to discuss the closure decision before the closure.

After Rehabilitation. A case may be closed if the rehabilitation services result in an employment outcome.

An individual has achieved an employment outcome only if the following requirements are met and documented: (a) services provided under an IPE have contributed to the achievement of the employment outcome; (b) the individual has achieved the employment outcome described in the IPE; (c) the employment outcome is consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice; (d) the employment outcome

is in the most integrated setting possible consistent with the individual's informed choice; (e) the individual is compensated at or above the minimum wage and receives at least the customary wage and benefit level paid to other individuals performing similar work for the same employer; (f) employment has been maintained for at least 90 days; (g) the individual and counselor consider the employment to be satisfactory and agree the individual is performing well on the job; and (h) the employment is stable and the individual no longer requires vocational rehabilitation services to maintain the employment.

Work in a nonintegrated or sheltered setting or work for which there is no payment is not considered a closure after rehabilitation. Nonintegrated or sheltered employment means the individual is normally paid on a piece rate basis, is doing the same type of job, is not generally afforded a benefits package offered other employees of the organization, and is supported by other resources, such as county funding. Individuals employed by the program earning wages and benefits normally afforded a person engaged in an employment relationship are considered competitively employed in an integrated setting and, thus, a successful rehabilitation outcome.

At the time of closure, the individual is informed of the availability of post employment services and will be provided services, if necessary, to maintain, regain, or advance employment consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities, and interests.

After Rehabilitation in Supported Employment. An individual's case will be closed when the individual is working in supported employment only when the employment represents competitive employment or employment in integrated work settings in which the individual is working toward competitive employment. The employment must

be in an integrated work setting where most employees do not have disabilities and the individual regularly interacts with these employees while performing job duties, or when the individual regularly interacts with individuals who do not have disabilities, including the general public, while performing job duties as part of a work group of employees with disabilities. There must be confirmation of extended support services after case closure by another party identified in the IPE. Closure occurs no sooner than 90 days after transition to extended support services. Individuals must be compensated in accordance with the federal Fair Labor Standards Act.

Notification of Closure. Individuals whose cases are closed for any reason except death or no known address must be notified, in writing, of the case closure, the type of closure, the reasons for the closure, the right to appeal the closure decision, and the process for appealing, including the availability of CAP to assist with an appeal. Individuals must be kept fully informed and provided an opportunity to respond prior to case closure. Notification to the individual or individual's representative must be supplemented as necessary by other appropriate modes of communication consistent with the informed choice of the individual.

Annual Review if Working Under a Sub-Minimum Wage Certificate. If an individual's case is closed because he or she has been working under a sub-minimum wage certificate, an annual review must be conducted each year for two years. An individual or individual's representative may request additional reviews. The review is to determine the interests, priorities, and needs of the individual with respect to competitive employment or training for competitive employment. An individual or individual's representative must have input into the review and reevaluation and sign an acknowledgment. Maximum efforts must be made to assist these individuals in engaging in competitive employment.

Appeal and Other Rights

Appeal Procedures. Any person aggrieved by a determination of eligibility or ineligibility for vocational rehabilitation services or by the furnishing or denial of services, including a decision relating to an OOS for services, may appeal. The individual may request a review informally, with a DVR supervisor, with mediation through a neutral third party to reach a compromise or agreement with DVR, or through a formal hearing where an impartial hearing officer (IHO) will hear the facts of the case and make a decision. An IHO must be a person who knows about DVR and the DVR process, but does not work for DVR, is not a member of the WRC, has not been involved in previous decisions regarding the individual, and does not have any personal or financial interest that may conflict with the IHO's obligation to be objective.

The appeal begins with a written request for a review, signed by the individual, stating what decision the individual wants reviewed and what the individual thinks the decision should have been. This written request must be filed with the DVR hearing coordinator within 12 months after the notice of a decision or action was mailed to the individual, or the appeal will be dismissed. The hearing coordinator then notifies all parties of the action. A hearing must be held within 45 days of the receipt of the hearing request by a hearing coordinator unless the hearing officer grants an extension for good cause at the request of either party.

If the individual chooses mediation to resolve the matter, the hearing coordinator will provide a list of trained mediators to try to reach an agreement between the individual and DVR. If the individual is not satisfied with mediation, he or she may still pursue a formal hearing. The time limit to hold the hearing is not delayed by mediation unless both the individual and DVR agree to a delay.

If the individual does not choose mediation or mediation is unsuccessful, then the hearing coordinator sends a letter to the individual identifying two IHOs. The IHO who is selected by the individual then asks the parties involved to participate in a prehearing interview to: (a) formulate a statement of the issue or issues presented by an appeal; (b) identify potential witnesses and receive motions; (c) confirm the scheduled hearing; or (d) clarify any other issues to be considered or excluded from a hearing. Participation in a prehearing is not required.

If the parties reach an agreement prior to the hearing, the IHO will notify the parties that the issue has been resolved by mutual agreement, and the appeal is dismissed. The notice must include a brief summary of the agreement and advise the parties that failure to meet the conditions of the agreement is grounds for a new hearing request. If either party objects to the proposal prior to the scheduled hearing, the hearing will be held without additional notice.

The formal hearing is closed to the public as a confidential matter unless the individual files a motion to open the hearing. Attendance by both parties is required. The individual may choose someone to represent him or her at the hearing and must file notice of representation. At the hearing, each side presents its case, including opening statements, any witnesses, rebuttals, and closing arguments. The hearing is tape recorded.

The IHO must issue a written decision within 10 days of any written motion that was filed and within 30 days of a hearing. The IHO provides a report of the hearing, including the findings and the grounds for the decision. The decision is final unless the DVR administrator acts to change the decision or the individual petitions the circuit court for review. The notice specifies the procedures for filing a claim in circuit court.

If the DVR administrator decides to perform a formal review of the IHO's decision, written notice of this decision must be filed with the parties by

certified mail within 20 days of the date that the decision of the hearing officer was mailed. Additional evidence and information relevant to the final decision may be filed with the DVR administrator not later than 30 days following the date of the intent to review notice, and the DVR administrator may also collect new evidence from other sources during that period.

The DVR administrator cannot modify a decision of an IHO which supports the position of the individual unless, based on clear and convincing evidence, the decision is clearly contrary to law or federal policy issuances. The DVR administrator may consult with the IHO regarding the decision. The DVR administrator must notify the parties in writing by certified mail of the outcome of the review within 30 calendar days after the date of the intent-to-review notice. The notice must state the findings, the grounds for the final decision, that it is the final decision unless modified by a court, and how to file a request for circuit court review.

Pending the decision of a hearing officer, DVR may not suspend, reduce, or terminate services under an IPE, unless the services were obtained through misrepresentation, fraud, collusion, or criminal conduct.

Client Assistance Program (CAP). Pursuant to federal law, CAP provides information about services for people with disabilities and provides assistance when a person is having difficulty receiving services that are funded under the Rehabilitation Act.

CAP serves people seeking services from DVR, American Indian vocational rehabilitation projects, or independent living centers in Wisconsin. These programs must inform a person of CAP services whenever; (a) a service is denied, reduced, or changed; (b) a person is found not eligible; or (c) a case is closed against the person's wishes.

CAP services include the provision of

information regarding services for people with disabilities, assistance with the determination of whether an individual is receiving appropriate services, assistance with resolving differences between an individual and the counselor or rehabilitation teacher, and assistance with an appeal or other legal remedy when appropriate services have been denied. CAP services are provided at no cost to individuals.

Confidential Information. No person may disclose, directly or indirectly, any information concerning any person who applies for or receives vocational rehabilitation services without the consent of the person, except when necessary for the administration of DVR or to carry out an individual's IPE. Any person who violates this requirement is subject to a fine of not more than \$500, imprisonment for not more than six months, or both.

Exceptions to this requirement include disclosing information: (a) in the administration of the DVR program; (b) of a summary or statistical nature; (c) to the individual for access to his or her own records; (d) as needed to protect the individual from physical harm to self or others; (e) in response to criminal investigations; (f) in response to a judicial order; or (g) when required by federal law for an approved audit, research, or evaluation purpose.

Other safeguards to protect confidential information include notification of confidentiality rights and responsibilities to those that have access to the case record, requiring requests by parties other than the individual to be in writing and to specify the information wanted and the purpose for which it will be used, assurances from a third party that receives confidential information that it will only be used for the purpose requested, and notice to a third party not to re-release the confidential information.

