

VR-SFP Chapter 21: Employment Support for Brain Injury

VR-SFP Chapter 21: Employment Support for Brain Injury	1
21.1 Overview of Employment Support for Brain Injury Service Model.....	4
21.2 Staff Qualifications, Ratios, and Training	6
21.2.1 Licensed and Certified Professionals	6
21.2.2 Staff Ratios.....	8
21.2.3 Employment Service Provider	8
21.2.4 Staff Training and Procedures.....	9
21.3 ESBI Provider Qualifications	9
21.4 ESBI Provider Requirements	11
21.4.1 Provider Notifications.....	11
21.4.2 Provider Vehicles	11
21.4.3 Safe and Secure Environment.....	12
21.4.4 Substance Abuse	12
21.4.5 Exceptions and/or Limitations.....	12
21.4.6 Customer Termination by Provider	13
21.4.7 ESBI Referrals to VR.....	13
21.4.8 ESBI Program Evaluation.....	13
21.4.9 Weekly Activity Schedules.....	13
21.4.10 Weekly Time Logs	14
21.4.11 Progress Reports	14
21.4.12 Initial Assessment and Evaluation Plan and Individualized Program Plan Summary Reports	15
21.5 Employment Support for Brain Injury Services.....	15
21.5.1. Case Management Service Definition	16
Service.....	17
Includes Task Such As:	17
Allowed Up To	17
21.5.1.1 Process and Procedures.....	18
21.5.1.2 Outcomes Required for Payment.....	19
21.5.1.3 Fee.....	19

21.5.2 Initial Assessment and Evaluation Plan (IAEP) Service Definition	19
21.5.2.1 Process and Procedures.....	20
21.5.2.2 Outcomes Required for Payment.....	20
21.5.2.3 Fees.....	20
21.5.3 Initial Assessments and Evaluations Service Definition.....	20
21.5.3.1 Therapy Evaluations	21
21.5.3.2 Employment Service Evaluations.....	21
21.5.3.3 Process and Procedures.....	23
21.5.3.4 Outcomes Required for Payment.....	23
21.5.3.5 Fees.....	24
21.5.4 Individual Program Plan (IPP) Service Definition	24
21.5.4.1 Process and Procedures.....	25
21.5.4.2 Outcomes Required for Payment.....	25
21.5.4.3 Fees.....	25
21.5.5 Therapy Services—Definition	25
21.5.5.1 Process and Procedures.....	27
21.5.5.2 Outcomes Required for Payment.....	27
21.6 Employment Services Definition	28
21.6.1 Process and Procedures.....	29
21.6.2 Outcomes Required for Payment.....	29
21.6.3 Fees.....	30
21.7. Discharge Service Definition	30
21.7.1 Process and Procedures.....	31
21.7.2 Outcomes Required for Payment.....	31
21.7.3 Fees.....	31
21.8 Behavior Intervention Plan (BIP) Service Definition	31
21.8.1 Process and Procedure	32
21.8.2 Outcomes Required for Payment	32
21.8.3 Fees	33
21.9 Ancillary Goods and Services	33
21.10 Residential Services	33
21.11 Nonresidential Services	34

21.12 ESBI Rates	35
21.12.1 Cotreatments with Multi Clinical Therapists	35
21.12.2 Groups of Customer Seen by One or More Clinical Therapists	35
21.12.3 Employment Services Provided by Clinical Therapist.....	35
21.12.4 Premium Payments	36
21.12.4 Nonresidential Rate Structure	36
21.12.4.1 Core Services	36
21.12.4.2 Example of how to Calculate a Rate	37
21.12.4.3 Case Management Services	38
21.12.5 Residential Rate Structure.....	38
21.12.5.1 Residential Base Rate	38
21.12.5.2 Core Service Rates.....	38
21.12.5.3 Example of How to Calculate Residential Rate for a Day	39
21.12.5.4 Employment Services Rates	39
21.13 Billing Procedures	40
21.13.1 Co-Pay and Coinsurance	40
21.13.2 Family Cost Share	41
21.13.3 Invoices	41

Contract Type: Employment Support for Brain Injury

The contractor and contractor’s staff that provides the services described in this chapter also must comply with Chapters 1–3 of the VR Standards for Providers manual.

The Employment Support for Brain Injury (ESBI) contract must identify the licensed and certified professionals that the provider plans to use in the delivery of ESBI services.

To obtain a ESBI contract, the provider must also either:

- obtain a contract for Employment Services, which can include Vocational Evaluations, Environmental Work Assessments, Vocational Adjustment Training, Work Experience Services, Job Placement Services, Job Skills Training, and/or Supported Employment; or

- maintain a formal documented partnership and/or subcontract with a TWC-VR Employment Service Provider contractor to provide Vocational Evaluations, Environmental Work Assessments, Vocational Adjustment Training, Work Experience Services, Job Placement Services, Job Skills Training, and/or Supported Employment.

When a ESBI provider chooses to partner with another approved TWC-VR Employment Service provider, the ESBI contract must provide documentation signed by all parties that outlines the relationship and roles of the agreement to the ESBI-assigned contract manager and to the state office program specialist assigned to ESBI. When a ESBI provider subcontracts TWC-VR employment services, the ESBI provider must maintain an Employment Services Contract and must comply with [3.1.6.1 Subcontractors](#).

For more information about the VR standards for providers, the provider can contact a state office program specialist at vr.standards@twc.state.tx.us.

Definitions of the terms that apply to this contract are listed in the [VR Glossary](#).

21.1 Overview of Employment Support for Brain Injury Service Model

Employment Support for Brain Injury (ESBI) is designed to integrate the therapeutic and employment needs of VR customers who have persistent functional limitations resulting from an acquired brain injury (traumatic and non-traumatic injuries). ESBI services are individualized and multidisciplinary with a focus on employment. ESBI may involve the coordinated services of multiple providers for the achievement and retention of competitive integrated employment consistent with the customer’s unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

Customers may:

- obtain employment on their own or by working with an employment service provider by participating in Bundled Job Placement or Supported Employment services while at the same time receiving cognitive and/or other therapeutic services from a ESBI contractor; or
- participate in work or volunteer experiences and other work readiness employment services while also receiving cognitive and/or other therapeutic services before obtaining a permanent job.

ESBI services focus on the customer’s ability to obtain and maintain employment and to participate in community reintegration activities to prepare for employment by:

- increasing skill development, performance, use of adaptive equipment, and/or assistive technology, and use of compensatory techniques in the following areas:

- Activities of daily living required for employment
- Adjustment to disability
- Behavior management
- Cognitive performance
- Endurance
- Mobility
- Self-care
- Speech and communication
- identifying and establishing the use of community resources that increase the customer's independence within the customer's home, community, and work settings; and
- evaluating the customer's functional use of the community resources that have been established.

ESBI services can be performed in either a nonresidential or residential setting. The VR counselor and customer will determine which services are necessary to meet the customer's individual employment needs and circumstances.

Both the ESBI therapist and ESBI employment service provider(s) can provide evaluations and services to address the following:

- Determining a customer's abilities as they relate to obtaining and maintaining competitive integrated employment
- Identifying work tasks and work environments that best align with the customer's skills, abilities, and interests by engaging in:
 - simulated work activities;
 - job samplings;
 - situational assessments;
 - environmental work assessments; and/or
 - volunteer or paid work experiences
- Evaluating a customer's work environments and work tasks, making recommendations to modify and implement strategies to improve the customer's abilities and/or performance (this includes the final job for case closure)
- Teaching the customer's support system, such as parents, friends, spouse, employer, and other professionals how to foster the customer's independence within the work setting, home, and community
- Providing other support services that will address employment barriers and the development of skills necessary to perform effectively in a work setting

ESBI services will include one or more employment services, as described in this manual, such as:

- Environmental Work Assessments:
- Vocational Evaluations:

- Vocational Evaluation - Situational Assessments and Work Samples;
- Work Readiness Services (Vocational Adjustment Training);
- Work Experience Services (Placement, Training and Monitoring);
- Bundled Job Placement Services;
- Job Skills Training; and
- Supported Employment (Supported Employment Assessment and Placement).

A ESBI employment service provider will assist the customer, when necessary, in obtaining competitive integrated employment for a successful employment outcome.

The customer's Individualized Plan for Employment (IPE), Initial Assessment and Evaluation Plan (IAEP), Individualized Program Plan (IPP) and service authorization(s) will identify which assessments, evaluations, and services a customer will receive and who will provide the assessment, evaluation, and service.

