# Vocational Rehabilitation Services Manual D-200: Purchasing Goods and Services

Revised September 1, 2020

## D-202: VR Staff Responsibilities

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### D-202-1: Documentation Requirements

RHW is an electronic case management system. It communicates with TWC's financial system to authorize and track payments for all customer goods and services.

Purchasing documentation is kept in both RHW and in the paper case file.

All documentation that supports the purchase of a good or service must be entered into RHW and filed in the customer's paper case file by VR staff before obligating VR funds.

VR funds are obligated at the time that a SA is generated in RHW.

#### IPE, IPE Amendment, and Case Notes

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#### Paper Case File Documentation

All documents related to the purchasing process are legal records and must be kept in the customer's paper case file.

Purchasing-related documents include:

* bids;
* invoices;
* reports;
* printed SAs; and
* related correspondence.

Purchasing documentation must be:

* date-stamped on the day that it is received by the VR office; and
* filed in the customer's paper case file.

RHW does not store copies of SAs that are revised; therefore, the following applies:

* When the initial SA is generated, the VR staff must
  + print a paper copy of the SA,
  + have the issuer sign the SA, and
  + file the SA in the customer's paper case file.
* If an SA is changed while it is still open, the VR staff
  + print a paper copy of the revised SA,
  + have the issuer sign the revised SA, and
  + file the revised SA in the customer's paper case file.

The issuer may sign the SA using a digital signature. Refer to [Authorizing Services Remotely in ReHabWorks](https://intra.twc.texas.gov/intranet/vrs/docs/rehabworks-remote-service-authorization.docx) for step by step instructions for digital signatures.

All printed SA's remain in the customer's casefile, even if the SA is revised.

To ensure that the provider's file accurately reflects the purchasing activities in RHW, the VR staff sends a copy of the SA to the provider:

* when the SA is generated; and
* when an open SA is changed.

If an SA is closed because the service is no longer authorized, VR staff members must notify the provider no later than the same business day that the SA is closed.  Document the notification of the provider in a case note in RHW.

Note: Electronic copies of closed SAs are kept in RHW. Therefore, even if an SA is changed as a result of closing the SA, printed copies of closed SA's are not required in the paper case file.

## D-203: Purchasing Decisions

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## D-204: The Purchasing Process

Service authorizations must be issued no later than the date that good is ordered or that service begins. When an SA is not issued within these parameters, it is an after-the-fact SA. There are three types of after-the-fact SA's: backdated, after-the-fact ancillary, and replacement, which are covered in more detail below.

All after-the-fact SA's are monitored by state office.

### D-204-1: Steps in the Purchasing Process

VR staff completes the following steps.

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#### Step 5 - A VR staff member with an appropriate RHW user role

Prints the SA. (The printed SA must be signed by the issuer. The issuer may sign the SA digitally). Refer to [Authorizing Services Remotely in ReHabWorks](https://intra.twc.texas.gov/intranet/vrs/docs/rehabworks-remote-service-authorization.docx) for step by step instructions for digital signatures.

Sends the SA to the vendor by mail, fax, or encrypted email. Depending on the manner in which the SA is sent to the vendor, the VR staff member files the original, signed SA, or a copy of it, in the customer's case folder.

If the SA is revised, VR staff:

* completes these steps again;
* sends the new or updated SA to the vendor; and
* files the SA in the paper case file.

For more information about revising an SA, see [D-204-2: After-the-Fact Purchases](https://www.twc.texas.gov/vr-services-manual/vrsm-d-200#d204-2).

For more information about requirements for maintaining printed copies of SA's in the paper casefile, see [D-202-1: Documentation Requirements](https://www.twc.texas.gov/vr-services-manual/vrsm-d-200#d202-1).

#### Step 6 - A VR staff member with an appropriate RHW user role

* If it becomes apparent that the total committed budget will not be used, reduce the quantity and/or unit cost in the SA in RHW.
* Repeat step 5.

For information about closing an SA, refer to the [ReHabWorks User's Guide, Chapter 17: Case Purchase Order, 17.10 PO Change](https://intra.twc.texas.gov/intranet/manuals/rhwhelp/index.html).