Other Rights and Responsibilities. Individuals are advised, in writing, of all of their rights,

including the availability of CAP, when they apply for services, when they are determined not eligible for services or do not meet the requirements of an open OOS category, when the IPE is prepared or amended, when services are denied, when a decision to close the case is made, and at any other time upon request by the individual during the process.

Each individual must have his or her responsibilities clearly defined as they relate to the rehabilitation process. Responsibilities vary according to the abilities of each individual and are defined within the counseling and guidance relationship.

Specialized Programs

DVR provides specific services tailored to the needs of individuals and employers. Several specialized programs have been created to serve groups of individuals who have specific needs in common. The following paragraphs provide a brief description of each of these programs.

Business Enterprise Program. The business enterprise program (BEP) is a program to locate, establish, supervise, and maintain a statewide small business program for blind persons. With the ultimate objective of enabling blind persons to operate their own businesses, DWD owns, leases, manages, supervises, provides consultative services to, or operates businesses that benefit blind persons. Typical BEP businesses include vending machine operations, snack bars, coffee shops, or full-service cafeterias.

To qualify for the BEP, individuals must: (a) have 20/200 vision or be blind; (b) be at least 18 years old and a United States citizen; (c) be able to lift up to 50 pounds; (d) be able to stand for long time periods; (e) be able to learn and apply business skills; (f) be responsible and independent; (g) successfully complete the BEP training

program; (h) project a professional appearance; (i) have a good credit report; and (j) be able to be bonded.

Prior to placement, successful completion of a BEP-sponsored training program is mandated. The training begins with several weeks of classroom instruction in pertinent areas of business management and food services. Classroom instruction is followed by an on-the-job evaluation at various BEP operations throughout the state.

The BEP began in 1936 with the Randolph-Sheppard Act. This federal law gave priority and preference to legally blind individuals in the operation of any vending or cafeteria service in a federally owned, funded, or leased facility. Wisconsin later enacted its own legislation to ensure that state government gives similar priority whenever establishing or re-contracting food service or vending operations.

Supported Employment (SE). Federal law defines SE as competitive work in integrated work settings, or employment in integrated work settings in which individuals are working toward competitive work, consistent with the strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of the individuals. SE is for individuals with the most significant disabilities for whom competitive employment has not traditionally occurred or has been interrupted or intermittent as a result of the significant disability, and who, because of the nature and severity of their disability, need intensive SE services (described above under "Program Services") in order to perform such work.

The SE program works with individuals with severe disabilities to match and train them for positions where an employer needs them.

Employers are provided services at no cost, including identification of job tasks, recruitment of employees, matching skills to job requirements, and training the new employee. SE specialists also provide ongoing assistance with supervision,

performance evaluations, and additional training or other support as needed.

SE jobs include data entry operator, utility worker, clerical worker, food service or preparation, messenger, day care center aide, assembly worker, maintenance or custodial worker, lawn care, animal caretaker, or mail clerk. These jobs are provided across a broad spectrum of industries, including hotels and motels, utility firms, hospitals and health care institutions, restaurants and fast-food outlets, insurance companies, manufacturers, electronic firms, medical supply manufacturers, banks and credit unions, horticulture and garden maintenance, and retail stores. Currently, there are over 5,000 SE employees.

TechWorks. TechWorks is a collaborative program among the area employers, educational institutions, and governmental agencies. Its mission is to help information technology (IT) students with disabilities develop and refine skills to enter the information technology field. The focus is in help desk, desktop support, and web-site development.

The program is guided by the Business Advisory Council. The professionals involved offer experience, insight, and knowledge of the field to individuals with disabilities preparing them for the needs and demands for a career in IT.

Telework Loan Program. The telework loan program is a statewide alternative loan program that allows Wisconsin residents with disabilities to purchase computers and other equipment needed to work from home or from other sites away from the office.

Loan amounts range from \$500 to \$50,000. The actual loan amount depends on the item purchased and the applicant's ability to repay. Criteria in considering loan approval are more flexible than most commercial loans. Therefore, a poor credit record does not disqualify an applicant. Instead,

the reason for poor credit is taken into consideration.

In considering approval for the loan, the application will be considered more favorably if the loan assists the applicant in doing at least one of the following: (a) begin telework for an employer when previously unemployed; (b) increase income in an existing job through telework; (c) remain employed at the applicant's current level and prevent job loss or a reduction in earnings through telework; (d) begin working at home to accommodate the disability; or (e) initiate or expand home-based self-employment with an approved business plan.

Loan proceeds may be used for the purchase of equipment, training to use equipment, extended warranties, and the cost of maintenance and repairs. Examples of items that may be purchased include computers, printers, software, scanners, fax and office machines, tools and equipment, telecommunication devices, office furniture, home modifications to create an accessible home office, and assistive technology that enables an individual with a disability to work at home.

Ticket to Work. An individual who receives SSI or SSDI receives a ticket from the Social Security Administration (SSA). If the individual wants to go to work, the ticket may be used to get employment services from DVR or another approved employment network. The goal of the Ticket to Work program is to help the individual go to work so that SSI or SSDI is no longer needed. If the goal is reached, the SSA provides funds to the employment network to reimburse costs for the successful vocational rehabilitation of SSI or SSDI recipients.

Individuals not expected to medically recover, according to SSA guidelines, who receive disability cash benefits, who are 18 years of age, and who have been evaluated under the adult disability guidelines will receive a ticket. Participation in the program is voluntary. Tickets are valid as long as

the individual is receiving cash benefits from the SSA.

The SSA has contracted with Maximus, Inc. to manage the Ticket to Work program. A ticket holder may use the ticket at an employment network that is approved by Maximus, Inc. DVR is one of the employment networks that a ticket holder may choose.

DVR contracts with AAATakeCharge, a private employment network, to administer its Ticket to Work program for successfully rehabilitated disability cash recipients when the cost of a successful rehabilitation is less than \$10,000. Under the contract, if the disability cash recipients bring their ticket to AAATakeCharge, the recipient receives a portion of the social security reimbursement funds. Under the contract, for SSI recipients, the reimbursement is distributed as follows: (a) 19% to DVR; (b) 16% to AAATakeCharge; and (c) 65% to the recipient. For SSDI recipients, the reimbursement is distributed as follows: (a) 46.37% to DVR; (b) 14.2% to AAATakeCharge; and (c) 39.43% to the recipient. Because DVR cannot give individuals cash payments after their rehabilitation programs have concluded, this agreement allows AAATakeCharge to give individuals a portion of the social security reimbursements for their successful rehabilitation.

However, if the rehabilitation costs are more than \$10,000, then DVR retains the entire reimbursement amount. Social security reimbursement funds are discussed below in further detail under the section "Social Security Reimbursements."

Transition Services. Transition services are a coordinated set of activities provided to students to promote movement from high school to post-secondary education, training, or employment. The IPE is based on the individual student's needs, taking into account the student's preferences and interests, and includes instruction, community experiences, the development of employment and other post-school adult living objectives, and, when

appropriate, acquisition of daily living skills and a functional vocational evaluation. DVR works with the Department of Public Instruction, the University of Wisconsin System, and the Wisconsin Technical College System to assist in the transition and to ensure that necessary services are in place before the student leaves high school.

Wisconsin Rehabilitation Council

The Rehabilitation Act of 1973, as amended, requires the creation, by each state, of a Rehabilitation Council. Table 2 lists the requirements of the Rehabilitation Council under federal law. The Wisconsin Rehabilitation Council (WRC) performs these functions in Wisconsin.

The WRC monitors service data, fiscal data, the OOS waiting list, and systemic issues, such as working with job centers and other state agencies. In July, 2004, the WRC established the following priorities: (a) ending government disincentives to employment; (b) ending the use of DVR funds to cover accommodation costs for college students; (c) improving training for DVR counselors; (d) improving access to job centers; (e) improving services for Wisconsin Works (W-2) recipients with disabilities; (f) monitoring service outcomes for specific groups; (g) improving services and outcomes for individuals with the most significant disabilities; and (h) improving DVR communication with vendors and other community partners.

