

VR Referral & Supported Employment Guidelines for DD Providers and Case Managers

DD has worked with providers as well as Voc Rehab (VR), to come up with some common rules in referring and billing. The following procedures have been agreed upon, and are to be implemented by DD providers and Case Managers (CM).

Individuals who enter into DD waivers and/or Supported Employment services after July 1, 2007, are required to be referred to Voc Rehab for vocational goals. Case Managers need to ensure a Voc Rehab appointment is made (whether the Provider or CM makes the actual request) within 5 working days of the DD individual indicating a desire for employment and/or PSP planning meeting for someone receiving DD waiver services. (This does not preclude a CM from, at any time, referring an individual to VR for a service that does not require long-term follow through, such as job placement). If a person is receiving or is referred for any services through VR and then is subsequently screened into a DD waiver, the DDP CM will contact the CRP, EE, or VR representative(s) and notify them the person is getting enrolled into DD waiver supports. EE referrals and supports will reviewed when the person's employment supports through the waiver are authorized (the specific services are created and authorized). If the person new to a waiver is in the middle of a VR plan, then the person's initial plan and services would reflect current needs and timelines, with the understanding that in the future ongoing vocational supports may need to be considered when determining funding.

It may be appropriate to provide some employment services (Small Group Employment for example) or Job Prep/Job Discovery (or other non-employment services) until the VR plan is approved.

- VR's maximum time for the initial appointment is within 30 days of the meeting request.
- VR has 60 days after application to determine eligibility.
- Once eligibility is determined, VR has 120 days to develop the Individualized Plan of Employment (IPE)
- Exceptions for extenuating circumstances can be allowed

***If the DD individual is declined services from VR, the CM and DD providers need proper documentation. If an application is not taken, then there would not be follow-up paperwork through VR. If this is the scenario, the individual & case manager should request (in writing) a statement from VR of why an application was not taken. If an application is taken, and for whatever reason they are not deemed eligible for VR services, the individual would get a letter stating that they are not eligible and the reasons for the ineligibility decision. Few DD individuals should be declined VR services. If you have questions about someone not being accepted by VR, take your documentation to the CRP/EE Liason in your area (separate list) AND notify your DDP Regional Manager. **THIS DOCUMENTATION IS NECESSARY TO JUSTIFY PROVIDING EMPLOYMENT SERVICES THROUGH A DD WAIVER.**

March 2014 ***We are currently revising the Career Plan document. Until it is complete, only pages 1-5 of the Career Plan need to be filled out. In addition, activities and level of services (specific service, hours, and estimated frequency) should be clearly noted in the PSP or in the ICP comments. When the Career Plan document is revised, the full career plan will again be required. This section of the Guideline will be updated and CMs will be notified***

LONG TERM SUPPORTS:

Cooperative Agreement: For an individual receiving DD waiver services, the DD Regional Managers will sign off on the MVR Cooperative agreement for long-term supports that are required for the VR plan. This agreement requires the name of a provider that the individual/planning team discussed will do the long-term employment supports, and indicates the person has waiver funding and plans to use cost plan dollars for supports to maintain employment after VR closes. Persons for whom there is an MVR agreement will automatically not be placed on, or considered for Extended Employment (EE) services through VR.

Request to be placed on Extended Employment (EE) list: DDP and VR staff have agreed to the steps below for the DDP Case Managers (CM) and Regional Managers (RM's) to follow for someone that has waiver funding but may also need to be considered for EE waitlist because they do not have enough waiver funding to provide long term employment supports.

The CM will submit the following to the DDP RM in order to be considered for the EE funding Waiting List when the client is getting waiver services at the time of referral to VR:

- 1) The person's PSP (Personal Support Plan)
- 2) The person's most recent and updated MONA (Montana Resource Assessment)
- 3) The person's Career Plan
- 4) A statement that an assessment has been done, that the individual wants to work and it's anticipated the person will need follow along to maintain employment. Describe why current waiver dollars cannot be re-allocated. The team is requesting that they be put on the EE Wait List.

The DDP Regional Manager will review the above items and the individual's funding level and determine if it can or cannot accommodate long term SE in the future. If it cannot, the DDP RM will let the VR RM know the request has been reviewed and there will not be funding available in the waiver cost plan to cover long term vocational supports. At the time of the review, all funds available to the cost plan must be utilized for services that have a higher priority than the long term supports. The VR Counselor will then determine whether the person will be placed on the EE waitlist and will notify the EE RM and DDP CM of the final action.

VR should be billed during the time the individual has an active plan through VR. It may be appropriate for DD providers to bill DD for some res hab activities or non-duplicative pre-voc, employment, or day activities during this time. **BOTH VR AND DD SHOULD NEVER BE BILLED FOR DUPLICATIVE VOCATIONAL OR PREVOCATIONAL ACTIVITIES DURING THE SAME TIME PERIOD.** The DD plan of care should clearly document activities VR is providing and activities DD is providing if both sources are paying for vocational or pre-vocational activities during the same time frame. Providers billing DD can request something formal from VR indicating exactly which activities they are covering to ensure no duplication occurs.