The customer's participation in ESBI should lead to the customer obtaining competitive integrated employment, as defined in CFR §361.5(c)(9). The customer must also have unexpired employment authorization documents to participate in the ESBI services.

The VR counselor monitors the customer's progress throughout participation in ESBI services by meeting regularly with the customer and the customer's interested support system, as authorized; the ESBI provider; and other interdisciplinary team members, and by reviewing the documentation submitted.

When rehabilitation treatment is not leading to progress toward employment goals, the VR counselor works with members of the IDT to develop appropriate modifications to the plan. When this is not possible, the VR counselor may discontinue sponsorship of the treatment and address alternatives for independent living or other services as indicated.

21.2 Staff Qualifications, Ratios, and Training

All staff qualifications and training required by the provider's license, registration, and/or credential must be maintained per applicable regulations and requirements.

Each ESBI provider who has an employment services contract must have a designated director who maintains the University of North Texas Workplace Inclusion & Sustainable Employment (UNTWISE) director credential and serves as the primary contact between TWC-VR and the provider. See VR-SFP [3.1.5 Director](#) for more information.

TWC-VR purchases services only from providers that comply with the appropriate standards in this manual and applicable federal and state licensing standard and/or certification.

21.2.1 Licensed and Certified Professionals

The ESBI provider must keep proof of a license or certification on file for any licensed or certified professional and must produce the license or certification at the request of TWC staff.

Below are the qualifications for the licensed professionals who provide ESBI services.

Behavior Management Provider

Must be a Psychologist or Neuro Psychologist, a LCSW, LPC or licensed by the Texas Department of Licensing and Regulation as a Behavior Analyst (BA).

Cognitive Rehabilitation Therapist

Must be licensed as one of the following:

- Psychologist, with a license from the Texas State Board of Examiners of Psychologists
- Psychiatrist, with a license from the Texas Medical Board
- Occupational therapist, with a license from the Texas Board of Occupational Therapy Examiners
- Speech and language pathologist, licensed by the Texas Department of Licensing and Regulation

Occupational Therapist

Must be licensed by the Texas Board of Occupational Therapy Examiners to practice in the state where services are rendered.

Physical Therapist

Must be licensed by the Texas Board of Physical Therapy Examiners to practice in the state where services are rendered.

Psychologist or Neuropsychologist

Must be licensed by the Texas State Board of Examiners of Psychologists or licensed to practice in the state where service is rendered (unless exempt).

Community-based behavioral health and developmental disability services centers and some state agencies are exempt from the licensing act.

Speech and Language Pathologist

Must be licensed as a speech and language pathologist by the Texas Department of Licensing and Regulation.

Below are the qualifications for the certified professionals who provide ESBI services.

Brain Injury Specialist

Must be certified by the Brain Injury Association of America as a Certified Brain Injury Specialist (CBIS). For information go to [Brain Injury of America](#).

Case Manager

Must be certified by the Commission for Case Manager Certification or be a master-level social worker or licensed or certified professional, as listed in this section of the chapter, with a minimum of five years of experience in case management for individuals with brain injury. For information go to [Commission for Case Manager Certification](#).

Therapeutic Recreation Specialist

Must be certified by the National Council for Therapeutic Recreation Certification as a Certified Therapeutic Recreation Specialist (CTRS). For information go to [National Council for Therapeutic Recreation Certification](#).

21.2.2 Staff Ratios

The ESBI provider must provide sufficient direct-care staff, per state licensure requirements, to manage and supervise customers in accordance with their Individualized Program Plan (IPP). The provider must have enough direct-care staff to provide care and services so that customers do not injure themselves or others or destroy property. Special staffing needs identified by the IPP (for example, one-to-one ratios) must be provided. Adequate numbers of direct-care staff must be available to supervise customers during periods of time when other direct-care staff members are unavailable (for example, during breaks, meals, meetings, and training).

21.2.3 Employment Service Provider

Any individual who provides employment-related services, via a TWC-VR Employment Services contract, must meet the staff qualifications prescribed for employment services in the SFP. When a ESBI contractor subcontracts any service from another approved Employment Services provider, the contractor must ensure that the staff providing the service(s) meets the prescribed qualifications in the SFP. To obtain an Employment Services contract, for any service, the applicant must have an employee that meets the qualifications of the service.

The provider's director must approve the [VR3455, Provider Staff Information Form](#), completed by each staff member, and submit the approved form to the provider's assigned TWC contract manager and assigned VR regional program specialist.

The links below will take you to the qualifications:

[Vocational Evaluator](#)

Environmental Work Assessment Evaluator

Vocational Adjustment Trainer

Job Placement Specialist or Work Experience Specialist

Job Skills Trainer or Work Experience Trainer

Supported Employment Specialist

A supported employment specialist must have a:

- current UNTWISE Supported Employment credential; and
- high school diploma or GED, but a bachelor's degree in rehabilitation, business, marketing, or related human services is preferred.

21.2.4 Staff Training and Procedures

All direct care staff and Employment Services provider staff members who provide direct services must receive, before assuming any job responsibilities and at least annually thereafter, training in the following areas:

- Reporting of abuse, neglect, or exploitation
- Confidentiality of customer information that includes, but is not limited to, data usage agreement information
- Universal precautions (infection control, per the Occupational Safety and Health Administration)
- Conditions about which they should notify the facility manager or manager of the non-facility program
- Customers' rights
- Emergency and evacuation procedures
- Safety measures to prevent accidents and injuries
- Emergency first-aid procedures, such as the Heimlich maneuver and actions to take when a customer falls, suffers a laceration, or experiences a sudden change in physical and/or mental status
- Managing disruptive behavior
- Emergency restraint behavior management (for example, prevention of aggressive behavior and de-escalation techniques, practices to decrease the frequency of the use of restraint, and alternatives to restraints)
- Fall prevention
- Effective and descriptive documentation

21.3 ESBI Provider Qualifications

To provide services in the ESBI model the provider must maintain active TWC-VR contracts for ESBI. For Employment Services, the provider must also maintain a TWC-VR Employment Services contract which includes Supported Employment Services unless the provider has a formal partnership or subcontract with a TWC-VR Employment Services provider who has Supported Employment Services in their contract. The ESBI contractor must provide documentation, signed by all parties, that outlines the relationship and roles of the agreement to the ESBI-assigned contract manager and to the state office program specialist assigned to ESBI.

All residential and nonresidential contractors providing ESBI services must be current in their registration or licensure, with one or more of the following, as applicable and as required by Texas law:

- Home and Community Support Service Agencies (HCSSA)
- The Texas Board of Physical Therapy and Occupational Examiners Facility Registration
- Assisted living facility (ALF)
- [Health facility](#)

Facilities providing only psychological or neuropsychological services, evaluations and cognitive therapy are waved from the above requirements as long as all staff are appropriately licensed or certified, and all other standards and contracting requirements are met. OT and PT services must be provided with a facility registration.

A residential ESBI provider must also maintain accreditation from:

- the Commission on Accreditation of Rehabilitation Facilities;
- the Joint Commission (accreditation of healthcare organizations); or
- the Disease-Specific Care Certification in Brain Injury or related Rehabilitation Program.

TWC-VR may grant a two-year grace period for a residential facility to obtain an accreditation listed above, when the residential facility is a new contractor with TWC-VR.

All contractors must maintain current proof of all required licenses, registrations, and accreditation with the contractor's assigned TWC-VR contract manager and state office program specialist assigned to the ESBI.

When the facility is inspected, the contractor is required to provide any monitoring and/or inspection report summaries by other agencies to the assigned TWC-VR contract manager and the state office program specialist assigned to the ESBI program within five business days of receiving the report.

TWC-VR will not refer new customers to an ESBI contractor whose licensure, registration, or accreditation is under an action to deny or suspend, is revoked, or is not renewed, until such action has been resolved. A facility currently providing services to VR customers is required to notify TWC-VR when the facility's licensure, registration, or accreditation is suspended or revoked within one business day of receiving notification. A facility that fails to timely notify TWC-VR of any such action is considered out of compliance with contract terms and conditions.

TWC-VR mandates that the facility must comply with the Americans with Disabilities Act (ADA) and must complete the "ADA Checklist for Existing Facilities," based on the 2010 ADA Standards for Accessible Design, found at <http://www.adachecklist.org/checklist.html>. This document must be kept on file and made available to TWC-VR staff upon request.

21.4 ESBI Provider Requirements

In addition to this chapter the provider is responsible for meeting the requirements published in the following:

- [SFP Chapter 1: Introduction to Vocational Rehabilitation](#)
- [SFP Chapter 2: Obtaining a Contract for Goods and Services](#)
- [SFP Chapter 3: Basic Standards](#)

Below are additional requirements that apply when a contractor has a contract for the ESBI program.