The WRC currently consists of 19 members who are appointed to staggered three-year terms by the Governor. Under federal law, members must include: (a) at least one representative of the statewide Independent Living Council; (b) at least one representative of a parent training and information center; (c) at least one representative of the client assistance program; (d) at least one qualified vocational rehabilitation counselor; (e) at least one representative of community rehabilitation program service providers; (f) four

Table 2: Requirements of the Rehabilitation Council under the Rehabilitation Act of 1973

- Review, analyze, and advise the designated state unit (DVR in Wisconsin) regarding the performance of its responsibilities, including eligibility, extent and effectiveness of services, and functions performed by state agencies that affect or that potentially affect the ability of individuals with disabilities in achieving employment outcomes;
- In partnership with the designated state unit, develop, agree to, and review state goals and priorities, as well as evaluate the effectiveness of the vocational rehabilitation program and submit progress reports;
- Advise the designated state unit regarding activities authorized to be carried out and assist in the preparation of the state plan and its amendments, applications, reports, needs assessments, and evaluations;
- Conduct a review and analysis of the effectiveness of, and individual satisfaction with, the functions performed by the designated state agency, services provided by the state agencies and other public and private entities, and employment outcomes achieved by eligible individuals, including the availability of health and other employment benefits in connection with employment outcomes;
- Prepare and submit an annual report on the status of vocational rehabilitation programs operated within the state, and make the report available to the public;
- Avoid duplication of efforts and enhance the number of individuals served;
- Provide for coordination and the establishment of working relationships; and
- Perform other comparable functions as appropriate.

representatives of business, industry, and labor; (g) representatives of disability advocacy groups representing a cross-section of individuals with physical, cognitive, sensory, and mental disabilities and of these individuals' representatives; (h) current or former applicants for, or recipients of, vocational rehabilitation services; (i) at least one representative of the directors of projects involving Indian tribes, if the state has any such projects; (j) at

least one representative of the educational agency responsible for the public education of students with disabilities who are eligible to receive services; and (k) at least one representative of the state workforce investment board.

Program Participation

This section provides information regarding the population receiving DVR services in the state. During federal fiscal year (FFY) 2005, there were 36,917 individuals involved with DVR, including individuals on the OOS waiting list. New applicants totaled 13,556, and 3,078 individuals achieved an employment outcome.

Tables 3 through 7 show the population of DVR individuals by the OOS category, disability type, age group, type of job, and employment outcome in FFY 2005. The information provided in the following tables was obtained from the WRC 2005 Annual Report and from DWD.

Table 3 shows that the majority of DVR individuals in FFY 2005 were placed in OOS Category 2. Individuals in Category 1 have the most significant disabilities and receive priority. Approximately one-third of DVR individuals were placed in Category 1. Table 4 indicates that almost half of DVR individuals in FFY 2005 have either orthopedic or mental illness disabilities. Only 3.0% of DVR individuals have a visual disability.

Table 3: Caseload by Order of Selection Categories -- FFY 2005

OOS Category	Number of Individuals	Percent of Total
Category 1	12,283	33.3%
Category 2	19,397	52.5
Category 3	1,208	3.3
Not Classified	<u>4,029</u>	<u>10.9</u>
Total	36,917	100.0%

Table 4: Caseload by Disability Type -- FFY 2005

Disability	Number of Individuals	Percent of Total
Alcohol/Drug	740	2.0%
Blind/Visual	1,108	3.0
Brain Injuries	802	2.2
Cognitive	6,276	17.0
Deaf/Hard of Hearing	1,440	3.9
Learning Disabilities	3,323	9.0
Mental Illness	7,753	21.0
Orthopedic	10,337	28.0
Other Physical	1,477	4.0
Unknown	<u>3,661</u>	<u>9.9</u>
Total	36,917	100.0%

Table 5: Caseload by Age Group -- FFY 2005

Age Group	Number of Individuals*	Percent of Total
14 and under	0	0.0%
15 - 19	3,692	10.0
20 - 24	6,645	18.0
25 - 34	6,276	17.0
35 - 44	8,491	23.0
45 - 54	8,491	23.0
55 - 59	2,215	6.0
60 - 64	738	2.0
65 and older	<u>369</u>	<u>1.0</u>
Total	36,917	100.0%

*Number of individuals was extrapolated from the percentage in each age group and may not be exact.

Table 6: Caseload by Type of Job -- FFY 2005

Type of Job	Number of Individuals	Percent of Total
Agricultural, Fishing, and Forestry	110	3.6%
Bench Work	126	4.1
Clerical and Sales	691	22.4
Machine Trades	165	5.4
Miscellaneous	278	9.0
Processing	74	2.4
Professional, Technical, and Managerial	535	17.4
Service	925	30.0
Structural Work	166	5.4
Unpaid Homemaker	<u>8</u>	<u>0.3</u>
Total	3,078	100.0%

Table 7: Caseload by Employment Outcome -- FFY 2005

Employment Outcome	Number of Individuals	Percent of Total
Business Enterprise Program	2	0.1%
Homemaker	10	0.3
Self-Employment	115	3.7
Supported Employment	463	15.1
Wage or Salaried Worker	<u>2,488</u>	<u>80.8</u>
Total	3,078	100.0%

Table 5 shows that nearly half of the DVR individuals in FFY 2005 were between the ages of 35 and 54. No individuals were below the age of 14 and few were over the age of 60. Table 6 indicates that of the individuals who achieved an employment outcome, over half in FFY 2005 were employed in either the service industry or in clerical and sales. Table 7 shows that of the individuals who achieved an employment outcome, most achieved an employment outcome by becoming a wage or salaried worker.

As indicated in the introduction above, 10.8% of working age individuals in Wisconsin reported a disability in FFY 2005 and 44.2% of these individuals were employed. Attachments 10 and 11 show how these percentages compare with other states. Attachment 10 shows the prevalence of disabled individuals of working age for all states, the District of Columbia, and the United States. Attachment 11 indicates the employment rate of disabled individuals of working age for all states, the District of Columbia, and the United States. Attachment 11 also shows the employment rate of individuals without disabilities.

Wisconsin ranks 11th for the lowest percentage of working-age people with disabilities, tied with California. New Jersey has the lowest percentage of working-age people with disabilities at 9.4%, while West Virginia has the highest percentage of working-age people with disabilities at 21.7%. The national average was 12.6%.

Wisconsin ranks 12th for the highest employment rate of working-age people with disabilities, tied with Idaho. North Dakota ranked first at 55.2%, while West Virginia had the lowest employment rate for working-age people with disabilities at 25.5%. The national average was 38.1%

Program Funding

Vocational Rehabilitation Revenue

The primary source of funding for the vocational rehabilitation program is a federal grant provided under the Rehabilitation Act of 1973, as amended. Additional funding is provided in the form of state matching funds at the rate of 21.3% of state funds to 78.7% of federal funds. The state match of 21.3% is the same for all states and is required to receive the federal grant.

Allocation of federal funds is based on a formula under the Rehabilitation Act of 1973, as amended. The formula is, in part, population-based. Table 8 shows the allocation for Wisconsin from FFY 2001 through FFY 2007. Attachment 12 compares the allocation for Wisconsin with the allocation for other states in FFY 2006 and FFY 2007.

As Attachment 12 shows, the federal grant is authorized an annual increase in funding. This

Table 8: Wisconsin Vocational Rehabilitation Grant -- FFY 2001 through FFY 2007

Federal Fiscal Year	Grant Amount
2001	\$48,640,100
2002	49,581,600
2003	50,917,300
2004	51,503,700
2005	52,012,100
2006*	52,853,700
2007*	54,832,000

*Estimated grant allocation amounts.

increase in funding is based on the percentage change in the consumer price index. It is estimated that the overall percentage increase in FFY 2007 over FFY 2006 will total 4.3%. The percentage increase for Wisconsin will total 3.7%. As the federal grant increases, the corresponding state matching funds need to be increased.

State matching funds have been provided through general purpose revenue (GPR) and program revenue (PR) funds in DVR, cooperative arrangements, which are discussed further below, and tribal gaming compact monies, which are allocated specifically for vocational rehabilitation services for Native Americans. Program revenue funds include gifts and grants in the form of small donations from private citizens. Table 9 shows state GPR and PR matching funds provided for FFY 2005, 2006, and 2007.