At the time that the person is becoming stable at their job and VR supports are winding down, the DDP CM and the person's planning team will start discussing what services through the DD waiver should be initiated, at what levels, and when employment supports should be in place. (So parties need to make sure the DD Case Manager is involved during any negotiations/determinations of long term supports well before VR closes). When the person's team agrees on the specifics of employment services through DD waiver, and those services are **authorized** in the ICP, then the CM will make contact with the VR Regional Manager OR preferably with the person's VR counselor to ensure that VR knows the person's DD supports are in place. If it's not already been specified, the anticipated closure date by VR can be requested so the CM knows exactly when the waiver will need to take over supports.

CM's should refer the individual back to VR when there is a substantive change, or if additional supports are needed for the person to maintain their goal. The CM is responsible for ensuring wages are reported to SSI and in the case of the DD individual losing their community job, the CM is responsible for ensuring unemployment benefits are initiated (whether the CM does it or ensures someone else is doing it. Who does the reporting can be noted as part of the PSP so it's clear).

VR no longer requires CARF accreditation for DD providers who are Qualified Providers for SE through DD waivers. If a provider is interested in enrolling as a provider with the VR program, it is up to their Regional discretion whether that Region needs more VR providers. Contact the local Counselor Supervisor for more information.

Montana Vocational Rehabilitation CRP/EE Liaisons

(updated March 2014)

Billings

Sally Sjaastad, Counselor Supervisor

2121 Rosebud Drive, Suite C
Billings, MT 59102
406-248-4801 (voice)
406-652-6046 (TTY)
888-279-7532 (toll-free voice)
406-652-1781 (fax)

Miles City

Rhonda Shumway, Counselor Supervisor

114 North 7th
Miles City, MT 59301
406-232-0583 (voice/TTY)
877-296-1198 (toll free--voice/TTY)
406-232-0885 (fax)

Butte

Brigitte Bellefleur, Counselor Supervisor (located in Helena Office 444-1710)

700 Casey Street, Suite B
Butte, MT 59701
406-496-4925 (voice/TTY)
888-279-7531 (toll free--voice/TTY)
406-782-8728 (fax)

Bozeman

Brigitte Bellefleur, Counselor Supervisor (located in Helena Office 444-1710)

220 West Lamme, Suite 1E
Bozeman, MT 59715
406-587-0601
877-296-1759 (toll free)
406-587-7863 (fax)

Helena

Brigitte Bellefleur, Counselor Supervisor

PO Box 202957
3075 North Montana Avenue, Room 106
Helena, MT 59620-2957
406-444-1710 (voice/TTY)
877-296-1757 (toll free--voice/TTY)
406-444-9659 (fax)

Anaconda

No longer have an Anaconda office.

Great Falls

Misti Hofland, Counselor Supervisor

201 1st Street South, Suite 2
Great Falls, MT 59405
406-454-6060 (voice)
888-279-7527 (toll free--voice)
406-454-6084 (fax)

Havre **Misti Hofland, Counselor Supervisor (located in the Great Falls Office 454-6060)**
48 2nd Avenue, Suite 213
Havre, MT 59501
406-265-6933
877-296-1294 (toll free)
406-265-9271 (fax)

Missoula **Jane Parsons, Counselor Supervisor**
2675 Palmer, Suite A
Missoula, MT 59808
406-329-5400 (voice/TTY)
888-279-7528 (toll free--voice/TTY)
406-329-5420 (fax)

Hamilton **Jane Parsons, Counselor Supervisor (located in Missoula 329-5400)**
316 North 3rd, Suite 109/110
Hamilton, MT 59840
406-375-0203 (voice)
406-363-7530 (fax)

Kalispell **Matt Wenzel, Counselor Supervisor**
121 Financial Drive, Suite B
Kalispell, MT 59901
406-751-5940 (voice/TTY)
877-296-1760 (toll free--voice/TTY)
406-751-5944 (fax)

Polson **Matt Wenzel, Counselor Supervisor (located in Kalispell 751-5940)**
830 ½ Shore Line Drive
Polson, Montana

State Voc Rehab Regional Manager List:

Sally Sjaastad	Billings	248-4801
Pat Fandrich	Butte	496-4925
Tammy Hogan	Great Falls	454-6060
Barb Schiedermayer	Missoula	329-5400
Beverly Berg (Blind & Low Vision)		444-2590

Program Manager:

Mike Hermanson	444-3833
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Chief of Field Services:

Barb Varnum	444-4179
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(updated March 2014)