21.4.1 Provider Notifications

The provider must notify the VR counselor when any of the following occur:

- Significant changes in the customer's health and/or condition
- Occurrences or emergencies related to the customer's health and safety
- The customer or the customer's representative requests that services end
- The customer refuses to comply with the Initial Assessment and Evaluation Plan (IAEP) or the Individual Program Plan (IPP)
- The customer is absent for more than one day
- The facility believes that a customer's functional needs have changed such that it will impact the client's level of care
- The facility is notified by regulatory agencies of any enforcement action

21.4.2 Provider Vehicles

When a ESBI program owns and operates a vehicle to transport TWC-VR customers, it must ensure that transportation is available in accordance with the ADA and with all applicable state laws. The ESBI program must also be in compliance with insurance requirements as stated in SFP [Chapter 3, 3.2 Insurance Requirements](#).

21.4.3 Safe and Secure Environment

ESBI contractors must use physical and chemical restraints only when necessary to maintain a customer's safety or the safety of others.

Residential providers must have identified staff trained to administer physical and chemical restraints in an emergency to maintain safety, as allowed by the licensees and certifications held as a ESBI provider.

Nonresidential providers must have identified staff trained to administer basic physical restraint techniques and use community emergency providers, when necessary to physically and chemically restrain a customer.

All providers must develop policies and procedures and train staff on how to respond to emergency situations. TWC-VR requires that all emergency situations, including use of physical and chemical restraints, be reported as explained in [3.3.11 Safe and Secure Environments](#). The provider must document the details of the incident in a written report and provide the report to the VR counselor.

When the customer's escalated behaviors can be managed with a behavior plan, a plan must be developed and included as part of the customer's IPP. See [21.8 Behavior Intervention Plan \(BIP\) Service Definition](#) for requirements.

Customers who are assessed to have aggressive or dangerous behaviors to themselves or others that cannot be regulated with medication will be considered not ready to benefit from ESBI services until the behavior issues are resolved. The VR counselor will work with the provider to discharge the customer to a safe environment.

21.4.4 Substance Abuse

If the provider observes or has other evidence of the customer's use of alcohol or drugs, the provider must report the observations and evidence immediately—within one business day—to the VR counselor. The provider must document that the VR counselor was informed of all observations and other evidence of the customer's use of alcohol or drugs.

21.4.5 Exceptions and/or Limitations

If a customer requires medical treatment for an injury sustained while receiving ESBI services or requires treatment for an illness derived from participating in services (such as food poisoning, known food allergic reaction from a known allergy) that is not related to the customer's acquired brain injury, the customer's medical services and expenses would be the liability of the contractor and are not covered by the VR program as ESBI services. If for any reason the customer should become unable to participate and/or is not progressing toward goal attainment in the Individual Program Plan (IPP), the interdisciplinary team (IDT) will need to prepare the customer for discharge to another appropriate resource.

21.4.6 Customer Termination by Provider

If the provider plans termination of services for reasons other than successful employment, the provider must inform the VR counselor that a customer's services are being terminated before the termination takes place. The provider must document that the provider informed the VR counselor about the termination of services to a customer.

The provider must follow the state and federal requirements applicable to the license or certification relating to discharge procedures. The provider must ensure the customer is safe, determine a discharge site, and facilitate placement.

Some reasons for termination before achieving goals include:

- behaviors dangerous to oneself or others;
- no measurable progress being made toward the customer's IPP; or
- refusal to participate in services.

Also refer to [SFP 3.6.5 Termination of Service Delivery](#).

21.4.7 ESBI Referrals to VR

See SFP [3.3.8 Referrals to VR by Providers](#) for information.

21.4.8 ESBI Program Evaluation

The ESBI provider must comply with [SFP 3.6.4 Evaluation of Service Delivery](#).

ESBI programs are monitored for the success rate of customers obtaining and maintaining competitive integrated employment while receiving ESBI services and after VR closure.

When applicable [SFP 3.13 Contract Noncompliance and Performance Deficiencies](#) will be enforced.

21.4.9 Weekly Activity Schedules

Nonresidential

The weekly activity schedule must:

- include all core services and goals outlined in the customer's IPP;
- facilitate participation that integrates cognitive skills into all activity engagement;
- demonstrate that the services delivered are focused on preparing the customer to obtain the skills necessary to engage in competitive integrated employment (for example, work simulations, work experience, and volunteer activities);
- be provided to the customer;
- be sent to the VR counselor weekly; and
- be included with the invoice.

Residential

The weekly activity schedule must:

- include all core services and goals outlined in the customer's IPP;
- facilitate participation that integrates cognitive skills into all activity engagement;
- demonstrate that the services delivered are focused on preparing the customer to obtain the skills necessary to engage in competitive integrated employment (for example, work simulations, work experience, and volunteer activities);
- include activities of daily living, meals, and non-therapy activities focused on further skill development;
- be provided to the customer;
- be sent to the VR counselor weekly; and
- be included with the invoice.

21.4.10 Weekly Time Logs

Weekly time logs must include all therapy sessions and applicable employment services provided to the customer. Time is recorded in 15-minute increments:

- totaling each type of service provided each day;
- totaling each type of service provided for the week; and
- totaling all services provided for the week.

A week is defined as Sunday through Saturday.

Weekly time logs are submitted to the VR counselor weekly and included with the monthly invoice submitted to the VR unit's purchasing specialist. Services recorded in the weekly time log must match the entries in daily and weekly progress notes for any service provided by [licensed and certified professionals](#).

21.4.11 Progress Reports

Any services provided by [licensed and certified professionals](#) must be documented with a daily progress note. All services provided must be related to a goal on the customer's IPP. Goals addressed in the daily service must be noted in the documentation. The amount of services provided must be noted in 15-minute increments. Time recorded in the progress report for documentation, communication (for example, email messages and phone calls), and travel time is noted with 0 (zero). Reimbursement for administrative cost related to documentation, email messages and phone calls are included in the rates. Progress reports are submitted weekly to the VR counselor and included with the monthly invoice submitted to the VR unit's purchasing specialist.

21.4.12 Initial Assessment and Evaluation Plan and Individualized Program Plan Summary Reports

A detailed summary report for each discipline providing service must be completed after each IAEP and IPP meeting. The summary must describe the progress status toward any goals identified on the plans, discharge disposition information, and/or newly identified issues.

21.5 Employment Support for Brain Injury Services

ESBI services are designed to integrate clinical therapies and employment services to result in the customer achieving competitive integrated employment. Clinical therapies are partnered with employment service providers to achieve the goals outlined in an Individual Program Plan (IPP).

Evaluations and assessments are authorized by the VR counselor with a TWC-VR service authorization to determine if ESBI services are necessary. Assessments and evaluations cannot be performed without a service authorization.

When a customer has transferred from another therapy based service to ESBI services, the evaluation(s) previously completed may be sufficient to determine whether ESBI services are necessary and to develop the customer's ESBI IPP. The interdisciplinary team (IDT) recommends when evaluations are necessary. The VR counselor determines the evaluations that will be provided via the service authorization.

The results of the initial assessments identify the goals for cognitive rehabilitation, goals for other therapies and employment services, and the need for any additional supports to be included in the customer's case-managed IPP. The IDT provides services and supports for the customer when authorized by the VR counselor with a service authorization.

Initial and continued funding for ESBI services is contingent on the availability of VR funds and the decision of the VR counselor on the customer's progress toward the established goals of preparing for, securing, retaining, or advancing in employment.

Below are descriptions of services available through ESBI services.

21.5.1. Case Management Service Definition

Case management services are client-centered, safe, timely, effective, efficient, and equitable, and are in alignment with customer's Initial Assessment and Evaluation Plan (IAEP) or Individual Program Plan (IPP). Case management services are only available for customers in a nonresidential setting.

Case managers serving customers in a residential setting must provide the same tasks as those described below; the fee to perform the services is included in the residential service base rate.