Cooperative Arrangements. Cooperative arrangements generally involve an agreement between DVR and another governmental agency to

Table 9: Federal Vocational Rehabilitation Allotment and State Matching Funds -- FFY 2005 through FFY 2007

Federal Fiscal Year	Federal Allotment	Total Required Match	State GPR and PR Matching Funds	American Indian Gaming Revenue	Estimated Cooperative Arrangement Matching Funds
2005	\$52,012,100	\$14,077,000	\$13,433,200	\$378,800	\$265,000
2006	52,853,700	14,304,700	13,954,700	350,000	0
2007	54,832,000	14,840,200	14,490,200	350,000	0

Table 10: Cooperative Arrangement Related Funding and Total Funding for Vocational Rehabilitation Services -- FFY 2000 through FFY 2005

Federal Fiscal Year	Cooperative Arrangement Match	Federal Matching Funds	Total Cooperative Arrangement Funds	Total Case Services	Cooperative Arrangement as a Percent of Total Services
2000	\$1,364,200	\$5,040,700	\$6,404,900	\$35,599,100	18.0%
2001	1,500,100	5,542,500	7,042,600	35,655,500	19.8
2002	486,800	1,798,500	2,285,300	36,814,100	6.2
2003	72,200	267,000	339,200	37,096,300	0.9
2004	218,000	805,300	1,023,300	38,452,100	2.7
2005	265,000	979,300	1,244,300	39,571,500	3.1

provide state matching funds to cover the gap between the state GPR and PR matching funds and the amount of state match required to capture the full federal grant. Federal regulations authorize states to use cooperative arrangements to provide matching funds for federal monies.

Under the agreement, DVR contracts with another agency or organization to provide services. In return, the agency or organization typically agrees to provide a rehabilitation service and the 21.3% in matching funds required to capture the federal funds. As a result, the services that a vocational rehabilitation counselor might otherwise purchase for an individual with state GPR or PR funds are provided through an agreement with a third-party agency or organization.

Cooperative arrangements have been used to decrease reliance on state GPR to provide matching funds for the federal grant. Table 10 shows the use of funding through cooperative arrangements from FFY 2000 through FFY 2005.

The use of cooperative arrangements, however, has proven to be controversial. Advocates of cooperative arrangements indicate that they can provide new ways to serve people with the most significant disabilities and can be used to create more effective services for specific disability groups with very high unemployment rates.

On the other hand, one criticism is that services purchased through the contracts do not always

match the needs of individual individuals. In addition, many of the contracted services are not directed at severely disabled individuals. For example, a contract for interpreter services will not benefit people with orthopedic impairments. In other cases, the services may match individual needs, but are provided at a location some distance from the individual. Finally, it is generally more expensive to provide rehabilitation services through cooperative arrangements. A 1998 analysis by DVR staff determined that it cost \$5,100 per rehabilitation when some third-party services were used while the cost per rehabilitation was \$2,800 when no third-party services were used.

As a result of the concerns related to cooperative agreements, 2005 Wisconsin Act 25 (the 2005-07 biennial budget act) provided sufficient GPR to eliminate the need for their use. Matching funds from cooperative arrangements were not used in SFY 2005-06 or SFY 2006-07.

Social Security Reimbursements. Additional funding for DVR is received through reimbursements from the SSA for the successful vocational rehabilitation of each individual who receives either SSI or SSDI such that the individual earns wages and no longer receives benefits from the SSA. Social security reimbursement funds can be used to purchase services for disabled individuals, but cannot be used as a match for other federal funds. These reimbursements are authorized under either the Ticket to Work and Work Incentives Improvement Act of 1999 (TWWIIA) or under Title II of the Social Security Act.

The TWWIIA authorizes payment to employment networks for outcomes and long-term results through an outcome payment system or an outcome-milestone payment system. The outcome payment system provides payment to employment networks of up to 40% of the average monthly disability benefit for each month benefits are not paid to the beneficiary due to work, not to exceed 60 months. The outcome-milestone payment system is similar, except it provides for early payments based on the achievement of one or more milestones directed towards the goal of permanent employment.

Under Title II of the Social Security Act, the SSA reimburses state vocational rehabilitation agencies for the reasonable and necessary costs of services that resulted in SSI or SSDI recipients being successfully rehabilitated. Each recipient must achieve substantial gainful activity for nine months. For FFY 2006, substantial gainful activity means earning over \$860 per month, after deducting allowable work expenses, for nine out of 12 months.

DVR has the option of receiving its social security reimbursement funds from the SSA under the TWWIIA or under Title II of the Social Security Act. DVR has chosen to accept its reimbursements under Title II of the Social Security Act to receive its full costs of successful rehabilitation of individuals who received SSI or SSDI.

From the social security reimbursement funds DVR receives, Act 25 requires DVR to transfer \$600,000 annually to the Department of Health and Family Services (DHFS) to provide funding for grants to independent living centers (ILCs), which provide nonresidential services to individuals of any age with any disability.

Prior to Act 25, DVR was required to transfer up to \$300,000 annually to DHFS from social security reimbursement funds for grants to ILCs. Therefore, if DVR received less than \$300,000 annually, it could transfer less than \$300,000 to

DHFS. Pursuant to Act 25, DVR is required to transfer \$600,000 annually regardless of the amount received from social security reimbursement funds.

Table 11 shows social security reimbursement distributions to DVR for FFY 2001 through FFY 2006.

Table 11: Social Security Reimbursement Payments -- FFY 2001 through FFY 2006

Fiscal Year	Amount
2001	\$615,200
2002	1,438,300
2003	674,800
2004	386,300
2005	428,600
2006	1,456,800

Although the amount of social security reimbursements received in FFY 2004 and FFY 2005 was well below \$600,000, the amount of reimbursements increased in FFY 2006. As a result, DVR has been able to transfer \$600,000 from social security reimbursement funds pursuant to Act 25.

Vocational Rehabilitation Expenditures

Funding for the vocational rehabilitation program is expended on the administration of the program and on services for the individuals served by the program. Table 12 shows the allocations for

Table 12: DVR Administration and Case Services Allocations FFY 2005 and FFY 2006

Federal Fiscal Year	Fund Source	Administration	Case Services	Total
2005	Federal	\$20,869,500	\$31,142,600	\$52,012,100
	State Match	<u>5,648,300</u>	<u>8,428,700</u>	<u>14,077,000</u>
	Total	\$26,517,800	\$39,571,300	\$66,089,100
2006	Federal	\$19,814,100	\$33,039,600	\$52,853,700
	State Match	<u>5,362,600</u>	<u>8,942,100</u>	<u>14,304,700</u>
	Total	\$25,176,700	\$41,981,700	\$67,158,400

administration and for case services by federal funds and state match for FFY 2005 and FFY 2006.

Federal regulations allow states to obligate the funds within one year and to spend the funds within two years. As a result, expenditures for a federal award are not confined to a 12-month period. Therefore, expenditures for any given federal fiscal year may not equal the amount of the federal allotment and state match for that year.

In FFY 2005, \$39,571,500 was expended for case services. Of this amount, the following expenditures were made in FFY 2005: (a) \$635,300 for a Native American Project; (b) \$1,244,300 for third party grants; and (c) \$2,231,500 for miscellaneous expenses during eligibility determination before a disability is documented. Tables 13 through 15 show the remaining expenditures (\$35,460,400) by OOS category, by disability, and by service type.

Table 13 shows expenditures by OOS category, as well as each category's percentage of overall expenditures. As indicated above, Category 1 consists of individuals with the most significant disabilities and must be served first. Category 2 consists of individuals with significant disabilities, but not the most significant. Category 3 consists of individuals with non-significant disabilities. Over half of the expenditures on services were for Category 2 individuals.

Table 14 shows expenditures by disability for FFY 2005. Table 14 also shows each disability's percentage of overall expenditures.

Over half of the case services expenditures are for orthopedic disabilities (39%) and mental illnesses (19%). Less than 3% of case services expenditures are for disabilities related to alcohol and drugs (0.9%) and to brain injuries (1.5%).

Table 13: Expenditures by Order of Selection -- FFY 2005

Category	Amount	Percent of Total
Category 1	\$15,320,100	43.2%
Category 2	19,247,700	54.3
Category 3	859,000	2.4
Not Classified/Other	<u>33,600</u>	<u>0.1</u>
Total	\$35,460,400	100.0%

Table 14: Case Services Expenditures by Disability -- FFY 2005

Disability	Amount	Percent of Total
Alcohol/Drug	\$330,100	0.9%
Blind/Visual	2,345,500	6.6
Brain Injuries	538,000	1.5
Cognitive	4,321,200	12.2
Deaf/Hard of Hearing	2,484,800	7.0
Learning Disabilities	2,600,000	7.3
Mental Illness	6,607,800	18.6
Orthopedic	13,838,700	39.1
Other Physical	2,045,100	5.8
Unknown	<u>349,200</u>	<u>1.0</u>
Total	\$35,460,400	100.0%

Approximately 14% of case services expenditures relate to hearing and/or visual impairments.

