



Vocational Rehabilitation Advisory Committee



Q & A's

- Q.1. Are there new regulations to encourage the SSI / Medicaid patient to try Vocational Rehabilitation (VR) and not risk losing benefits once they get a part-time job? This is a major concern expressed by SSI / Medicaid recipients.**
- A.** People with SSI are blessed with a long-standing work incentive program called 1619. Under 1619a they get to keep their SSI check with a sliding scale reduction. Under 1619b, a person on SSI who works can keep Medicaid at a much higher income than someone who is not disabled (eliminates the need to meet share of costs). For more information, visit <http://www.socialsecurity.gov/disabilityresearch/wi/1619b.htm>. FL income limit for Medicaid for SSI recipients who work is \$28,075 in 2009. 1619 designation is established by SSA, not state Medicaid workers who may not know about 1619b. *The Red Book – A Guide to Work Incentives* explains, on page 37, the Plan to Achieve Self-Support (PASS). See <http://www.socialsecurity.gov/redbook/>. The publication *Understanding Supplementary Security income / SSI Work Incentives* explains that for every \$2.00 earned, \$1.00 is subtracted from the individual's SSI check. See <http://www.socialsecurity.gov/ssi/text-work-ussi.htm>.
- Q.2. Is free testing available for individuals who are not sure what they might be suited for?**
- A.** VR does an evaluation to determine the client's interests, as well as their past work history. Additional resources for determining areas of interest include:
- ✓ One Stop Workforce Boards www.workforceflorida.com
 - ✓ Small Business Development Centers www.floridasbdc.com
 - ✓ Choices Interest Testing <https://access.bridges.com>
- Q.3. How do I know who to contact for a specific patient – is it insurance dependent? What if they never graduated high school?**
- A.** VR is not dependent on a patient's insurance. ESRD patients can contact VR directly. Patients with SSI and SSDI are presumed eligible. However, funding may affect who is served and how quickly. VR works with teens to help them transition to work. VR has helped people obtain their GED. In most jobs a GED is the minimal education required.
- Q.4. What is our obligation when a patient does not want VR?**

- A.** The ESRD Federal Regulations [Conditions for Coverage, 494.80(a)(13); 494.90(a)(8)] require social workers to assess the reason why they are not interested in VR and document the reason.
- ✓ Is the person not interested due to health? If so, what changes could be made to improve health status?
 - ✓ Is the person not interested due to depression? Screen and treat.
 - ✓ Is the person not interested due to dialysis scheduling? Review options for a different schedule and home dialysis.
 - ✓ Is the person not interested because he/she believes myths about working and losing benefits? Obtain, review information on work incentive programs; use patient mentors.
 - ✓ Is it because the patient is not working age? Document and encourage patient to do age appropriate activities that make him/her feel engaged and worthwhile.
 - ✓ Is it because the patient prefers not to work? Explain benefits of working and costs of not working on physical / emotional well-being, financial status, and social activities. If the patient wants a transplant, explain that loss of ESRD status could eliminate SSI/SSDI, and that Medicare ends 36 months post-transplant unless disabled for another reason. Preparing for a job will help him/her be better able to afford a transplant. Research also shows people who are employed are more likely to get and keep a transplant.

Q.5. Suggest websites that are helpful, please.

- A.** Network 7's website provides tools, resources, and helpful links for patients and providers, including links to Social Security Administration, VR Offices, Ticket to Work, Life Options, and more. For providers, go to <http://www.fmqai.com/Vocational-Rehabilitation.aspx>. For patients, go to <http://www.fmqai.com/ESRD-GBW.aspx>. Additionally, individuals who are job ready and on SSI or SSDI may receive help via the internet with job choices at www.AAATakeCharge.com.

Q.6. I often receive the response from VR workers that our patients are too sick. How can we educate the workers about ESRD so that they can work with them and their physical disability? How can we reduce the length of time it takes to establish a goal and a plan for work?