The case manager may provide the following:

Service	Includes Task Such As:	Allowed Up To
Facilitation of the Initial Assessment and Evaluation Plan (IAEP) Meeting and Associated Reports	<p>Includes tasks such as the following:</p> <ul style="list-style-type: none"> • Receiving the referral and service authorization for case management for nonresidential services Note: When residential services are recommended, the VR counselor coordinates a referral with a ESBI provider, and case management services begin with the coordination of initial evaluation and associated reports. • Scheduling the IAEP meeting • Identifying all interdisciplinary team members • Gathering any medical and therapy documentation (evaluation and treatment), as applicable • Ensuring the IAEP is completed and includes all required elements and signatures • Obtaining any required prescriptions • Ensuring the IAEP is updated and the summary report is completed after evaluations are completed 	Allowed 1 time per admission
Coordination of Initial Evaluation and Associated Reports	<p>Includes tasks such as the following:</p> <ul style="list-style-type: none"> • Coordinating insurance and other comparable benefits for primary billing • Gathering any medical and therapy documentation (evaluation and treatment), as applicable • Obtaining any required prescriptions • Obtaining service authorizations for each evaluation • Arranging the customer's admission • Submitting completed evaluation reports to the VR counselor 	Allowed 1 time per admission
Coordination of Initial IPP and Associated Reports	<p>Includes tasks such as the following:</p> <ul style="list-style-type: none"> • Receiving the referral and service authorization • Scheduling the IPP meeting • Identifying all interdisciplinary team members • Ensuring that the IPP is completed and includes all required elements and signatures • Obtaining any required prescriptions and service authorizations for each service in IPP; • Coordinating and setting up any Employment Services provider services • Identifying insurance and comparable benefits for primary billing • Arranging admission 	Allowed 1 time per admission

<p>Coordination of Monthly IPP Reviews and Associated Reports</p>	<p>Includes tasks such as the following:</p> <ul style="list-style-type: none"> • Coordinating insurance and other comparable benefits for primary billing • Submitting the weekly activity schedules, time logs, and progress reports for each therapy service listed in the customer's IPP to the VR counselor • Scheduling the monthly IPP meeting • Ensuring all required elements and signatures are included on the IPP • Ensuring the IPP summary report is completed • Obtaining service authorizations and prescriptions for all services for the upcoming month • Communicating any change in the customer's participation, such as absenteeism, illness, injuries, and/or lack of engagement • Coordinating and setting up any Employment Services provider services 	<p>Allowed 1 time per month</p>
<p>Coordination of Discharge Summary and Associated Reports</p>	<p>Includes tasks such as the following:</p> <ul style="list-style-type: none"> • Arranging any services required for the customer to maintain employment, such as long-term supports or adaptive equipment • Scheduling the discharge IPP meeting • Ensuring all required elements and signatures are included on the discharge IPP; • Ensuring the discharge IPP summary report is completed • Submitting all discharge evaluation reports to the VR counselor • Coordinating insurance and other comparable benefits for primary billing • Obtaining the required documentation for the billing process 	<p>Allowed 1 time per admission</p>

21.5.1.1 Process and Procedures

Nonresidential

The ESBI provider receives a referral and a service authorization for case management and assigns a case manager.

Residential

When residential services are recommended, the VR counselor coordinates a referral with an ESBI provider and case management services begin with the coordination of initial evaluation and associated reports.

Nonresidential and Residential

The case manager performs the tasks listed in the service definition by completing a progress report to document the completed task(s).

The case manager ensures the requirements for the following are completed:

- IAEP
- IPP
- TWC-VR SFP progress report
- [TWC-VR SFP 21.4.9 Weekly Activity Schedules](#)
- [TWC-VR SFP 21.4.10 Weekly Time Logs](#)
- Billing

The case manager submits the progress report that describes the tasks completed and submits the invoice.

21.5.1.2 Outcomes Required for Payment

Nonresidential

The case manager documents in descriptive terms the tasks completed for the following:

- Facilitation of the evaluation plan meeting and associated reports;
- Coordination of the initial evaluation and associated reports;
- Coordination of the initial IPP and associated reports;
- Coordination of the monthly IPP reviews and associated reports; and
- Coordination of the discharge summary and associated reports.

Payment for the above case management services is made when the VR counselor approves the submitted:

- progress report; and
- invoice.

21.5.1.3 Fee

[Non-residential](#)

[Residential](#)

21.5.2 Initial Assessment and Evaluation Plan (IAEP) Service Definition

The IAEP is completed to identify any therapy evaluations or employment services to be used to determine the customer's abilities related to obtaining and maintaining competitive integrated employment. During the meeting any existing evaluation(s) are reviewed to determine what evaluations, if any, need to be completed before the IPP is developed.

The IAEP must include measurable goals that identify:

- the evaluation(s) and assessment(s) that will be completed;
- the focus of each initial assessment(s) and/or evaluation(s);
- the licensed and/or certified professional and/or the qualified employment service provider that will complete the assessment(s) and/or evaluation(s);
- the amount of time approved to complete the assessment(s) and/or evaluation(s);
- the location where the assessment(s) and/or evaluation(s) will be completed (nonresidential or residential); and
- a functional behavior analysis (FBA), if applicable.

21.5.2.1 Process and Procedures

TWC-VR sends a referral packet to the ESBI provider.

The case manager:

- obtains any needed medical records and previously completed assessments and evaluations; and
- arranges the IAEP meeting.

The VR counselor outlines the TWC-VR expectations for the customer's participation in ESBI services.

The IDT completes the IPP.

The case manager obtains the required prescriptions.

TWC-VR issues service authorizations for therapies and employment services for the amount of time described in the IAEP.

21.5.2.2 Outcomes Required for Payment

The case management fee is available only for nonresidential services.

See the requirement for the case management services definitions for:

- facilitation of the evaluation plan meeting and associated reports; and
- coordination of initial evaluation and associated reports.

21.5.2.3 Fees

Nonresidential-A case manager can bill for attendance, reporting and documentation related to the IAEP. A licensed and/or certified professional may bill one 15-minute increment for attendance of a customer's IAEP or IPP.

[Residential](#)—All IAEP member fees, including the case manager fee, are included in the residential base daily rate.

21.5.3 Initial Assessments and Evaluations Service Definition

The assessments and evaluations are performed by licensed and/or certified professionals, as previously defined, and/or by TWC-VR qualified Employment Services providers. Initial assessments are performed for both residential and nonresidential customers, as authorized by the VR counselor and as prescribed by the treating physician. Assessments and evaluations results must identify recommendations for:

- the customer's abilities, deficits, and potential to obtain and maintain competitive integrated employment;
- the customer's potential to secure, retain, and advance in employment;
- the customer's employment goal(s), transferable skills, and employment barriers;
- licensed and/or certified professional therapy service(s) and/or employment services to be provided; and
- the customer's measurable goals.

21.5.3.1 Therapy Evaluations

Therapy evaluations include the following:

- Cognitive rehabilitation evaluation;
- Occupational therapy evaluation;
- Speech therapy evaluation;
- Physical therapy evaluation;
- Psychological evaluation;
- Neuropsychological evaluation;
- Functional behavior assessment;
- Community re-integration evaluation;
- Functional capacity assessment; and
- Situational assessment.

21.5.3.2 Employment Service Evaluations

The following employment services can be used to conduct evaluation activities.

Vocational Evaluation is an assessment of an individual's work and training background, general functional capacities, and social and/or behavioral characteristics. The vocational evaluation must contain a detailed description of the customer's behaviors and must describe any implications for the workplace. The evaluation must be designed to determine the customer's present and future vocational potential. For a detailed service description, the process and procedures, and the outcomes required for payment, see [4.3 Vocational Evaluation](#).

Vocational Evaluation—Situational Assessments and Work Samples are tools to help the customer and VR counselor determine the customer’s long-term goals related to obtaining competitive integrated employment. The prerequisite is a completed vocational evaluation. For a detailed service description, the process and procedures, and the outcomes required for payment, see [4.4 Vocational Evaluation - Situational Assessments and Work Samples](#)

Environmental Work Assessment (EWA) is a diagnostic tool that assesses how the customer responds to variables in a work environment. The EWA is an accurate assessment of the correlations between a customer’s performance and environmental variables and is critical to the customer’s ability to obtain and maintain employment. Results of the assessment identify the variables in a work environment that affect the customer’s ability to function at the customer’s full potential. For a detailed service description, the process and procedures, and the outcomes required for payment, see [4.5 Environmental Work Assessment](#).