Table 15 shows expenditures by service provided for FFY 2005. Table 15 also shows each service category's percentage of overall expenditures.

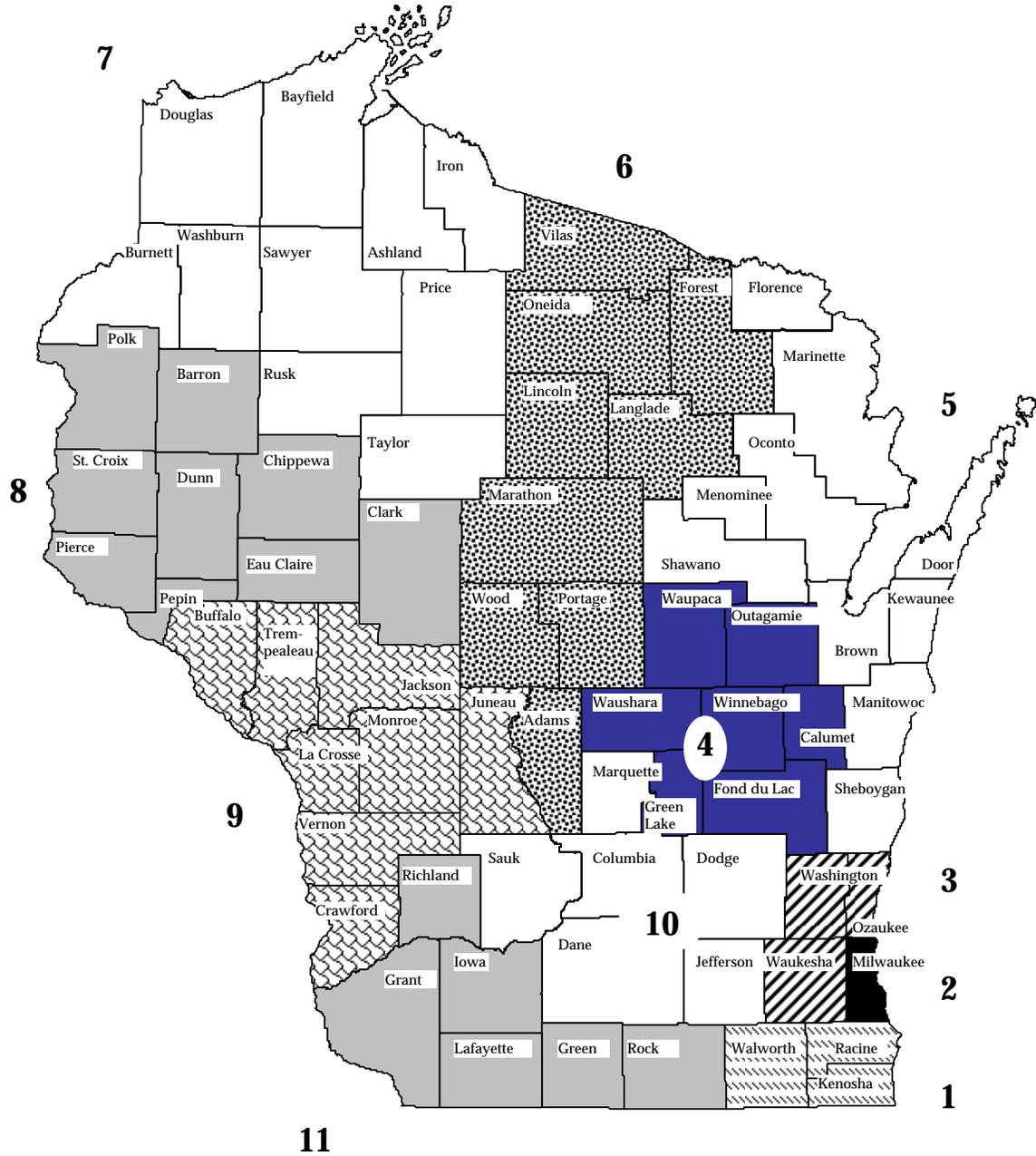
Over one-half of case services expenditures relate to training and assistive technology. Job referrals and post-employment services required the least amount of funding.

**Table 15: Case Services Expenditures by Service Type
-- FFY 2005**

Case Service Type	Amount	Percent of Total
Assessment	\$1,641,500	4.6%
Guidance and Counseling	304,200	0.8
Job Referral	32,100	0.1
Job-Related Services	2,526,800	7.1
Vocational and Training Services	15,332,800	43.2
Diagnosis and Treatment	784,200	2.2
Maintenance for Additional Costs	1,026,400	2.9
Transportation	2,694,500	7.6
Interpreter Services	139,400	0.4
Services for Blind	416,900	1.2
Licenses and Supplies	1,442,800	4.1
Self-Employment	778,900	2.2
Assistive Technology	2,860,300	8.1
Supported Employment	2,108,100	5.9
Family Services	456,800	1.3
Post-Employment Services	20,700	0.1
Work Experience	1,311,200	3.7
Other Goods, Services, and Assistance	<u>1,582,800</u>	<u>4.5</u>
Total	\$35,460,400	100.0%

ATTACHMENT 1

Vocational Rehabilitation Workforce Development Areas



ATTACHMENT 2

Statutory Requirements of the Vocational Rehabilitation Program

Under Chapter 47 of the Wisconsin Statutes, DVR is required to:

- a. make vocational rehabilitation services available in every county to all persons with disabilities who are present in the state, regardless of residency;
- b. provide that persons with severe disabilities will receive priority for services;
- c. advise and assist any person with a disability who applies to DVR concerning his or her rehabilitation;
- d. provide full and prompt consultation with, and diagnostic study for, each person who applies to DVR to determine if a vocational rehabilitation plan is feasible;
- e. acquaint each person for whom a vocational rehabilitation program is feasible with DVR services, counsel the person concerning selection of a suitable vocation, assist the person in identifying vocational needs, and provide services necessary for vocational rehabilitation;
- f. register and keep records for each person who uses DVR services;
- g. provide medical or other evaluations at no cost to the applicant to determine the applicant's eligibility for DVR services;
- h. provide assessment and evaluation services appropriate to each individual, develop an individualized written rehabilitation program with each person with a disability, and develop and supervise services that are part of the vocational rehabilitation program of any person with a disability;
- i. assure that eligibility for DVR services is determined without regard to the sex, race, age, creed, color, or national origin of the individual applying for services, that no class of individuals is found ineligible solely on the basis of type of disability, and that no age limitations for eligibility exist which, by themselves, would result in ineligibility for DVR services;
- j. aid persons with disabilities in securing the services needed to make them more employable, place persons with disabilities in suitable occupations, and provide post-employment services necessary to maintain employment;
- k. consider the views of persons who receive DVR services or their parents, guardians, or legal custodians and of vocational rehabilitation professionals and providers of DVR services concerning general policy administration of the DVR program;
- l. provide DVR services to blind and visually impaired persons, appropriate to each individual;
- m. maintain current records and statistics on all blind and visually impaired persons in the state concerning vocational rehabilitation, rehabilitation teaching, and other services provided and the results achieved in order to plan its services to blind and visually impaired persons;
- n. maintain a cooperative relationship with counties to assist in administering and providing uniform services to blind and visually impaired persons throughout the state, to prevent duplication of effort, and to ensure that blind and visually impaired persons receive adequate services;

ATTACHMENT 2 (continued)

Statutory Requirements of the Vocational Rehabilitation Program

o. promote the establishment of local resources for the vocational rehabilitation of persons with disabilities;

p. except as provided under (q), determine the financial need of persons with disabilities based upon a uniform fee schedule for the provision or purchase of DVR services specified in the rehabilitation program developed for the person with a disability;

q. assure that no financial needs test is applied as a condition for the provision of counseling, guidance, referral and job placement services--those services are provided at no cost to persons eligible for DVR services; and

r. report to the U.S. Department of Education as required under the Rehabilitation Act of 1973, as amended.