- A.** A manual is provided to every state VR agency office. It was prepared especially for them under a special Institute on Rehabilitation Studies funded by the Rehabilitation Services Administration (umbrella organization over state VR agencies) on how and why VR counselors can work with people with CKD/ESRD - <http://www.rcep6.org/iri/27iri/IRI27.pdf>. Nephrology social workers, such as Mary Beth Callahan and Beth Witten were on the workgroup that developed it as were several VR counselors who have successfully worked with dialysis and transplant patients. In August 2008, FL invoked "order of selection" which requires VR to work with the most severe disabilities. ESRD is considered a

severe impairment. Also in its latest State Plan, FL VR says it wants to serve those who have traditionally been underserved. ESRD patients have been traditionally underserved. People with ESRD do not typically need funds for medical care, but they need help keeping their jobs, finding a new job, negotiating accommodations, etc. Research has shown that costs of rehabilitation are less for ESRD patients than for other groups and patients are more likely to return to competitive employment at a higher wage. VR is allowed up to 60 days to determine eligibility; then individuals are placed on a waiting list. Once they are taken off of the waiting list, VR is allowed up to 120 days to develop the work plan. Patients also have the option to utilize other avenues, such as One Stop Workforce Boards and Choices programs.

Q.7. What is the Network's expectations/goals for VR for our patients?

- A. Detailed VR Checklists are posted on Network 7's website. The ESRD Federal Regulations specify that social workers provide services that maximize the social functioning of patients [Conditions for Coverage, 494.80(a)(13); 494.90(a)(8)]. Facilities are required to:
- ✓ Assess each working age (18 through 54) patient's status as of 12/31 each year and report the number of patients in each category;
 - ✓ Educate patients about VR and encourage them to contact VR; and
 - ✓ Make efforts to improve outcomes by re-assessing and helping patients overcome barriers to maintaining or obtaining employment.

Q.8. Can patients go to the VR Office of their choosing? If not, why?

- A. Though it is preferred that patients be served in the county where they reside, a patient can request to be served from a different office, if that office is closer. The individual should write a letter to the Area VR Office.

Q.9. Please describe the types of dialysis patients that the VR offices are willing to assist toward employment.

- A. Review the booklet for VR counselors and ask your local VR counselors the type of patients they are looking for. Typically it is someone who: has an idea what he/she wants to do, appears to be motivated to follow through on appointments, and is willing to make progress toward self-support. Keep in mind that a physician has to release applicants to work. VR can also work with people to help them to be independent in their homes (like people with low vision or blindness).

Q.10. Is the PASS Program being utilized? Discuss its effectiveness with dialysis patients?

- A. The PASS Program is underutilized. Information on PASS is located at - <http://www.socialsecurity.gov/disabilityresearch/wi/pass.htm>. The PASS cadre for FL is in Birmingham, AL at 800-254-9489. Page 137 of this 2007 report on the

Ticket to Work program shows how many of those eligible had heard of specific work incentives and have used them – http://www.socialsecurity.gov/disabilityresearch/ttw3/ttw_report3.pdf. Of 17,696 SSI recipients surveyed, 13% have heard of PASS and only 0.6% had used it as of 2004 nationally. The PASS program is for SSI (and possibly SSDI) recipients. PASS allows beneficiaries to set aside income or resources so they can pursue a work goal. One example: An individual was working at a chain department store, and received an opportunity to expand to several stores within the chain of stores, but that would require him to have reliable transportation (in his case, a car). He was able to put aside money to buy a car, and still be eligible for Social Security benefits, because he was in the PASS plan.

Q.11. How do Social Security recipients get their “Ticket to Work?” Do they have to stop working to receive disability? Can they work part-time during the waiting period?

- A. Anyone with SSI or SSDI has a virtual “ticket to work.” People can use the ticket to obtain services from VR and/or services from a company that is contracted with SSA as an employment network. See www.yourtickettowork.com. If you do not have a paper ticket and want to activate it, call Maximus toll-free at 866-968-7842. People do not have to stop working to receive disability checks. At the time of application for benefits, SSA will determine if earnings are over the Substantial Gainful Activity (SGA) amount. Once an individual meets the SSA definition of disability, then they may use the work incentives and test their ability to work. If they are entitled to a trial work period, then they may work during 9 consecutive months, make all the money they want, and receive an SSDI check. It is a myth that one must limit their wages when they really do not have to for the first 9 months.