Work experience services allow a customer to be placed at a business or an agency within the community to gain short-term experience to obtain skills that are transferable to future long-term competitive integrated employment. Work experience can assist in determining whether a customer is ready for competitive integrated employment; exploring career options; and/or developing skills to include in the individual’s résumé for a certain vocation. There are three Work Experience Services. For detailed service descriptions, the process and procedures, and the outcomes required for payment of each service, see the applicable link below:

- SFP [14.3 Work Experience Placement](#)
- SFP [14.4 Work Experience Monitoring](#)
- SFP [14.5 Work Experience Training](#)

Supported Employment-Assessment (SEA) is for customers with the most significant disabilities. The SEA is a person-centered evaluation that includes a discovery process that takes approximately 20–30 hours to:

- interview members of the customer’s circle of support;
- observe the customer’s work skills, life skills, and behaviors at home and in the community;
- tour current or potential work environments with the customer;
- identify and observe vocational interests, preferences, and themes;
- collect personal, school, and employer reference information;
- assess the customer’s learning styles and needs for adaptive technology, accommodations, and on-site supports;

- assess and identify the customer’s strengths, challenges, and transferable skills by exploring the customer’s interests, capabilities, preferences, motivations, learning styles, challenges, ongoing support needs, and resources;
- learn about employment conditions related to the customer’s preferences, resources, and support needs to achieve and maintain employment outcomes;
- understand the customer’s need for Extended Services and supports at or away from the jobsite to ensure success in competitive integrated employment;
- complete informational interviews and work skills observations (completed by the customer); and
- complete the assessment summary.

For a detailed service description, the process and procedures, and the outcomes required for payment for each, see [SFP Chapter 18 Supported Employment](#).

21.5.3.3 Process and Procedures

The ESBI service provider and/or employment service provider receives the service authorization(s) for the approved assessment(s) and evaluation(s) identified in the customer’s IAEP.

Assessments and evaluations are scheduled.

The assessments and/or evaluations are performed by licensed and/or certified professionals and/or by qualified TWC-VR employment service providers.

[Weekly Activity Schedules](#) and [Weekly Time Logs](#) are completed.

A licensed and/or certified professional or qualified employment service provider completes the required assessment and/or evaluation reports.

Reports are submitted to the VR counselor.

21.5.3.4 Outcomes Required for Payment

The VR counselor receives the following accurate and descriptive documents associated with the licensed and/or certified professional evaluation or assessment or qualified employment service evaluations:

- A copy of the customer’s weekly activity schedule
- A weekly time log recording all billable time for evaluations completed by the licensed and/or certified professional
- Evaluation and/or assessment reports for all evaluations and assessments identified in the IAEP and service authorizations
- Any employment services provided, as identified in the IAEP and service authorization documentation submitted
- The updated IAEP summary, which records the results of completed assessments and evaluations.

The assessment and evaluation results contain:

- the customer's abilities, deficits, and potential to obtain and maintain competitive integrated employment;
- the customer's potential to secure, retain, and advance in employment;
- the customer's employment goal(s), transferable skills, and employment barriers;
- recommendations for the licensed and/or certified professional therapy service and/or employment services to be provided; and
- the customer's measurable goals.

Assessments and evaluations are paid based on:

- the approved time listed in the IAEP;
- the time recorded on the customer's weekly time log; and
- the time recorded on the assessment and/or evaluation reports.

Payment for assessment and evaluation services are paid when the VR counselor approves the submitted:

- [weekly time log\(s\)](#);
- assessment and/or evaluation reports;
- employment service documentation; and
- invoice.

21.5.3.5 Fees

A case manager can bill for attendance, reporting, and documentation related to the IAEP for Nonresidential services. A licensed and/or certified professional may bill one 15-minute increment for attendance of a customer's IAEP or IPP.

- [Nonresidential](#)
- [Residential](#)

21.5.4 Individual Program Plan (IPP) Service Definition

The IPP is completed to identify any therapy or employment services interventions to be provided to improve the customer's skills and abilities related to obtaining and maintaining competitive integrated employment. During the initial meeting, goals are established; goal status is reported in monthly meetings; and goals are updated, added and removed, as necessary. The customer's IPP is updated at a minimum of every 30 calendar days or more frequently to respond to a customer's change needs that require immediate attention for safety or continued engagement in the program and at discharge. The completed IPPs must be submitted three business days after the IPP meeting is held. The IPP must be approved and signed by the VR counselor, with a service authorization issued before service delivery.

The IPP must include measurable goals that identify:

- the therapy and/or employment services to be provided;
- the focus of each therapy and/or employment service to be provided;
- the licensed and/or certified professional and/or qualified employment service provider that will provide the therapy and/or employment service;
- the amount of time approved for each therapy and/or employment service;
- the location where the therapy and/or employment service will be completed (nonresidential or residential);
- the discharge location;
- discharge date; and
- a behavior plan, if applicable.

21.5.4.1 Process and Procedures

TWC-VR sends the case manager and the employment service provider the service authorizations.

The case manager arranges the IPP meeting.

The IDT completes and updates the IPP.

The case manager obtains the required prescriptions.

TWC-VR issues service authorization for therapy, employment service, and any ancillary good/service as defined in the IPP.

21.5.4.2 Outcomes Required for Payment

Case management fee is only available for nonresidential services.

See requirement for case management service definition for the following:

- Coordination of Initial IPP and Associated Reports
- Coordination of Monthly IPP Reviews and Associated Reports

21.5.4.3 Fees

Nonresidential—only a case manager can bill for attendance, reporting, and documentation related to the IPP.

[Residential](#)—all IDT members, including the case manager's fee, are included in the Residential base daily rate.

21.5.5 Therapy Services—Definition

Therapy services are performed by licensed and/or certified professionals. Services are performed for both residential and nonresidential customers, as authorized by the VR counselor and prescribed by the treating physician. Residential therapy services are limited to 120 cumulative calendar days of therapy, unless a TWC-VR manager approves additional days of therapy. Nonresidential hours must total 20 hours or fewer per week, for no more than 12 weeks. Additional times require VR manager approval.

Therapy services should develop and improve the customer's:

- abilities, deficits, and potential to obtain and maintain competitive integrated employment;
- transferable skills;
- potential to secure, retain, and advance in employment; and
- knowledge and use of adaptive equipment, assistive technology, and compensatory techniques to address employment barriers.

Time spent completing documentation, phone calls, emails, and travel are not counted as therapy services. A licensed and/or certified professional may bill one 15-minute increment for attendance of a customer's IAEP or IPP.

When therapy services are performed in the community setting, the ESBI provider can bill for travel once per day. See [21.12.3 Premium Payments](#).

Therapy Services include, but are not limited to the following:

- Cognitive Rehabilitation Therapy (provided by Psychologist, Neuropsychologist, OT, PT or SLP)
- Occupational Therapy(OT) (provided by OT only)
- Speech Therapy(SLP) (provided by a SLP only)
- Physical Therapy(PT) (provided by a PT only)
- Psychological Services (provided by a psychologist only)
- Neuropsychological Service (provided by a neuropsychologist only)
- Behavior Interventions (created by Behavior Analyst, cognitive therapist; LCSW, LPC and/or psychologist or neuropsychologist, implemented by the IDT).
- Community Re-integration (provided by OT, PT, SLP,CTRS or CBIS)
- Simulated Work Activities (provided by OT, PT, SLP, CTRS or CBIS for the purpose of community re-integration)
- Job Samplings (provided by OT, PT or SLP)
- Transportation Training (provided by OT, PT, SLP, CTRS or CBIS for the purpose of community re-integration)

All services must be prescribed by a treating physician. In the case of cognitive rehabilitation therapy, psychological and neuropsychological services, the Neuropsychologist/Psychologist is allowed to diagnose and/or provide cognitive therapy without an additional prescription.

21.5.5.1 Process and Procedures

The case manager obtains prescriptions from the treating physician.

Therapy services are scheduled.

Therapy services are provided, as defined in the customer's IPP.

Therapy services are performed by licensed health care professionals and as defined in the customer's IPP.

[Weekly activity schedules](#) and [weekly time logs](#) are completed.

Licensed and/or certified professionals complete the required progress report describing each treatment session in detail.

Reports are submitted to the VR counselor.

The status of goals is updated in the monthly IPP meetings.

21.5.5.2 Outcomes Required for Payment

VR counselor receives the following complete, accurate, and descriptive documents:

- A copy of the customer's [weekly activity schedule](#)
- [Weekly time logs](#) recording all billable time for therapies completed by the licensed and/or certified professionals
- Therapy reports for each therapy service provided, as identified in the IPP and service authorization for the reporting period

The therapy documentation contains progress notes and recommendations related to:

- the customer's abilities, deficits, and potential to obtain and maintain competitive integrated employment;
- the customer's potential to secure, retain, and advance in employment;
- the customer's employment goal(s), transferable skills, and employment barriers; and
- additional therapy and/or employment services, if necessary.

The time to attend the IPP meeting and update the IPP is not billable.

Therapy services are paid based on:

- the approved time listed in the IPP;
- the time recorded on the customer's [weekly time log](#); and
- the time recorded in the therapy reports.

