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

Revised February 8, 2021

## D-204: The Purchasing Process

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### D-204-4: Replacement Service Authorizations

The specifications in a service authorization (SA) may change during the delivery of services. When this is necessary, it is an after-the-fact replacement service authorization, which is referred to as a replacement SA. Replacement SAs must be issued within five calendar days of the day on which the original SA was canceled or closed, and it is preferred that the new SA is issued before the one being replaced is canceled or closed. If the replacement SA is not issued within five calendar days of the day on which the original SA is canceled or closed, then the new SA must be approved and processed as a backdated SA per the requirements found in [D-204-2: Backdated Service Authorizations](https://twc.texas.gov/vr-services-manual/vrsm-d-200%22%20%5Cl%20%22d204-2). Example: An SA was issued to a vendor for a psychological evaluation. After the billing was received, it was discovered that the SA should have been issued for a neuropsychological.

For documentation requirements for replacement SAs, refer to [VRSM E-300: Case Notes Requirements – After-the-Fact Replacement SA (Word)](https://twc.texas.gov/files/partners/vrsm-e-300.docx).

If a change is needed to services that are delivered by the same vendor (for example, if a change is needed to the MAPS codes), and approval by the VR Manager or state medical director was required on the initial SA, the same approvals must be obtained before issuing the replacement SA.

If a change is needed to services that are delivered by the same vendor (for example, if a change is needed to the MAPS codes), and approval was not required for the original SA or the new SA, then no additional approval is required.

If a change is needed to a vendor, contact the Unit Purchasing Specialist to update the vendor on the original SA.

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## D-208: Invoices

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### D-208-3: Incomplete or Inaccurate Invoices

VR staff must not authorize payment for a product or service without an accurate and complete invoice from the provider. When an invoice is inaccurate or incomplete, VR staff return it to the vendor for correction.

VR staff must:

1. return the invoice and the [VR3460, Vendor Invoice Additional Data Request](http://intra.twc.state.tx.us/intranet/gl/html/vocational_rehab_forms.html), to the vendor within 21 days of receiving the invoice (the VR3460 form tells the vendor what additional information TWC requires to process payment);
2. create a RHW case note to document the date on which the invoice was returned to the vendor and the reason for the return;
3. date-stamp the corrected invoice and use it as the invoice of record for the purchase; and
4. do not acknowledge receipt of the invoice in RHW until the provider submits a corrected invoice or until the disputed point is resolved.

Note: Use the date of resolution as the invoice's received date in RHW, and date-stamp the invoice with that date.

If billing for medically related purchases (MAPS, durable medical equipment, hearing aids, and hospital services) lacks the required invoice data, but all other information on the billing is accurate and complete, the VR staff member attaches the RHW system-generated billing cover sheet for the SA to the billing and uses it in place of an invoice for the associated SA.

When advance payment is authorized by VRSM D-213-2: Advance Payments, the billing statement may be used as the invoice for receiving and paying. If billing for advanced pay situations lacks the required invoice data but all other information on the billing is accurate and complete, the VR staff member attaches the RHW system-generated billing cover sheet for the SA to the billing and uses it in place of an invoice for the associated SA. For additional information about advance payments, refer to D-213-2: Advance Payments.

All other billing must be invoiced on the provider’s or contractor's paperwork that includes all required invoice data.

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