ATTACHMENT 3

Examples of Disabilities That Could Require DVR Services

AIDS/HIV
Alcohol or Other Drug Disorder
Amputation
Arthritis
Attention Deficit Disorder

Autism
Back Injury
Blindness or Visual Impairment
Brain Injury
Cancer

Carpal Tunnel (Repetitive Use Syndrome)
Cerebral Palsy
Cystic Fibrosis
Deaf or Hard of Hearing
Depression

Diabetes
Epilepsy
Fibromyalgia
Heart Disease
Hemophilia

Hip/Knee/Other Joint Dysfunction
Kidney Failure
Mental Illness
Mental Retardation
Missing or Deformed Limb

Multiple Sclerosis
Muscular Dystrophy
Myofascial Disorder
Paraplegia or Quadriplegic
Post Traumatic Stress Disorder

Respiratory/Pulmonary/Allergies
Severe Arthritis
Specific Learning Disability
Spinal Cord Injury
Stroke

ATTACHMENT 4

DVR Sites

Workforce Development Area 1

- Kenosha County Job Center, Kenosha
- Racine County Service Center, Burlington
- Racine County Workforce Development Center, Racine
- Division of Vocational Rehabilitation, Burlington
- Walworth County Job Center, Elkhorn

Workforce Development Area 2

- Milwaukee Job Center Teutonia
- Milwaukee Job Center South (UMOS)
- Milwaukee Central City Initiative
- Milwaukee Southeast Office

Workforce Development Area 3

- Workforce Development Center, Mequon
- Workforce Development Center, West Bend
- Waukesha State Office Building, Waukesha
- Workforce Development Center, Pewaukee

Workforce Development Area 4

- Calumet County Courthouse, Chilton
- Fond du Lac Area Job & Career Center, Fond du Lac
- Berlin Job Center, Berlin
- Fox Cities Workforce Development Center, Menasha
- Waupaca County Courthouse, Waupaca
- Waushara Area Job Center, Wautoma
- Oshkosh Area Workforce Development Center, Oshkosh
- Clintonville Office, Clintonville

Workforce Development Area 5

- Green Bay State Office Building, Green Bay
- Door County Job Center, Sturgeon Bay
- Manitowoc County Job Center, Manitowoc
- Wisconsin Job Center, Marinette
- Shawano County Job Center, Shawano
- Sheboygan County Job Center, Sheboygan
- Keshena Job Center, Keshena

Workforce Development Area 6

- Mid-State Technical College, Adams
- Northern Advantage Job Center, Rhinelander
- Marathon County Job Center, Wausau
- Wisconsin Job Center, Stevens Point
- Wisconsin Job Center, Marshfield
- Wisconsin Job Center, Wisconsin Rapids
- Antigo Job Center, Antigo

Workforce Development Area 7

- Ashland Job Center, Ashland
- Wisconsin Job Center, Superior
- Wisconsin Job Center, Spooner
- Wisconsin Job Center, Ladysmith
- Wisconsin Job Center, Hayward
- Wisconsin Job Center, Medford
- Phillips Job Center, Phillips
- Siren Job Center, Siren

Workforce Development Area 8

- Barron County Job Center, Rice Lake
- Chippewa County Job Center, Chippewa Falls
- Clark County Job Center, Neillsville
- Dunn County Job Center, Menomonie
- Eau Claire County Job Center, Eau Claire
- Polk County Job Center, Balsam Lake
- St. Croix Valley Job Center, River Falls
- Durand Job Center, Durand
- Ellsworth Job Center, Ellsworth

Workforce Development Area 9

- Division of Vocational Rehabilitation, La Crosse
- Wisconsin Job Center, Prairie du Chien
- Wisconsin Job Center, Sparta
- Wisconsin Job Center, Viroqua
- Black River Falls Job Center, Black River Falls
- Mauston Job Center, Mauston

Workforce Development Area 10

- Columbia County Job Center, Portage
- Dane County Job Center, Madison
- Dodge County Job Center, Beaver Dam
- Workforce Development Center of Jefferson County, Jefferson
- Marquette County Job Center, Montello
- Sauk County Job Center, Baraboo

Workforce Development Area 11

- Wisconsin Job Center, Platteville
- Grant County Job Center, Lancaster
- Pleasant View Complex, Monroe
- Iowa County Job Center, Dodgeville
- Richland County Job Center, Richland Center
- Rock County Job Center, Janesville

ATTACHMENT 5

Self Assessment Eligibility Worksheet Sample Questions

- Does your disability make it difficult for you to get to and from places, especially to and from work? For example:
 - Do you need assistance walking?
 - Does your disability make it difficult for you to drive or limit your driving?
 - Do you need assistance leaving your home?
 - Do you need assistance following directions or a map?
 - Do you need assistance getting into stores or public buildings?
 - Does your disability make it difficult for you to use public transportation?

- Does your disability make it difficult for you to communicate in the way you need to communicate at work? For example:
 - Do others need assistance to understand what you are saying?
 - Do you need assistance to hear or understand what others are saying to you?
 - Do you need assistance using the phone? Do you use a TTY (text telephone for the deaf or hard of hearing), phone amplifier, or relay messages through others?
 - Do you need assistance either writing or reading text? Do you use Braille or speech synthesis?
 - Do you have difficulty explaining to others what you need?

- Does your disability make it difficult for you to get ready to go to work or to take care of yourself while you are working? For example:
 - Do you need assistance getting dressed for work?
 - Do you need assistance with bathing or grooming to go to work?
 - Do you need assistance preparing food or eating?
 - Do you need assistance toileting?
 - Do you need assistance with handling money (making change, knowing how to use vending machines, knowing how to budget your paycheck and pay bills, etc.)?
 - Do you sometimes refuse or forget to take your medications?
 - Have you attempted suicide?
 - Do you have a guardian or legal payee?
 - Are you under a commitment order?

- Does your disability make it difficult for you to make realistic decisions or plans? Does your disability make it difficult for you to follow through with your plans?

- Does your disability make it difficult for you to get along with others at work? For example:
 - Do you have difficulty controlling your emotions (outbursts of anger, crying, laughing, giggling)?
 - Do you usually have problems getting along with supervisors, teachers, or others in authority?
 - Have you been asked to leave a store or office because of how you acted?
 - Do you feel lonely or unable to fit in at work?
 - Do your co-workers pick on you or make fun of you?

- Does your disability make it difficult for you to work full-time or perform all the physical duties of most jobs?

- Has your disability caused you to have a poor work record?

- Has your disability made it difficult for you to learn new job skills?

- Have you lost a job because you became disabled or were injured?

ATTACHMENT 6

Partner Agencies

State Agencies

- Department of Health and Family Services
- Department of Workforce Development, Division of Workforce Solutions
- Department of Transportation

Educational Institutions

- University of Wisconsin System
- Wisconsin Technical College System
- Wisconsin's Private Schools
- Department of Public Instruction

Other State and National Organizations

- Department of Education Rehabilitation Services Administration
- Department of Labor/Employment and Training Administration
- Council of State Administrators of Vocational Rehabilitation
- Wisconsin Client Assistance Program
- Wisconsin Rehabilitation Council
- Wisconsin State Independent Living Council
- Elected Committee of the Business Enterprise Program

American Indian Programs and Services

- Great Lakes Inter-Tribal Council
- Lac Courte Oreilles Vocation Rehabilitation
- Oneida Nation VR Project

Community Partnerships

- Rehabilitation for Wisconsin
- Wisconsin Coalition of Independent Living Centers
- Wisconsin Older Worker Network

ATTACHMENT 7

DVR Maximum Fee Schedule Effective December 1, 2006

<u>Goods or Services</u>	<u>Fee</u>	<u>Additional Restrictions</u>
Computers	Up to \$1,200	Includes CPU, keyboard, monitor, printer, modem, and basic software. Does not include cost of assistive or rehabilitation technology devices or software. Must compare prices among vendors.
Initial Stocks and Supplies	Up to \$1,000	This is for initial supplies only. Ongoing purchase of supplies is not allowed.
Medical Services to Improve Functioning if Required to Achieve Employment Outcome	See comments at right.	Use medical assistance approved price list. If procedure or item not on list, obtain three price estimates.
Occupational Tools and Equipment	Up to \$3,000	Obtain three estimates.
Transportation	1. Cost of public transportation 2. Reimbursement at 32¢ per mile	Public transportation is the preferred method of transportation. All individuals receiving mileage reimbursement must submit monthly mileage logs. Failure to do so will result in a suspension of payments. It will be the responsibility of the individual to budget and plan for the use of the mileage rate so as to make sure that transportation is available to them. DVR will not participate in costs associated with insurance, maintenance, or repair of vehicles. These will be the responsibility of the individual. Failure to plan for these contingencies may result in a discontinuation of transportation payments. Transportation costs to support post secondary training are included in the DVR training grant. Additional DVR funding for transportation cost to support post secondary training requires either the individual or DVR counselor to request approval by the DVR Workforce Development Area Director of an exception.
Child Care	County approved rate	Use the county approved rate under the Wisconsin Shares child care subsidy program for child care reimbursement at the 100% level.
Maintenance	Actual increased costs	Maintenance for relocation. Maintenance costs to support post secondary training are included in the DVR training grant. Additional DVR funding for maintenance costs to support post secondary training requires either the individual or DVR counselor to request approval by the DVR Workforce Development Area Director of an exception.

