

ARIZONA DEPARTMENT OF ECONOMIC SECURITY

Program Name: Vocational Rehabilitation (VR)

Policy Number: VR-8.1-v1

Effective Date: July 1, 2008

Last Revision: March 31, 2021

CHAPTER 8: Assessment Services

Section 8.1: Assessments: General

I. Policy Statement

This policy provides the guidelines regarding the provision of assessment services that need to be purchased by VR for applicants/clients when the existing documentation is insufficient for determining eligibility, functional limitations, or scope of VR services. Assessments refer to medical diagnostic assessments and vocational assessments.

Diagnostic assessment in the areas of general medicine, specialty medicine, dentistry, psychology, psychiatry, neuropsychology, occupational, speech and physical therapeutic, audiology and optometry/ophthalmology are provided by qualified professionals who are licensed in their areas of specialty. The outcomes of these assessments are to diagnose the presence and extent of disabilities, functional limitations and recommend treatment services that would enable applicants/clients to participate in the VR program and achieve the employment outcome on the Individualized Plan for Employment (IPE).

Vocational assessments are utilized to determine an applicant/client's vocational strengths, interests, aptitudes, and capabilities to perform in work situations.

Vocational assessments are commonly utilized prior to the IPE development to assist an applicant in identifying an employment outcome. Trial Work assessments are utilized at any time during the VR program to evaluate and determine an applicant/client's capability to perform in work situations.

II. Authority

Authority for policies contained in this document includes the following:

- Workforce Innovation and Opportunity Act (WIOA), 29 U.S.C. § 3101 et seq.
- Title IV Amendments to the Rehabilitation Act of 1973, 29 U.S.C. § 701 et seq.
- State Vocational Rehabilitation Services Program, 34 C.F.R. §§:
 - Scope of vocational rehabilitation services for individuals with disabilities 361.48 (b)(1-2)
 - Comparable services and benefits 361.53 (b)(1)

- Participation of individuals in cost of services based on financial need 361.54 (b)(3)(i)(A-B)
- A.R.S. §§ 23-502 and 503
- Arizona Administrative Code, Title 6, Chapter 4:
 - General considerations R6-4-201 (A)(1)(a)
 - Diagnostic Study R6-4-203
 - Service and provider standards, service authorizations, equipment purchasing, Workers' Compensation R6-4-402 (A)(1)(a),(c-h) and (k); (2); (B)(1)(a-b),(c)(i-ii), (d-e); and (2-3)
 - Economic need and similar benefits R6-4-403 (A)(1)(b)(i-ii); (B)(1) and (2)(b)(iv)

III. Applicability

This applies to applicants/clients who may need to participate in assessment service(s) to progress in the VR program.

IV. Standards

- A. Economic need does not apply.
- B. Comparable benefits do not apply.
- C. The VR Counselor must refer an applicant/client for assessment services to obtain additional information necessary to assess and determine the applicant/client's:
 1. Eligibility and assign priority for the Order of Selection,
 2. Factors that affect the employment and rehabilitation needs of the applicant/client and barriers for preparing for, obtaining and maintaining employment, and
 3. Unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice, including the need for supported employment to perform adequately in a work environment.
- D. The outcome of assessment services must be utilized to identify the applicant/client's rehabilitation needs, employment outcome and the nature and scope of vocational rehabilitation services to be included in the IPE.
- E. VR must utilize specific assessments to evaluate the applicant/client's needs for rehabilitation technology, and auxiliary aid or services necessary for work.
- F. The service outcomes for assessments/evaluations must include:
 1. Review of applicant or client's existing records,
 2. Confirmation of diagnosis,

3. Recommendations for additional evaluation(s),
 4. Identification of restrictions/functional capacities needed for employment planning purposes,
 5. Prognoses and treatment recommendations,
 6. Provision of a written assessment summary or an evaluation report,
 7. Provision of a monthly progress report if the assessment/evaluation is conducted over a period of time.
- G. VR must pay for assessment-related travel cost (transportation, food, and lodging) expenses that are incurred to permit the applicant or client's involvement in diagnostic or evaluation services to conduct assessment.
- H. Assessment-related travel cost must not exceed the maximum daily per diem and travel reimbursement set for state employees. Refer to Section 12.1 Transportation Services of this policy manual for details about travel cost.
- I. Only one assessment is allowed per case.
- J. Refer to Section 9.1 Treatments-General regarding corresponding treatment services.

V. Procedure

- A. Refer to Standard Work, if available.
- B. Refer to the RSA Allowable Services Spreadsheet, contracts (if available) and provider requirements.
- C. For a non-contracted service, refer to RSA Contracts Unit for guidance whether the service is to be procured via:
 1. Arizona Health Care Cost Containment (AHCCCS) Fee for Services, or
 2. Other procurement methods, or
 3. Direct payment to the client via CPA.
- D. The VR Counselor must complete the agency Referral for Services form for each assessment service.
- E. The VR Counselor must include the following information on the Referral for Services form:
 1. Pertinent background information regarding the applicant/client's disability and vocational objectives, and
 2. A specific list of questions regarding the implications of the applicant/client's disability in terms of employment.

- F. The VR Counselor must task the Purchasing Technician to create RSA Purchase Authorization(s) for the service(s) listed in each Referral for Services form.
- G. The Purchasing Technician must submit the RSA Purchase Authorization for each service listed in each Referral for Services form along with the referral information to the provider(s).
- H. Upon receipt of the provider's assessment report, the VR Counselor must review the report for completeness, approve the provider's invoice and process for payment after confirming that the reporting documentation is complete.

VI. Documentation Requirements

The applicant/client's electronic case file must include the following:

- A. Referral information,
- B. RSA Purchase Authorization(s),
- C. Assessment report.