Payment for therapy services is made when the VR counselor approves the submitted:

- [weekly time log](#);
- therapy report(s); and
- invoice.

21.6 Employment Services Definition

Employment services focus on:

- exploring the customer's employment interests and skills;
- developing soft and hard skills related to the customer's employment goal(s);
- securing, retaining, and advancing in employment; and
- setting up employment support services to manage employment barriers.

Employment services, as defined in the SFP by the ESBI program, includes the following:

Vocational Adjustment Training (VAT) prepares participants to successfully obtain and maintain competitive integrated employment. There are six VAT services. Use the links below to obtain information on the service description, the process and procedures, and the outcomes required for payment:

- [13.7 VAT Explore the "You" in Work](#)
- [13.8 VAT Skills to Pay the Bills—Mastering Soft Skills for Workplace Success](#)
- [13.9 VAT Soft Skills for Work Success](#)
- [13.10 VAT Entering the World of Work](#)
- [13.11 VAT Job Search Training—for Pre-Employment Transitional Services Customers Only](#)
- [13.12 VAT Disability Disclosure Training](#)
- [13.13 VAT Money Smart—A Financial Education Training](#)
- [13.14 VAT Public Transportation Training](#)
- [13.15 VAT Specialized Evaluation](#)
- [13.16 Vocational Adjustment Training Specialized](#)

Work Experience Services allow a customer to be placed at a business or an agency within the community to complete short-term experience to gain skills that are transferable to future long-term competitive integrated employment. Work experience can assist in determining whether a customer is ready for competitive, integrated employment; exploring career options for an individual; and/or developing skills to include in an individual's résumé for a certain vocation. There are three Work Experience Services. For a detailed service description, the process and procedures, and the outcomes required for payment of each, see:

- [14.3 Work Experience Placement](#)
- [14.4 Work Experience Monitoring](#)

- [14.5 Work Experience Training](#)

Bundled Job Placement is a benchmark service that assists customers in preparing for and completing the job search process. Bundled Job Placement helps customers obtain a job that meets their needs, as outlined in the [VR1845B, Bundled Job Placement Services Benchmark Service Plan–Part B and the Benchmark Status Report](#). For a detailed service description, the process and procedures, and the outcomes required for payment, see [17.4 Bundled Job Placement Services](#).

Job Skills Training teaches skills, reinforces skills, and develops or sets up accommodations and/or compensatory techniques to increase the customer's independence and ability to meet the employer's expectations when placed in the final placement for VR case closure. The training is purchased when a customer needs more training and support than is provided by the employer. For a detailed service description, the process and procedures, and the outcomes required for payment, see [17.5 Job Skills Training](#).

Supported Employment is an outcome-based system service that uses the Place, Then Train model for employment placement. Supported Employment is for customers with the most significant disabilities. The service includes an assessment, assistance in finding an appropriate job match, support services to learn the job and set-up and establish extended services, sometimes called long-term supports, for the customer to maintain a long-term competitive integrated employment outcome. For a detailed service description, the process and procedures, and the outcomes required for payment, see [Chapter 18: Supported Employment Services](#).

21.6.1 Process and Procedures

The service authorization is received.

The services are scheduled and provided, as defined in the customer's Individual Program Plan (IPP).

The employment services are performed by qualified employment service providers that meet the required staff qualifications.

The employment service provider completes the required documentation, as described in the TWC-VR SFP.

Reports are submitted to the VR counselor.

The status of goals is updated in the monthly IPP review.

21.6.2 Outcomes Required for Payment

Refer to the employment service Outcomes Required for Payment at the service links above.

21.6.3 Fees

Employment service fees are not included in the ESBI residential rates. Employment services are invoiced separately. The time needed to attend Initial Assessment and Evaluation Plan (IAEP) meetings is paid at \$37.50 per meeting.

Refer to the employment service fees located at the service links above.

21.7. Discharge Service Definition

Providers must develop a discharge summary for each employed customer that includes:

- the strengths, abilities, needs, and preferences of the customer;
- the date of discharge;
- the physical location;
- the amount of supervision that the customer will need for safety, decision making, and to maintain the skills learned in ESBI services;
- how medical restrictions, precautions, contraindications, and medical care needs will be monitored;
- the family's, caregiver's, and customer's support system training;
- the discharge status of each goal established in the Individual Program Plan (IPP);
- a description of the customer's current employment, including:
 - the employer;
 - the customer's job title;
 - the supervisor's name and title;
 - the customer's soft and hard skills;
 - the work environment; and
 - any compensatory strategies necessary to maintain long-term employment;
- referrals, recommendations, and strategies to help the customer retain and advance in employment.

When the customer is not employed at discharge, the providers must provide a detailed description documenting the following:

- Why the customer is not able to reach a successful employment outcome
- The strengths, abilities, needs, and preferences of the customer
- The date of discharge
- The physical location
- The amount of supervision that the customer will need for safety, decision-making, and to maintain the skills learned in ESBI services
- How medical restrictions, precautions, contraindications, and medical care needs will be monitored
- The family's, care giver's, and customer's support system training
- The discharge status of each goal established in the IPP

- The alternatives that were tried to achieve employment and the barriers that were identified
- The types of work simulations experienced and the current level of job skills
- Recommendations for suitable work environments
- Recommendations for suitable work tasks
- Recommendations for next steps

21.7.1 Process and Procedures

The case manager ensures that the IDT completes the discharge plan, including all required information prescribed in the discharge plan service description.

At discharge, the discharge plan is implemented, and a summary is developed by the case manager, with input from all members of the IDT. Each clinical therapy service must complete and attach a formal discharge summary. For any employment services the provider will attach the required documentation for the applicable service, as defined in the TWC-VR SFP service description, the process and procedures, and the outcomes required for payment.

21.7.2 Outcomes Required for Payment

The case manager's completed discharge summary with all required information submitted simultaneously to the VR counselor and the unit program specialist within 10 business days of the customer's discharge.

When case management is not a covered expense by comparable benefit, an invoice must be submitted with the discharge report.

21.7.3 Fees

- [Nonresidential](#)
- [Residential](#)

21.8 Behavior Intervention Plan (BIP) Service Definition

A behavior intervention plan (BIP) is a plan designed to teach emotional self-regulation skills and reward positive behaviors. A BIP may include use of therapeutic medications. This can help prevent or stop problem behaviors that will affect a customer's success with maintaining competitive integrated employment. The BIP is based on the results of the Functional Behavior Analysis (FBA). When the Initial Assessment and Evaluation Plan (IAEP) and Individual Program Plan (IPP) are being developed and updated, the IDT provides observation and feedback combined with the results of the FBA to develop a BIP that compliments the customers IPP.

Both the FBA and the BIP can be created, monitored, and updated by a:

- Behavior Analyst; Licensed by the Texas Department of Licensing and Regulation;

- cognitive therapist;
- psychologist or neuropsychologist and/or
- LCSW or LPC.

The BIP describes the problem behavior, the reasons the behavior occurs, and the intervention strategies that will address the problem behavior. A BIP can help a customer learn problem-solving skills, coping skills, and use compensatory techniques to better respond to a situation that maybe present as the customer prepares for, obtains, and maintains competitive integrated employment. The plan can also explain who is responsible for helping the customer with each aspect of the BIP. Refer to [21.4.3 Safe and Secure Environment](#) to ensure compliance with use of physical and chemical restraints.

Customers who are assessed to have aggressive or dangerous behaviors to themselves or others are not ready to benefit from ESBI services until issues have been resolved and the focus can be directed on building appropriate social skills required for work behavior.

21.8.1 Process and Procedure

The IDT identifies whether a customer may benefit from a behavior intervention plan (BIP).

Required prescriptions and service authorizations are obtained.

A functional behavior analysis is completed with an assessment report.

As needed, a behavior intervention plan is created by the functional behavioral analysis evaluator with input from the IDT.

The IDT implements the behavior intervention plan.

The customer's responses to the BIP are evaluated at the customer's monthly IPP meeting but can be updated more frequently when necessary. BIP progress is documented at the IPP and other times as deemed necessary.

A report of the customer's progress must be submitted any time a behavior management service is invoiced.

21.8.2 Outcomes Required for Payment

An Functional Behavior Analysis (FBA) is required when a behavior intervention plan is developed.

Behavior management can be invoiced if the therapy or employment service being provided is solely focused on the BIP implementation.

A progress report describing the professional interventions based on the approved BIP and the customer's response is required.

Time must be documented in the [weekly time log](#).