ATTACHMENT 8

Request for an Exception to DVR Maximum Fee Schedule

Process to Request an Exception

- a. The DVR counselor and the individual, or the individual's representative, must discuss the need for an exception to the maximum fee schedule.
- b. Either the DVR counselor or the individual may request an exception to the DVR maximum fee schedule.
- c. The DVR counselor reviews the request and submits it in writing, or by e-mail, to the DVR WDA Director, with a copy to the WDA VR Supervisor, with a recommendation and rationale for approval or denial.
- d. The DVR WDA Director consults, as needed, with other WDA Directors to assure statewide consistency.
- e. The DVR WDA Director makes a decision and documents the decision.
- f. The individual is informed in writing of the decision and the reasons for the decision within 10 days from the date the request for an exception was submitted. The individual is also informed of the availability of CAP and appeal rights if the request for exception is denied.
- g. The DVR WDA Director submits the decision to DVR.
- h. DVR reviews all decisions on a quarterly basis to assure consistent and appropriate implementation of DVR policy and the exception request process.

Questions to Address in the Request for an Exception

- a. What service is requested and what policy or fee schedule must be addressed for this exception?
- b. Is the exception necessary for the plan for employment to continue? If yes, explain.
- c. What comparable benefits have been considered before requesting the exception?
- d. What steps has the individual taken to address or resolve the need for an exception and prevent its recurrence?
- e. What steps has the DVR counselor or agency taken to address or resolve the need for an exception and prevent its recurrence?

ATTACHMENT 9

Services That Require Prior Authorization and Associated Fees

Benefits Analysis Fee

\$300/Analysis Meeting and Report	Informed Choice Benefits Analysis: Payable upon completion of the analysis, meeting with individual and report to individual and DVR staff. The individual is to decide whether to pursue an IPE. In accordance with the technical specifications, the service is to be completed within one month of referral.
\$650/Analysis Meeting and Report (if informed choice analysis provided, pay balance of \$350)	In-Depth Benefits Analysis: Payable upon completion of the analysis, meeting with individual and report to individual and DVR staff. In accordance with the technical specifications, the service is to be completed within two months of referral.
\$650/approved plan	SSA-Approved PASS Plan: Payable upon verification of SSA approval of plan.

Job Development Fees

\$900	Hire in a job meeting the requirements listed in the technical specifications.
\$900	Job Retention -- This is payable upon completion of 90 days of employment, referred to as a "placement" in the technical specifications.
\$1,000	Social Security Job Retention Services payment after three, six, or nine months work at or above \$1,030 (\$1,480 Blind) per month. This amount is substantial gainful activity (SGA) plus the Social Security Administration established tolerance of \$200 (\$100 Blind) that takes into consideration any impairment related work expenses or subsidies that the beneficiary may have. These amounts are reviewed and may be modified periodically by the Social Security Administration, usually at the start of each federal fiscal year (October 1). Report and wage documentation is required and must be sent to DVR staff and DVR Social Security Reimbursement Coordinator.

Supported Employment Fees

\$650	Assessment: Payable upon delivery of an assessment report acceptable to DVR staff. In accordance with the technical specifications, the provider has 60 days to complete the assessment.
\$1,400	Job Hire: Payable upon actual hire for a job that is in accordance with the employment goal noted on the assessment and placement plan. If this does not occur during the first 90 days, DVR staff and individual should be contacted, the issues addressed, and the plan modified, if appropriate.
\$600	Ongoing Support: Monthly rate with a minimum guarantee of six months if the individual remains employed. Monthly progress reports are expected.

\$1,000	Outcome incentive payment if transition to long term support occurs upon completion of six months of support. It is payable 90 days after the transition has been successfully completed.
\$1,000	Social Security Job Retention Services payment after three, six, or nine months work at or above \$1,030 (\$1,480 Blind) per month. This amount is SGA plus the Social Security Administration established tolerance of \$200 (\$100 Blind) that takes into consideration any impairment related work expenses or subsidies that the beneficiary may have. These amounts are reviewed and may be modified periodically by the Social Security Administration, usually at the start of each federal fiscal year (October 1). Report and wage documentation is required and must be sent to DVR staff and DVR Social Security Reimbursement Coordinator

On-Site Job Coaching Fees (Other than Supported Employment

\$30/hour	Paid for direct contact job coaching services.
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Vocational Evaluation Fees

\$100-\$300/report	Psychometric Assessment: test scores only; varies depending on number of tests and inventories administered.
\$400/report	Psychometric Assessment: comprehensive report.
\$600/report	Work Sample Assessment (up to five days): comprehensive report.
\$600/report	On-The-Job Evaluation: comprehensive report

Mileage Reimbursement

75 cents/mile	Provider can charge 75 cents/mile for actual miles driven over 100 miles round trip travel to and from the closest service provider facility and the site where services are provided. Mileage up to 100 miles is included in Agreement rate. The 75 cents/mile charge begins with mile 101. Service provider must submit a travel log detailing mileage. Payment will be made at the time the individual has received the benefits analysis services, is placed on the job, has received supported employment services, has received job coaching services, or has received vocational evaluation services.
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ATTACHMENT 10

Prevalence of Working-Age People With Disabilities Across States FFY 2005

<u>State</u>	<u>Percentage of Working-Age People With Disabilities</u>	<u>Rank</u>	<u>State</u>	<u>Percentage of Working-Age People With Disabilities</u>	<u>Rank</u>
New Jersey	9.4%	1	United States	12.6%	
Hawaii	9.7	2	Florida	12.7	26
Minnesota	9.8	3	Georgia	12.9	27
Nevada	9.9	4	Pennsylvania	12.9	27
Connecticut	10.0	5	Vermont	13.1	29
Colorado	10.1	6	Michigan	13.3	30
Illinois	10.2	7	Montana	13.3	30
Maryland	10.4	8	Oregon	13.6	32
Utah	10.6	9	Indiana	13.7	33
Massachusetts	10.7	10	Ohio	13.8	34
California	10.8	11	Washington	13.9	35
Wisconsin	10.8	11	Idaho	14.1	36
Delaware	10.9	13	Wyoming	14.1	36
North Dakota	11.1	14	North Carolina	14.5	38
Virginia	11.3	15	Alaska	14.9	39
Nebraska	11.4	16	New Mexico	15.1	40
New York	11.4	16	Missouri	15.3	41
Iowa	11.5	18	Maine	15.4	42
New Hampshire	11.7	19	South Carolina	15.7	43
South Dakota	11.9	20	Louisiana	16.4	44
Kansas	12.0	21	Tennessee	17.1	45
Arizona	12.1	22	Oklahoma	17.3	46
District of Columbia	12.2	23	Alabama	18.1	47
Texas	12.3	24	Mississippi	18.9	48
Rhode Island	12.6	25	Arkansas	19.1	49
			Kentucky	19.7	50
			West Virginia	21.7	51

Source: Rehabilitation Research and Training Center on Disability Demographics and Statistics, 2005 Disability Status Reports.

