

Department of Labor
Vocational Rehabilitation

Rule 50



The vocational rehabilitation process is a collaborative one. All parties should be involved.



New

Rule 52 – Obtaining Services

Rule 53 – Screening

Rule 58 – Fee Schedule



Changes



Rule 30 became Rule 50

Time Frames

Billing

IVE becomes Vocational Evaluation

Removing Social Security Number from Forms



Forms

MOP – new form to indicate when a claimant has been receiving disability payments for 90 days

Return to Work Plan – changed to reflect name change

Entitlement – Changed to reflect screening

Progress Report – Changed to reflect filing agreement

All forms will have the social security number removed for security purposes.

Purpose

Vocational rehabilitation (V.R.) shall be provided to a worker when, because of the work injury, s/he is unable to return to suitable employment for which s/he has prior training or experience relevant to currently available suitable employment. (Rule 50.0000)



Interim Screening Protocol

Screenings will be assigned to currently certified Vermont vocational rehabilitation counselors on an alphabetical basis. The chosen counselor has the right to decline the screening. (Rule 53.1310A)



Time Frames



Screenings – 10 days from date of appointment (Rule 53.1300)

Referral – 15 days from receipt of screener's report (Rule 53.5100)

Entitlement Assessment – 30 days from receipt of referral (Rule 54.2000)

Return to Work Plan – Counselor-45 days after completing the entitlement assessment, Carrier-within 21 days of receipt of plan, Department – within 25 days of receipt of fully executed plan (Rules 55.1000, 55.4000, and 55.5000)

Return to Work Plan Amendment – Prior to completion of approved original Return to Work Plan (Rule 55.7000)

Carrier Disagreement Timeframe

The carrier has 21 days from receipt of the documentation to disagree.

Carrier must file written disagreement within the 21 day timeframe. Copies must be sent to claimant and vocational rehabilitation provider.



Screening

Absent extenuating circumstances the screening process should be completed in no more than 10 days from the date of screener assignment. The screener shall provide all parties and the department with the recommendation. The chosen vocational rehabilitation counselor has the option of declining the screening if it presents a hardship. (Rule 53.1500)



Entitlements



Need to be completed within 30 days of receipt of referral.
(Rule 54.2000)

If the carrier contests the entitlement assessment then they
have 21 days to file a denial with supporting
documentation. (Rule 54.5000)

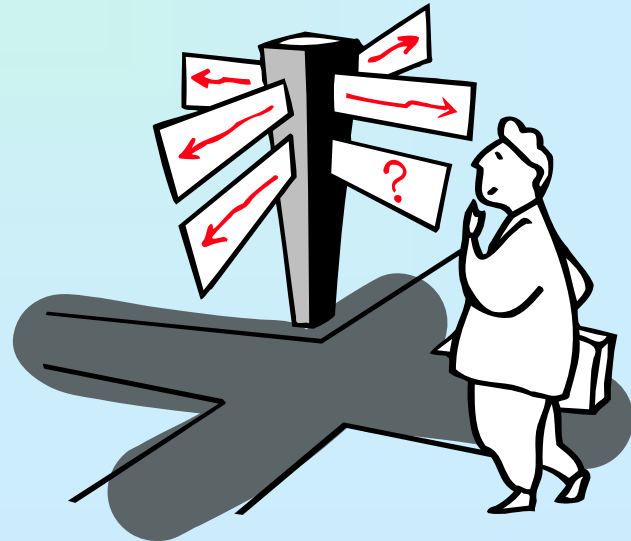
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Return To Work Plan

Make sure that there is a clear, definitive goal as well as a time frame for reaching that goal. (Rule 55.1000)

If an amendment is going to be filed it must be filed prior to the end date of the plan that is currently in place. (Rule 55.7000)

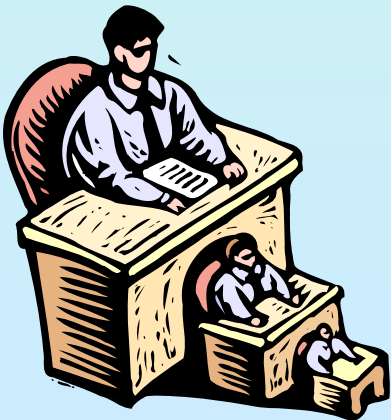


The employer/insurer has shall promptly review the plan and file any objections within 21 days of receiving it. (Rule 55.4000)



Self Employment Plans

The employee must submit documentation that they have contacted a qualified small business consultant and attach a written evaluation of the plan including recommendations from that consultant. (Rule 55.9200)



Extensions

Should be filed if VR counselor is waiting for information but can be providing other vocational rehabilitation services.



Suspensions

Should be filed when there is no active vocational rehabilitation being provided.



Closures



When a file is being closed based on non-cooperation copies of all correspondence and evidence that the vocational rehabilitation counselor has attempted to reach the claimant must be attached to the closure form.

Progress Reports

Submitting an itemized bill for services to the employer/insurer the vocational rehabilitation counselor is attesting to the reasonableness and necessity of the services provided and the accuracy of the bill. Counselors are reminded that false statements may constitute workers' compensation fraud. (Rule 58.000)



X-56789

File Numbers

Y-78934

Since the social security number will no longer be on the forms it is very important that file numbers be on anything that is submitted to the Department (this includes correspondence) to prevent a delay in processing.

A-12345

Correspondence

All correspondence (this includes e-mail) should have the claimant's name, the employer and the file number.





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Informal Conferences

Only the parties to a claim can request a conference
– claimant/attorney or carrier/attorney.

If the parties can not mutually agree on a solution to a disputed issue then one of the parties, can request an informal conference to resolve the disputed issue.