For more information about requirements for maintaining printed copies of SAs in the paper casefile, see [D-202-1: Documentation Requirements](https://www.twc.texas.gov/vr-services-manual/vrsm-d-200#d202-1).

#### Step 7 - A VR staff member with an appropriate RHW user role

* Receives and documents the receipt of goods and services.
* Verifies that goods and/or services were delivered in good condition and met the specifications.

#### Step 8 - A VR staff member with an appropriate RHW user role

* Processes the invoice within seven calendar days.

### D-204-2: Backdated Service Authorizations

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## D-208: Invoices

Vendors must submit invoices to the office address listed on the SA.

The invoice must comply with:

* the applicable contract;
* the policies and procedures published in the VR-SFP;
* the policies and procedures published in the VRSM; and
* the terms and conditions of the SA.

**Note:** For Advise TX IO services, refer to the [Advise TX IO Purchasing Guide](https://intra.twc.texas.gov/intranet/vrs/docs/advise-tx-purchasing-services.docx).

Within seven calendar days of receiving an invoice, the staff member must:

1. verify that the invoice is complete;
2. acknowledge receipt of the invoice in RHW; and
3. authorize the payment, if the goods and/or services have been received (for more information, see the [ReHabWorks User's Guide, Chapter 19: Case Authorizing Payment](https://intra.twc.texas.gov/intranet/manuals/rhwhelp/index.html)).

### D-208-1: Date Stamping Invoices

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## D-210: Exceptions to Contracted Fees and MAPS Fees

Fees are not authorized if they are greater than:

* the contracted fee for a specific service; or
* the MAPS fee.

VR staff are not permitted to authorize exceptions to fees that exceed the contracted fee or MAPS fee.

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### D-210-4: Completing VR3472, Contracted Service Modification Request

When necessary, services described in the VR-SFP manual can be changed to meet a customer’s needs. If the service definition, procedures, or deliverables for a service are changed from the way that they are described in the VR-SFP manual, services cannot be provided until a VR3472, Contracted Service Modification Request, is completed and approved by the director of the Vocational Rehabilitation Division..

The VR counselor completes a VR3472 when a contract modification is necessary; the VR counselor obtains any information needed from the contractor and the contractor’s signature. When a contractor requests a service modification, the VR counselor will make the final decision whether to submit the contractor’s request for review. The contracted service modification is only valid and can be put into effect after approved by the Director of Vocational Rehabilitation Division.

The VR counselor:

* enters all information into the VR3472 electronically;
* obtains approval from the manager or supervisor who documents approval on the form;
* obtains signatures from the provider’s legally authorized representative on the form; and
* upon receiving approval, retains a copy of the form in the customer’s paper file, and an approved copy is provided to the contractor.

The approved form must be submitted with the invoice, when applicable.

Examples of when a VR3472 must be completed, include but are not limited to, purchasing:

* Assistive Technology training on a product that is not on the approved Assistive Technology Unit product list;
* Orientation and Mobility training that must occur without the customer using a blindfold;
* Diabetes post-training assessment to be completed before 30 calendar days have elapsed after training;
* Providing service that can only be provided in person remotely;
* More than 200 hours of Job Skills Training;
* More than 15 hours of Diabetes Educator Training;
* A specific Vocational Adjustment Training, such as VAT-Explore the “You” in Work, more than once for a customer;
* Part of a service from one provider and another part from another provider; for example, Benchmark 1A and 1B from provider A and Benchmarks 2–6 from provider B;
* Bundled Job Placement after Non-Bundled Job Placement Services have been purchased;
* Bundled Job Placement and/or Supported Employment more than once; and
* Supported Employment Services after the purchase of Job Placement Services

For additional information, refer to VR-SFP Chapter 3: Basic Standards, sections 3.11.1 Documentation and Signatures and 3.6.4.2 Evaluation of Service Delivery.

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## D-221: Telehealth Options

When considering telehealth options for customers, VR counselors carefully consider what types of treatments that use telehealth are the most effective and decide on a case-by-case basis whether to proceed with telehealth.

The US Department of Health and Human Services (HHS) issued guidance on using Health Insurance Portability and Accountability Act (HIPAA)–compliant platforms.