ATTACHMENT 11

Employment Rates of People With Disabilities and People Without Disabilities FFY 2005

<u>State</u>	<u>Percentage of Working-Age People With Disabilities Who are Employed</u>	<u>Rank</u>	<u>Percentage of Working-Age People Without Disabilities Who are Employed</u>	<u>Rank</u>
Alabama	32.8%	45	77.3%	40
Alaska	47.9	6	78.0	37
Arizona	38.8	29	77.0	43
Arkansas	34.3	44	79.6	21
California	37.4	35	75.7	49
Colorado	45.7	7	80.8	14
Connecticut	42.4	19	80.6	15
Delaware	36.4	39	76.3	48
District of Columbia	43.5	15	79.9	20
Florida	37.1	37	77.8	38
Georgia	36.3	40	78.2	34
Hawaii	43.3	16	79.3	22
Idaho	44.2	12	78.7	28
Illinois	39.5	27	77.6	39
Indiana	40.0	25	79.0	25
Iowa	44.3	11	84.3	3
Kansas	45.1	9	82.8	10
Kentucky	28.8	50	77.3	40
Louisiana	32.5	46	75.5	50
Maine	38.0	33	83.0	9
Maryland	42.8	18	81.7	13
Massachusetts	37.5	34	80.5	16
Michigan	36.0	42	76.9	44
Minnesota	44.9	10	83.5	7
Mississippi	31.4	49	77.1	42
Missouri	39.0	28	80.5	16
Montana	49.8	5	80.5	16
Nebraska	45.2	8	84.0	6
Nevada	40.8	22	78.1	35
New Hampshire	41.0	21	84.2	4
New Jersey	40.0	25	78.6	29
New Mexico	38.1	32	76.8	45
New York	35.7	43	76.6	47
North Carolina	37.1	37	79.2	23
North Dakota	55.2	1	86.1	1
Ohio	37.4	35	78.9	26
Oklahoma	38.8	29	78.3	32
Oregon	41.7	20	78.4	31
Pennsylvania	36.1	41	78.9	26
Rhode Island	38.6	31	82.5	11

ATTACHMENT 11 (continued)

**Employment Rates of People With Disabilities and People Without Disabilities
FFY 2005**

<u>State</u>	<u>Percentage of Working-Age People With Disabilities Who are Employed</u>	<u>Rank</u>	<u>Percentage of Working-Age People Without Disabilities Who are Employed</u>	<u>Rank</u>
South Carolina	32.5%	46	78.1%	35
South Dakota	53.3	2	84.7	2
Tennessee	32.5	46	78.5	30
Texas	40.3	24	76.7	46
Utah	52.9	3	79.2	23
Vermont	43.9	14	84.2	4
Virginia	40.7	23	80.5	16
Washington	43.1	17	78.3	32
West Virginia	25.5	51	74.4	51
Wisconsin	44.2	12	81.9	12
Wyoming	51.5	4	83.1	8
United States	38.1		78.3	

Source: Rehabilitation Research and Training Center on Disability Demographics and Statistics, 2005 Disability Status Reports

ATTACHMENT 12

**Vocational Rehabilitation State Grants
FFY 2006 and FFY 2007**

<u>State or Other Area</u>	<u>FFY 2006</u>	<u>Percent of Total</u>	<u>FFY 2007</u>	<u>Percent of Total</u>	<u>Increase from FFY 2006 to FFY 2007</u>	<u>Percent Increase</u>
Alabama	\$54,409,300	2.0%	\$56,445,100	2.0%	\$2,035,800	3.7%
Alaska	8,957,200	0.3	9,342,400	0.3	385,200	4.3
Arizona	52,641,800	1.9	56,406,900	2.0	3,765,100	7.2
Arkansas	34,284,800	1.3	35,708,200	1.3	1,423,400	4.2
California	259,965,500	9.6	271,452,800	9.6	11,487,300	4.4
Colorado	32,547,700	1.2	34,105,100	1.2	1,557,400	4.8
Connecticut	19,238,400	0.7	19,870,500	0.7	632,100	3.3
Delaware	8,957,200	0.3	9,342,400	0.3	385,200	4.3
District of Columbia	11,897,800	0.4	12,182,400	0.4	284,600	2.4
Florida	145,570,000	5.4	154,108,600	5.4	8,538,600	5.9
Georgia	81,908,700	3.0	86,685,300	3.1	4,776,600	5.8
Hawaii	10,749,200	0.4	11,254,600	0.4	505,400	4.7
Idaho	14,601,800	0.5	15,464,600	0.5	862,800	5.9
Illinois	100,012,900	3.7	103,911,300	3.7	3,898,400	3.9
Indiana	63,748,700	2.3	66,226,300	2.3	2,477,600	3.9
Iowa	30,428,400	1.1	31,580,900	1.1	1,152,500	3.8
Kansas	25,965,600	1.0	26,963,400	1.0	997,800	3.8
Kentucky	49,003,400	1.8	50,876,900	1.8	1,873,500	3.8
Louisiana	54,442,400	2.0	56,314,800	2.0	1,872,400	3.4
Maine	14,385,400	0.5	14,885,200	0.5	499,800	3.5
Maryland	37,563,200	1.4	39,069,200	1.4	1,506,000	4.0
Massachusetts	43,959,000	1.6	45,164,400	1.6	1,205,400	2.7
Michigan	91,954,000	3.4	95,240,300	3.4	3,286,300	3.6
Minnesota	41,738,900	1.5	43,338,000	1.5	1,599,100	3.8
Mississippi	39,560,000	1.5	41,030,600	1.4	1,470,600	3.7
Missouri	58,689,900	2.2	61,038,600	2.2	2,348,700	4.0
Montana	10,455,800	0.4	10,907,000	0.4	451,200	4.3
Nebraska	16,869,600	0.6	17,539,700	0.6	670,100	4.0
Nevada	16,594,600	0.6	17,843,900	0.6	1,249,300	7.5
New Hampshire	10,173,300	0.4	10,573,800	0.4	400,500	3.9
New Jersey	52,405,100	1.9	54,174,700	1.9	1,769,600	3.4
New Mexico	21,361,900	0.8	22,359,500	0.8	997,600	4.7
New York	141,341,300	5.2	146,134,000	5.2	4,792,700	3.4
North Carolina	86,185,900	3.2	90,329,200	3.2	4,143,300	4.8
North Dakota	8,957,200	0.3	9,342,400	0.3	385,200	4.3
Ohio	114,493,700	4.2	118,396,800	4.2	3,903,100	3.4
Oklahoma	39,001,700	1.4	40,565,000	1.4	1,563,300	4.0
Oregon	33,265,200	1.2	34,855,500	1.2	1,590,300	4.8
Pennsylvania	117,718,500	4.3	121,735,400	4.3	4,016,900	3.4
Rhode Island	9,972,200	0.4	10,276,300	0.4	304,100	3.0

ATTACHMENT 12 (continued)

**Vocational Rehabilitation State Grants
FFY 2006 and FFY 2007**

<u>State or Other Area</u>	<u>FFY 2006</u>	<u>Percent of Total</u>	<u>FFY 2007</u>	<u>Percent of Total</u>	<u>Increase from FFY 2006 to FFY 2007</u>	<u>Percent Increase</u>
South Carolina	\$47,450,400	1.7%	\$49,594,700	1.7%	\$2,144,300	4.5%
South Dakota	8,957,200	0.3	9,342,400	0.3	385,200	4.3
Tennessee	62,256,600	2.3	64,866,400	2.3	2,609,800	4.2
Texas	201,769,700	7.4	212,142,300	7.5	10,372,600	5.1
Utah	25,154,500	0.9	26,821,000	0.9	1,666,500	6.6
Vermont	8,957,200	0.3	9,342,400	0.3	385,200	4.3
Virginia	59,719,300	2.2	62,456,600	2.2	2,737,300	4.6
Washington	46,564,300	1.7	48,830,500	1.7	2,266,200	4.9
West Virginia	24,014,100	0.9	24,796,200	0.9	782,100	3.3
Wisconsin	52,853,700	1.9	54,832,000	1.9	1,978,300	3.7
Wyoming	8,957,200	0.3	9,342,400	0.3	385,200	4.3
American Samoa	891,000	0.0	924,400	0.0	33,400	3.7
Guam	2,704,200	0.1	2,831,300	0.1	127,100	4.7
Northern Mariana Islands	1,054,600	0.0	1,126,100	0.0	71,500	6.8
Puerto Rico	67,983,700	2.5	70,459,800	2.5	2,476,100	3.6
Virgin Islands	1,903,100	0.1	1,965,500	0.1	62,400	3.3
Indian set-aside	<u>33,024,000</u>	<u>1.2</u>	<u>34,444,000</u>	<u>1.2</u>	<u>1,420,000</u>	<u>4.3</u>
Total	\$2,720,192,000	100.0%	\$2,837,160,000	100.0%	\$116,968,000	4.3%