



Texas Workforce Commission

Provider Feedback Form Instructions.

Purpose

To allow providers the opportunity to submit feedback to the Vocational Rehabilitation Division (VRD).
To allow the VRD the opportunity to review and resolve provider feedback.

Definitions

Business Days – The working days that VRD offices are open for business (typically Monday through Friday, 8 a.m. through 5 p.m., excluding State of Texas observed holidays).

Feedback – An oral or written communication from a VRD provider to a VRD staff member expressing a specific concern, dispute, or complaint. A concern, dispute, or complaint relates to an action or inaction within TWC's scope of authority and control.

Provider – Any provider, contracted or not, of VRD goods and/or services.

Vocational Rehabilitation Division Staff – Employee of the Texas Workforce Commission VRD, including local, regional, and state office division levels.

Process Overview

1. Providers are encouraged to initially submit feedback by phone or email to their local and/or regional offices for collaborative resolution. Local/regional VRD staff that can assist with provider feedback includes the:
 - Rehabilitation Assistant
 - VR Counselor
 - Local Provider Liaison
 - Unit Purchasing Specialist
 - Medical Services Coordinator
 - Unit Support Coordinator
 - VR Unit Supervisor
 - VR Unit Manager
 - Regional Quality Assurance Program Specialist
 - Regional Program Support Specialist
 - Deputy Regional Director
 - Regional Director

2. Local/regional staff will review the feedback and work with the VR team and the provider to reach a resolution.
3. Feedback will generally be resolved within 10 business days unless the feedback involves suspected fraud, waste, or abuse (FWA); or the complexity of the review requires additional time to review the feedback and conclude a resolution.
 - If there is suspected FWA, the feedback information will be forwarded to the TWC Office of Investigation and handled according to their processes and timelines.
 - If the review and resolution will require additional time beyond the 10 days, VRD staff will communicate in writing to the provider, updating the provider on the status of the review.
4. Upon resolution, the local/regional staff will communicate the resolution to the provider in writing.
5. If a resolution at the local/regional level cannot be reached, the provider may escalate the feedback by completing Part 1 and 2 of form VR1200 and emailing the form to the VRD state office (vr.standards@twc.texas.gov).
 - The subject line of the email must read, "Provider Feedback Form VR1200 – [Insert Provider Name]", which allows state office staff to quickly identify the email as time sensitive. The completion and submission of the form, per the instructions, are the responsibility of the provider.
6. Once the completed form is received, state office staff will review and assign the form to the Deputy Regional Director (DRD) of the provider's headquarters. State office staff will track the timeline and progress of the submitted feedback.
7. The DRD will review form VR1200 and assign it to the appropriate VRD staff to review and resolve the feedback. The DRD will track the timeline and progress of the submitted feedback.
8. The assigned staff will review the feedback and work with the VR team and the provider to reach a resolution. The staff working to resolve the feedback may collaborate with the Regional Director (RD), DRD, or state office as needed.
9. Feedback will be resolved in accordance with #3 of these instructions, as stated above.
10. Upon resolution, the assigned staff will complete Part 3 of form VR1200 and email it back to the DRD.
11. Upon review, the DRD will communicate the resolution by emailing the completed VR1200 to the provider, RD, and state office staff (vr.standards@twc.texas.gov).

Form VR1200 Instructions

Form VR1200 allows VRD providers to escalate feedback (concern, dispute, or complaint) that was not resolved at the local and/or regional level to the VRD state office. The completion and submission of the form, per the instructions, is the responsibility of the provider. The form signature may be written or electronic (typed). If the signature is electronic, the form must be submitted via the provider's email account. The VRD state office will retain completed VR1200 form records.

Instructions:

1. The Provider will complete each field in Part 1 and Part 2 of Form VR1200.
2. The Provider will attach and email the completed VR1200 form and any additional documentation or correspondence to support the escalated feedback to vr.standards@twc.texas.gov.
3. Upon resolution, the VRD staff will complete each field in Part 3 of Form VR1200.
4. The assigned Deputy Regional Director (DRD) will email the completed and approved form to state office mailbox (vr.standards@twc.texas.gov) the Provider, and the Regional Director.