21.8.3 Fees

- [Nonresidential](#)
- [Residential](#)

21.9 Ancillary Goods and Services

Goods and services related to an individual's acquired brain injury, which are not therapy services and are not delivered as part of ESBI nonresidential or residential services, are considered ancillary. The provider must submit an Individual Program Plan (IPP) that identifies the goods and services needed for the customer to obtain a service authorization from the VR counselor.

The IPP must include:

- the goods and services recommended;
- a justification of the need related to the established goal (for example, by including assessments and quotes for costs); and
- supporting documentation (such as prescriptions).

These services may include, but are not limited to:

- orthotics;
- prosthetics;
- assistive technology evaluations and devices;
- medications that are not part of a ESBI contract;
- prescribed medical equipment and supplies;
- home and/or vehicle evaluations;
- home and/or vehicle modifications; or
- transportation.

TWC-VR will consider purchasing an ancillary service when required to enable participation in a ESBI-approved service. Ancillary services are paid according to the Maximal Affordable Payment Schedule (MAPS) or the durable medical equipment (DME) contract as applicable.

21.10 Residential Services

ESBI services are provided at a facility that can address post-acute medical issues, can address rehabilitation issues, and provide 24-hour-a-day support and services that are based on a customer's individual needs. Residential services can be provided while the customer is receiving initial assessments and evaluations, as described in the customer's Initial Assessment and Evaluation Plan (IAEP) and/or during the implementation of the customer's Individual Program Plan (IPP). The facility must meet all applicable requirements outlined in [21.3 ESBI Provider Qualifications](#) and [21.4 ESBI Provider Requirements](#). A service authorization will identify the number of days approved for residential services. The customer must actively participate in the program and make progress toward the goals in either the IAEP or IPP for continued sponsorship of residential services.

The base residential service rate includes administrative costs, room and board, paraprofessional services, medical services (that is, physician and nursing services), dietary and nutritional services, case management, time spent for documentation, communication (such as emails and phone calls), and travel time. When a customer is absent from the facility, the facility is not eligible to invoice for the base service rate. These services may not be billed separately to the VR program. For information about ESBI residential base services, see [21.12.5 Residential Rate Structure](#).

Goods and services related to an individual's acquired brain injury, which are not delivered as part of ESBI residential services, may be considered ancillary if approved by the VR counselor. Refer to [21.9 Ancillary Goods and Services](#).

21.11 Nonresidential Services

ESBI services provided as a day program or as outpatient therapy services are nonresidential services. The facility must meet all applicable requirements outlined in [21.3 ESBI Provider Qualifications](#) and [21.4 ESBI Provider Requirements](#). Nonresidential services can be provided while the customer is receiving an initial assessment or evaluation, as described in the customer's Initial Assessment and Evaluation Plan (IAEP) and/or during the implementation of the customer's Individual Program Plan (IPP). All services provided must be provided by individuals who meet the staff qualifications described in [21.2 Staff Qualifications, Ratios, and Training](#). A nonresidential service provider must offer cognitive therapy but is not required to provide all of the other core services described in [21.5.2 Initial Assessment and Evaluation Plan Service Definition](#) and [21.12.4.1 Core Services](#). The IDT will be coordinated to include other service providers, as needed.

Time spent for documentation, for communication (such as emails and phone calls), cannot be billed as a core service or as an ancillary service. When a customer is absent from nonresidential services for any reason the ESBI provider is not eligible to invoice TWC-VR for any fees, including no show fees. The nonresidential service provider must notify the VR counselor of an absence greater than 1 day. For information about the ESBI Nonresidential service fees go to [21.12.4 Nonresidential Rate Structure](#). A service authorization will identify the type and amount of nonresidential services and must be obtained before service delivery. The customer must actively participate in the program and make progress towards the goals in either the IAEP or IPP for continued sponsorship by TWC-VR for Nonresidential Services.

Goods and services related to an individual's acquired brain injury, which are not delivered as part of ESBI nonresidential services, maybe considered ancillary if approved by the VR counselor. Refer to [21.9 Ancillary Goods and Services](#).

21.12 ESBI Rates

All rates are inclusive of any administrative activities (such as emails, phone calls and documentation) required to produce the service.

21.12.1 Cotreatments with Multi Clinical Therapists

Two therapists cannot bill for the same period of time. In cotreatments, therapy units and/or time are divided by the number of therapists delivering the service to determine the amount of time to be attributed to each. For example, if a physical therapist and an occupational therapist deliver one hour of individual therapy to a customer together, then the physical therapist's time is billed as 30 minutes and the occupational therapist's time is also billed as 30 minutes.

21.12.2 Groups of Customer Seen by One or More Clinical Therapists

A small group is no more than two customers to one licensed or credentialed professional. A group is three and no more than six customers to one licensed or credentialed professional.

Core services must be provided by a contractor's staff member who meets the qualifications prescribed in [21.2.1 Licensed and Certified Professionals](#).

21.12.3 Employment Services Provided by Clinical Therapist

When a clinical therapist provides and employment services as defined in the Standards for Providers, such as Work Experience, Job Placement or Supported Employment, it must be provided through an Employment Services Contract and the service can only be invoiced as an employment service. When a clinical therapist co-treats with an

employment service provider, the clinical therapist and the employment service provider must be addressing independent goals. The role of a clinical therapist in the co-treatment is to increase the customer’s independence related to the disability such as: evaluating safety/cognitive abilities in the employment environment, identifying compensatory techniques and/or use of adaptive equipment that will increase abilities and/or independence, and/or training the customer, employment service provider and/or employer in disability related issues that will be managed long-term by parties other than the clinical therapist. The role of the employment service provider is to deliver the service(s) as defined in the Standards for Providers achieving all required outcomes for payment.

21.12.4 Premium Payments

Premium payments compensate the contractor:

- when an employee maintains approved disability-related credentials;
- for the provision of services performed outside of a contractor’s facility and within a community setting; and/or
- for the transportation cost for services provided within the community setting.

Premium payment amounts are:

- added to the licensed and certified professionals rate described in the core services and case management rate tables; and/or
- added as a daily fee, as transportation cost, when any core services is provided within the community setting and transportation cost were incurred by the provider to access the community setting.

Premium Payments	Code	Rates
Licensed or Certified Professional who is a CBIS, as described in 21.2.1 Licensed and Certified Professionals	17001	\$2.19 per 15-minute increment
Community-Based Service		\$3.96 per 15-minute increment
Transportation costs related to all core services delivered within the community within 24 hours.	23001	\$47.08 per day

21.12.4 Nonresidential Rate Structure

21.12.4.1 Core Services

Core services must be provided by a contractor’s staff member who meets the qualifications prescribed in [21.2.1 Licensed and Certified Professionals](#). Nonresidential hours must total 20 hours or fewer per week, for no more than 12 weeks. Additional times require VR manager approval. All rates below are in 15-increments.

Core Services (rates set in 15-minute increments)	Code	Rates
Behavior Management		
Behavior Management Individual	03001	\$28.31
Cognitive Rehabilitation Therapy (CRT)		
Cognitive Rehabilitation Therapy Individual	05001	\$29.03
Cognitive Rehabilitation Therapy Group	05004	\$5.81
Cognitive Rehabilitation Therapy Small Group	05005	\$14.51
Neuropsychological Services		
Neuropsychological Services Individual	11001	\$32.61
Neuropsychological Services Evaluation	11002	\$48.15
Neuropsychological Services Re-Evaluation	11003	\$21.95
Neuropsychological Services Group	11004	\$6.52
Neuropsychological Services Small Group	11005	\$16.31
Occupational Therapy		
Occupational Therapy Individual	12001	\$34.38
Occupational Therapy Evaluation	12002	\$33.24
Occupational Therapy Reevaluation	12003	\$31.32
Occupational Therapy Group	12004	\$6.88
Occupational Therapy Small Group	12005	\$17.19
Physical Therapy		
Physical Therapy Individual	13001	\$29.25
Physical Therapy Evaluation	13002	\$45.01
Physical Therapy Re-Evaluation	13003	\$43.25
Physical Therapy Group	13004	\$5.85
Physical Therapy Small Group	13005	\$14.62
Recreational Therapy (Therapeutic Recreation)		
Recreational Therapy Individual	14001	\$31.17
Recreational Therapy Group	14004	\$6.23
Recreational Therapy Small Group	14005	\$15.59
Speech/Language Pathology		
Speech/Language Pathology Individual	15001	\$27.81
Speech/Language Pathology Evaluation	15002	\$40.24
Speech/Language Pathology Reevaluation	15003	\$33.81
Speech/Language Pathology Group	15004	\$5.56
Speech/Language Pathology Small Group	15005	\$13.90
Community Independence Supports – Certified Brain Injury Specialist (CBIS)		
Certified Brain Injury Specialist (CBIS) individual	17001	\$8.75

Licensed and certified professionals may bill one 15-minute increment for attendance of a customer's Initial Assessment and Evaluation Plan (IAEP) or monthly Individual Program Plan (IPP).