Q.12. What services does VR provide?

- A. VR offers many services. Plans are individualized for each client, but can include items such as occupational licenses, transportation, etc. Information for consumers is available at <http://www.rehabworks.org/index.cfm?fuseaction=SubMain.Consumers>.

Q.13. What services are offered for patients who are pre-transplant vs. post-transplant? I have a client who worked with VR pre-transplant to get his GED. He is still registered. How long is his wait to hear back?

- A. Once the client is in the VR system, he/she remains active. The VR evaluation is the basis for deciding what services are offered. Did the patient have a plan for after the completion of his GED? Clients should keep in regular contact with their VR counselor and not wait for the VR counselor to call them. VR counselors have many clients who are in touch with them. It is a sign of motivation to stay in touch.

Q.14. Please explain the “waiting list” our patients are placed on after initial evaluation.

A. The significance level and application date determine when the individual is taken off of the wait list. If the wait is long and the patient does not need job training, they might consider using an employment network instead.

Q.15. How do I enroll my patients? How do I get them to VR for training, etc.?

A. Most VR offices have set orientation days and times. It is best that the client be proactive. Encourage your patients to take some initiative, and contact the VR office directly. Help them to present their best light to the VR counselor.

Q.16. If a patient wants to be trained or receive education, but has childcare needs, is there a program to assist with this expense?

A. Childcare connection is available through One Stop or the County Connection. VR counselors can assist with this process. For welfare recipients, there is the Welfare Transition program - (http://www.floridajobs.org/workforce/wel_trans.html) that has a variety of services, including payment for education, childcare, etc. The program is for individuals earning <185% of the Federal Poverty Level.

Q.17. In discussions with patients about returning to work, several have expressed desire to get training – school for nail technicians, medical technicians, etc. If they go to VR is this an option automatically? Or if they had a different profession (e.g. truck driver) is it easier to just put them in what they know?

A. Keep in mind that not every applicant qualifies for school. Information about training is available through Workforce Investment Act and every One Stop.

Q.18. I recently referred a patient to VR. She was told they would not offer her services unless she was prepared to go to work, that there would not be training available, and that she would lose her Social Security benefits. I want to know who to contact and discuss this and other cases, to advocate for my patients.

A. The Ticket to Work program allows people with disabilities to use various work incentive programs to ease back into work without losing benefits right away. You may wish to obtain permission from the client to talk with the VR counselor, and if necessary the VR Supervisor. Additional resources for resolving complaints about VR services are available through the VR Ombudsman (866-515-3692) or via the Advocacy Center, which is a Client Assistance Program. For further VR appeals information visit <http://www.rehabworks.org>.

Q.19. What is the maximum monthly income clients can earn so they will not lose Medicaid and/or SSI? What about SSDI?

- A.** In determining whether an individual's earnings are not sufficient to provide them with the equivalent benefits they would be eligible for if they stopped working, their earnings are compared to a threshold amount for their State of residence. In Florida people with SSI who are still disabled and work can earn >\$28,000. Section 1619(b) status continues if the earnings are at or below the threshold. If earnings exceed the State threshold, an individualized assessment of the need for Medicaid is made and 1619(b) status may continue. Most individuals who work will continue to receive at least 93 consecutive months of Hospital (Medicare Part A); Supplemental Medical Insurance (Part B), if enrolled; and Prescription Drug Coverage (Part D), if enrolled, after the 9-month Trial Work Period. There is no premium cost to the recipient of Medicare part A. Although cash benefits may cease due to work, the health insurance eligibility continues; the 93 months start date is the month after the last month of the individual's Trial Work Period. An individual must already have Medicare and be working at SGA level, but not be medically improved. If the individual is entitled to a Trial Work Period, it allows them to test their ability to work for at least 9 months. During the Trial Work Period, they will receive full SSDI benefits, regardless of how high their earnings are, as long as the work activity has been reported and they have a disabling impairment.