(Rule 56.000)



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Billing

Submitting an itemized bill for services to the employer/insurer the vocational rehabilitation counselor is attesting to the reasonableness and necessity of the services provided and the accuracy of the bill.

Counselors are reminded that false statements may constitute workers' compensation fraud. (Rule 58.0000)

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Denials

If the carrier is submitting a VR denial they need to clearly indicate on the form that it is for VR. All denials should clearly indicate exactly what is being denied and why (i.e. the plan doesn't follow the hierarchy, medical evidence indicates claimant isn't entitled)



Burden of Proof

Claimant bears burden of proving entitlement to services.

UNLESS



Carrier agrees that they are entitled or accepts a return to work plan, OR fails to timely (within 21 days) dispute the entitlement or return to work plan.

The carrier then bears the burden of proving that the claimant is no longer entitled, or that the plan is not reasonable, necessary or will not result in suitable employment.

(Rule 56.4000)



Fee Schedule



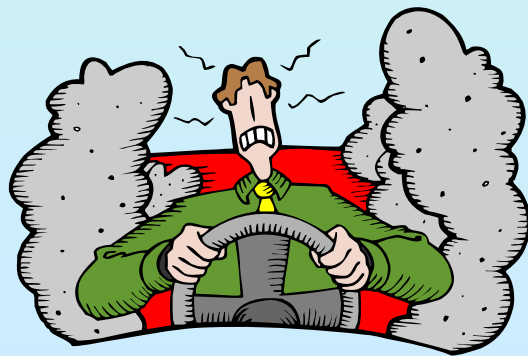
The carrier shall pay the VR counselor's charge within 30 days of receipt of bill and legible, supporting documentation. If the carrier wishes to obtain a vocational evaluation they must notify the counselor within 21 days of receipt of the bill.

Review shall occur within 30 days. (Rule 58.1000)

Hourly/Travel Fees

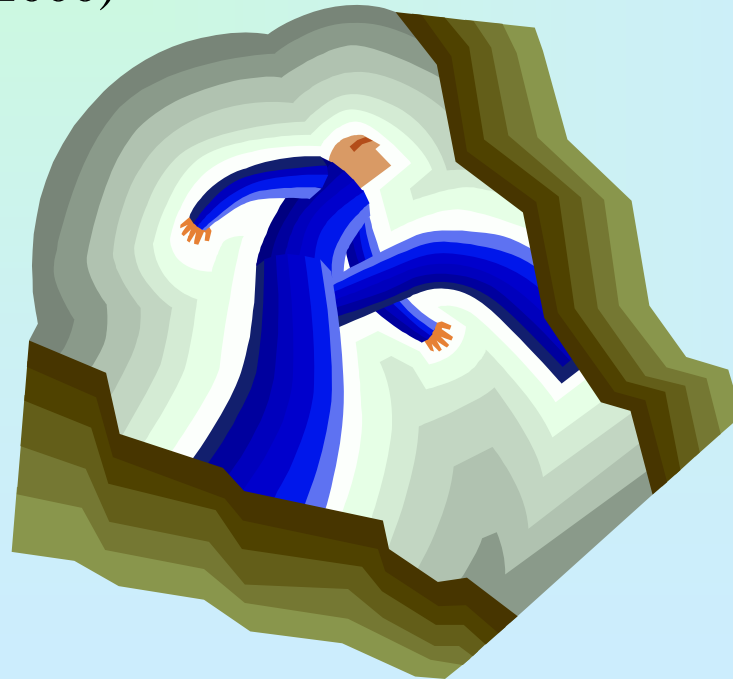
Maximum hourly fee is \$80.00 (Rule 58.5000)

Travel time in excess of two hours is reimbursed at a rate not to exceed 50% of the hourly rate. Mileage is reimbursed at the same rate as paid state employees. (Rule 58.7000)



Screening Fees

Fee is \$160.00 – this is not dependent on hours. (Rule 58.2000)



Entitlement Assessment Fees

Fees are \$80.00 per hour not to exceed \$1000.00 per assessment unless a higher amount is authorized by the carrier or ordered by the Department. (Rule 58.3000)



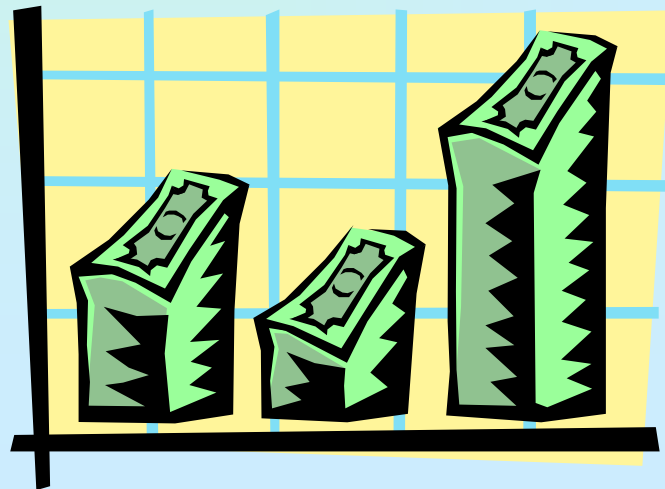
Plan Development Fees

Fees in excess of \$2000.00 for developing a Return to Work Plan require employer/insurer authorization. (Rule 58.4000)



Fees shall not be reimbursed that are not reasonable and necessary. (Rule 58.8000)

If VR is suspended no payment for VR services shall be due nor reimbursed for the suspension period, except as agreed upon by the parties. (Rule 58.9000)



Questions?

If you have questions about these new rules or any aspect of vocational rehabilitation please contact me at (802) 828-2991 or trudy.smith@state.vt.us