21.12.4.2 Example of how to Calculate a Rate

Occupational Therapy Individual for 45 minutes	3 X \$34.38	\$103.14
Occupational Therapist is CBIS-certified	3 X \$2.19	\$6.57
Occupational Therapy was conducted at the library—customer volunteer learning to perform transferable skills	3 X \$3.96	\$11.88
Total for the Occupational Therapy Individual Session		\$121.59

21.12.4.3 Case Management Services

Case management services must be provided by a contractor’s staff member who meets the qualifications prescribed in [21.2.1 Licensed and Certified Professionals](#) for case manager.

Case Management	Frequency	Code
Facilitation of the Evaluation Plan Meeting and Associated Reports	• 1 time per admission maximum fee allowed is \$400.16	16001
Coordination of Initial Evaluation and Associated Reports	• 1 time per admission; • Maximum fee allowed is \$400.16	16001
Coordination of Initial IPP and Associated Reports	• 1 time per admission; • Maximum fee allowed is \$400.16	16001
Coordination of Monthly IPP Reviews and Associated Reports	• 1 time per month; • Maximum fee allowed per month is \$400.16	16001
Coordination of Discharge Summary and Associated Reports	• 1 time per admission; • Maximum fee allowed is \$400.16	16001

21.12.5 Residential Rate Structure

Residential base rate includes administrative costs, room and board, paraprofessional services, medical services (that is, physician and nursing services), dietary and nutritional services, and case management. These services may not be billed separately to the VR program.

21.12.5.1 Residential Base Rate

Rate Description	Amount
Residential Base Rate (1 time per day)	\$236.09

21.12.5.2 Core Service Rates

A week is defined as Sunday through Saturday.

Most customers should receive a minimum of three hours of core services per day.

Core Services Hour Description	Core Services Tier Rate	Therapy Evaluation Per Diem
Greater than 0, but fewer than 1 hour of core services	\$70.08	\$3.48
Greater than or equal to 1 hour per day, but fewer than 2 hours per day, not exceeding 7 hours per week of core services	\$210.24	\$3.48
Greater than or equal to 2 hours per day, but fewer than 3 hours per day, not exceeding 14 hours per week of core services	\$350.40	\$3.48
Greater than or equal to 3 hours per day, but fewer than 4 hours per day, not exceeding 21 hours per week of core services	\$490.56	\$3.48
Greater than or equal to 4 hours per day, but fewer than 5 hours per day, not exceeding 28 hours per week of core services	\$630.72	\$3.48
Greater than or equal to 5 hours per day, but fewer than 6 hours per day, not exceeding 35 hours per week of core services	\$770.88	\$3.48
Greater than or equal to 6 hours per day, but fewer than 7 hours per day, not exceeding 42 hours per week of core services	\$911.04	\$3.48
Greater than or equal to 7 hours per day, but fewer than 8 hours per day, not exceeding 49 hours per week of core services	\$1,051.20	\$3.48
Greater than or equal to 8 hours per day, but fewer than 9 hours per day, not exceeding 56 hours per week of core services	\$1,191.36	\$3.48

Licensed and certified professionals may bill one 15-minute increment for attendance of a customer's IAEP or monthly IPP.

21.12.5.3 Example of How to Calculate Residential Rate for a Day

Rate Description	Rate
Residential base rate (1 time per day)	\$236.09
Occupational therapy provided for 1 hour; Physical therapy provided for 1 hour; and Speech therapy evaluation provided for 30 minutes Note: No more than 14 hours of care were provided during the week (Sunday–Saturday)	\$350.40
Speech therapy evaluation per diem	\$3.48
Total Daily Rate:	\$589.97

21.12.5.4 Employment Services Rates

An employment services provider rate to attend an interdisciplinary meeting (IEAP or IPP) is \$37.50 per meeting.

All other employment service rates are found in the SFP chapter associated with the service. See links below.

Vocational Adjustment Training fees found at:	13.17 Work Readiness Services Fee Schedule
Work Experience Services fees found at:	14.6 Work Experience Services Fee Schedule
Non-bundled and Bundled Job Placement and Job Skills Training fees found at:	17.6 Employment Services Fee Schedule
Supported Employment service fees found at:	18.1.13 Supported Employment Fee Schedule
Brain Injury Premium fees found at:	20.11 Brain Injury Premium

21.13 Billing Procedures

21.13.1 Co-Pay and Coinsurance

If a VR customer has comparable benefits, the provider must bill the comparable benefits before billing the VR program.

If comparable services and benefits are available, the VR program may participate in the cost of services if the combined amount of the VR payment and the comparable benefit payment does not exceed the maximum amount allowed by the following, as appropriate:

- MAPS rate
- Contracted payment rate
- The retail or negotiated lower price (for non-MAPS, noncontract items)

All other pay sources must be exhausted before the VR program is billed for services.

When a customer has health insurance, Medicare, or Medicaid, the ESBI provider first submits a timely claim to these entities, as applicable, for payment of the provided ESBI services. An Explanation of Benefits (EOB) is sent by the insurer to the ESBI provider to document the payment made per benefit coverage and the patient's payment responsibility (the customer's portion). The ESBI provider submits to the VR counselor a copy of the EOB with the provider's invoice in order for the VR payment responsibility to be determined.

If the comparable benefit denies the service, the EOB is reviewed to determine the reason for the denial. If the service was denied for insufficient documentation, the VR counselor contacts the ESBI provider and requests that the provider resubmits the claim with the proper documentation. VR is not responsible for payment of services when a ESBI provider fails to file the claim with the comparable benefit in a timely manner.

If the comparable benefit is paid by:

VR-SFP Chapter 21: Employment Support for Brain Injury version date 5-24-19

- **Major medical insurance, a health maintenance organization, or preferred provider organization**—the VR program may pay the customer's portion (co-payment, coinsurance, and any unmet deductible), not to exceed the MAPS rate, contract rate, or retail price, as applicable;
- **Medicare**—the VR program may pay the customer's portion (co-payment, coinsurance, and any unmet deductible), not to exceed the MAPS rate, contract rate, or retail price, as applicable; or
- **Medicaid**—the VR program pays nothing. The VR program does not supplement a Medicaid payment for a specific service or procedure.

21.13.2 Family Cost Share

In some cases, customers will be required to participate in the cost of services. In those cases, the customer and the provider will be notified of the customer's share. The provider may not bill beyond that cost and will not collect from the customer until the VR payments and/or any comparable benefits payments have been received.

The provider is responsible for billing and collecting or writing-off cost-share amounts owed by the liable party.

21.13.3 Invoices

For information on VR invoicing requirements, refer to the [Chapter 3: Basic Standards](#).

When applicable, billing must be submitted to third-party payers promptly. Billing to VR must be submitted upon partial-payment or denial of payment from third-party payers. If the family is required to share in the cost of services, the customer and the provider will be notified of the customer's share. The provider may not bill beyond that cost and will not collect from the customer until the VR payment and/or any comparable benefits payments have been received. When the provider's facility is closed, or a customer is not present for the service within a customer's dates of service, payment is not made for that date.

Invoices must be submitted at least monthly, no later than the 15th of each month, on one of the following forms:

- UB-04 Centers for Medicare and Medicaid (CMS 1450)
- Health Insurance Billing Form (CMS 1500)

The provider must submit invoices to the address on the VR service authorization, comply with the terms and conditions of the customer contract, and include, at a minimum, the:

- vendor's complete name and address;
- vendor's 14-digit Texas identification number (TIN) or nine-digit federal employee identification number (FEIN);

- vendor's contact name and telephone number;
- service authorization number;
- delivery address;
- contract number;
- description of the goods or services provided, including CPT codes;
- dates of service;
- quantity and unit-cost being billed, as documented on the service authorization;
- Initial Assessment and Evaluation Plan (IAEP) or Individual Program Plan (IPP) signed by the interdisciplinary team (for initial billing for services only);
- weekly time logs;
- Progress Reports for services received;
- monthly meeting summaries, signed by the IDT (for monthly services that are not admission or discharge services); and
- customer's discharge summary, signed by the IDT, and the discharge documentation (upon final billing).

The provider must:

- respond to billing-related inquiries from VR program staff members within two business days; and
- submit all documentation requested within five business days following the request.