Q.20. Some VR workers seem to perceive dialysis patients as poor candidates for services, because they have to attend treatments three times per week, which may disrupt their future employment. What can we do to better educate our local office workers without stepping on toes?

- A.** The social worker can build a relationship with local VR Counselors and meet face-to-face, either in the VR office or at the dialysis unit. Network 7's VR Toolkit includes handouts titled "Tips for Partnering with Local VR Offices." Some dialysis facilities have hosted "VR Days" – by inviting local VR Area Supervisors and Social Security Work Incentive Coordinators to visit with patients at the facility and answer questions about work and Social Security benefits.

Q.21. What kind of training can VR assist with? Does VR pay tuition? Can VR assist with purchasing equipment?

- A.** It all depends on the individual, and the development and agreement of the vocational goal. VR does pay tuition, but require the client to find comparable benefits that can help pay first. Clients are required to apply for the Federal Pell Grant. If they are eligible, then VR requires that this defray the tuition cost before VR pays for it. If there is money left over from the grant, it may be used for books and supplies. If VR does pay tuition, the school has to be a certified vendor. VR can assist with access to computer training, local technical schools, computers,

and well as adaptive equipment. An additional resource is the Florida Alliance for Assistive Services and Technology (FAAST), which provides hands on assistive technology demonstration, training, access to personal computers and other items (<http://www.advocacycenter.org/> or 800-342-0823).

Q.22. Please describe appropriate and inappropriate candidates for VR services. Are clients linked automatically or routinely with WIPA organizations to review benefits and work? What information is most helpful to receive about mutual clients from renal social workers? What is the funding status for VR services?

A. Patients may contact the WIPA organization, Maximus, VR, or a private employment network directly. VR counselors will want to review current medical records, the physician's release to work, and any limitations that might impair their ability to work. VR recently removed 1000 clients from the wait list in Florida.

Q.23. Where is the best place to refer patients?

A. Any of the following organizations can assist patients with their goals for rehabilitation:

- ✓ Florida Department of Education / Division of Vocational Rehabilitation - <http://www.rehabworks.org/index.cfm?fuseaction=SubMain.Directory>
- ✓ Florida Division of Education / Division of Blind Services - <http://www.myflorida.com/dbs/>
- ✓ Social Security's Work Incentives Planning and Assistance (WIPA) Organizations - <https://secure.ssa.gov/apps10/oesp/providers.nsf/bystate>
- ✓ Maximus - www.yourtickettowork.com or 866-968-7842

Q.24. Are job counselors aware of specifics related to helping dialysis patients? Do they help with job placement? How can I locate VR centers in Florida?

A. Though a manual is provided to every state VR office, social workers should contact and build a relationship with VR counselors. Tips for partnering with local VR offices were developed by Network 7's Vocational Rehabilitation Advisory Committee - <http://www.fmqai.com/Vocational-Rehabilitation.aspx>. To find your local office, visit the Florida Department of Education / Division of Vocational Rehabilitation at <http://www.rehabworks.org/> and click on "VR Office Directory." You may search for offices by County or Area.

Q.25. Does a written referral from a social worker have to be made, or can interested patients call to see a counselor?

A. Patients should be encouraged to initiate contact with VR, and keep the social worker informed of progress, barriers and need for help. A VR referral form is available at <http://www.rehabworks.org/>.

Q.26. What help is available for patients who have mental health concerns?

- A.** If needed, mental health restoration services can be accessed through VR. Social workers may need to assist with advocacy, and the patient's individualized care plan should reflect coordination of care.

Q.27. Does a degree in one field or profession preclude training in another field?

- A.** If the individual is no longer able to perform the duties of his/her work, other options can be explored.

Q.28. What if a patient's goal is to be self-employed?

- A.** Self-employment is an option that can be explored with the VR counselor, or through the Small Business Development Center.

Q.29. I recently referred a patient to VR, and the patient has not heard back from them. What action should I take?

- A.** VR has 3 business days to contact applicants, from the time a referral is received via fax. Ask your patient to contact the VR office directly.