HHS lists the following as vendors that represent that they provide HIPAA-compliant video communication products:

* Skype for Business/Microsoft Teams
* Updox
* VSee
* Zoom for Healthcare
* Doxy.me
* Google Meet on G Suite
* Cisco Webex Meetings/Webex Teams
* Amazon Chime
* GoToMeeting

When providing telehealth options, it is recommended that providers use an application listed by HHS or another HIPAA-compliant application.

### D-221-1: Creating a Service Authorization for Telehealth Services

Telehealth options are available for the following services:

* Autism Spectrum Disorder Supports, refer to C-802: Autism Spectrum Disorder Supports;
* Applied Behavior Analysis, refer to C-803: Applied Behavior Analysis;
* Psychological Services, refer to C-804: Psychological Services; and
* Medical Services refer to C-701: Professional Medical Services.

A service record must be created with the following specifications for telehealth services:

#### Service Records for Medical and Psychological Services

* Level 1: Medical and Psychological Evaluations and Services (MAPS)
* Level 2: Evaluation & Management (General Evals, Office & Home Visits, Supplies, Injections)
* Level 3: Office/Outpatient/Hospital Consultations

Choose the appropriate specifications for Level 4 based on the service to be provided.

Note: There are no changes to rates for the following telehealth services:

* Licensed Professional Counselor (LPC) counseling,
* Social Worker counseling,
* Applied Behavior Analysis (ABA) services, and
* Autism Spectrum Disorder (ASD) supports.

#### Service Records for ABA Services by BCBA-D

* Level 1: Medical and Psychological Evaluations and Services
* Level 2: Applied Behavior Analysis and Behavior Intervention Services by BCBA-D
* Level 3: Applied Behavior Analysis and Behavior Intervention Services by BCBA-D

Choose the appropriate specifications for Level 4 based on the service to be provided.

#### Service Records for ABA services by BCBA

* Level 1: Medical and Psychological Evaluations and Services
* Level 2: Applied Behavior Analysis and Behavior Intervention Services by BCBA
* Level 3: Applied Behavior Analysis and Behavior Intervention Services by BCBA-D

Choose the appropriate specifications for Level 4 based on the service to be provided.

#### Service Records for ABA services by BcaBA, RBT, or Graduate Student under supervision of BCBA-D or BCBA

* Level 1: Medical and Psychological Evaluations and Services
* Level 2: Applied Behavior Analysis and Behavior Intervention Services by BCaBA, RBT, or Graduate Student Under the Supervision of a BCBA-D or BCBA
* Level 3: Applied Behavior Analysis and Behavior Intervention Services by BCaBA, RBT, or Graduate Student Under the Supervision of a BCBA-D or BCBA

Choose the appropriate specifications for Level 4 based on the service to be provided.

#### Service Records for Autism Spectrum Disorder (ASD) supports

* Level 1: Evaluation Services (non-MAPS), Other Training & Related Services
* Level 2: Autism Spectrum Disorder (ASD) Supports - Reference VRSM C-800
* Level 3: Autism Spectrum Disorder (ASD) Supports

Choose the appropriate specifications for Level 4 based on the service to be provided.

#### Service Records for Licensed Professional Counselor (LPC) counseling

* Level 1: Medical and Psychological Evaluations and Services (MAPS)
* Level 2: Licensed Professional Counselor (LPC) counseling, per hour

Choose the appropriate specifications for Level 3 and 4 based on the service to be provided.

#### Service Records for Social Worker counseling

* Level 1: Medical and Psychological Evaluations and Services (MAPS)
* Level 2: Social Worker counseling services

Choose the appropriate specifications for Level 3 and 4 based on the service to be provided.

**Note**: When a customer receives telehealth services during a pandemic, VR staff should refer to the VRD state office guidance and [Texas Department of Insurance -Telemedicine emergency rule](https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.tdi.texas.gov%2Fnews%2F2020%2Ftelemedicine-emergency-rule.html&data=02%7C01%7Claura.lacour%40twc.state.tx.us%7C2432dcd2803748f5532d08d81d11387a%7Cfe7d3f4f241b4af184aa32c57fe9db03%7C0%7C0%7C637291307078652273&sdata=MGAMFp4bftOcLf31MYXu7KPciULP%2B7ZqmhIYcc%2Fm9ZI%3D&reserved=0) for information on telehealth billing and payment guidelines.