



**Department of Health and Human Services
Division of Vocational Rehabilitation Services**

Policy Transmittals

**Independent Living
Services Program**

Effective Date: July 1, 2010

Revision Date: October 1, 2021

Volume VIII Policy Transmittals

Click on the links below to view the corresponding transmittal

Year Issued: 2010

[#2010-01](#) - Introducing Casework and Service Delivery Policy

Year Issued: 2011

[#2011-01](#) - Volume VIII Terminology Change

Year Issued: 2012

[#2012-01](#) - Two New Sub-sections added to Section 3-7

[#2012-02](#) - Revision to 3-8-3: Comparable Benefits

[#2012-03](#) - Revision to 3-8-3: Comparable Benefits

[#2012-04](#) - Revision to 2-10-1: Residence Modifications

[#2012-05](#) - Revision to 2-11: Personal Assistance Services

[#2012-06](#) - Interim Policy and Procedure Directive #1-2012: DPP as a Comparable Benefit

[#2012-07](#) - Interim Policy and Procedure Directive #2-2012: MFP and
Deinstitutionalization

Year Issued: 2013

[#2013-01](#) - Interim Policy and Procedure Directive #1-2013: Staff Use of Social Media

[#2013-02](#) - Interim Policy and Procedure Directive #2-2013: 1281 Budget Suspension

[#2013-03](#) - Revised Sections 1-13: VR/IL Concurrent Records of Services and 2-11:
Personal Assistance Services

[#2013-04](#) - Revisions to Volume VIII

[#2013-05](#) - Revisions to Volume VIII Appendix

[#2013-06](#) - Revisions to Volume VIII

Year Issued: 2014

[#2014-01](#) - Interim Policy and Procedure Directive #1-2014: Durable Medical Equipment
and Supplies for IL

[#2014-02](#) - Revisions to Volume VIII

[#2014-03](#) - Revisions to Volume VIII: BEAM Updates

- #2014-04** - Interim Policy and Procedure Directive #2-2014: Excess Income “Workaround” in BEAM
- #2014-05** - Interim Policy and Procedure Directive #3-2014: BEAM Service Structure and Service Selection
- #2014-06** – Revisions to Volume VIII: Section 2-3: IL Equipment
- #2014-07** – Revisions to Volume VIII
- #2014-08** – Interim Policy and Procedure Directive #4-2014: Documents to be Signed and Retained in the Case Record

Year Issued: 2015

- #2015-01** – Revisions to Volume VIII
- #2015-02** – Revisions to Volume VIII
- #2015-03** – Interim Policy and Procedure Directive #1-2015: MFP Presumptive Eligibility
- #2015-04** – Revisions to Volume VIII
- #2015-05** – Interim Policy and Procedure Directive #2-2015: Changes to Paper-Based Financial Needs Survey (FNS) and Completion of the Electronic FNS
- #2015-06** – Revisions to Volume VIII
- #2015-07** – Revisions to Volume VIII
- #2015-08** – Revisions to Volume VIII
- #2015-09** – Revisions to Volume VIII

Year Issued: 2016

- #2016-01** – Revisions to Volume VIII
- #2016-02** – Revisions to Volume VIII
- #2016-03** – Interim Policy and Procedure Directive #2-2016: Voter Registration
- #2016-04** – Revisions to Volume VIII
- #2016-05** – Revisions to Volume VIII
- #2016-06** – Interim Policy and Procedure Directive #4-2016: Money Follows the Person (MFP) Presumptive Eligibility
- #2016-07** – Revisions to Volume VIII
- #2016-08** – Revisions to Volume VIII

Year Issued: 2017

[#2017-01](#) – Revisions to Volume VIII

[#2017-02](#) – Revisions to Volume VIII

[#2017-03](#) – Revisions to Volume VIII

[#2017-04](#) – Revisions to Volume VIII

[#2017-05](#) – Revisions to Volume VIII

[#2017-06](#) – Revisions to Volume VIII

Year Issued: 2018

[#2018-01](#) – Revisions to Volume VIII

[#2018-02](#) – Revisions to Volume VIII

[#2018-03](#) – Revisions to Volume VIII

[#2018-04](#) – Revisions to Volume VIII

[#2018-05](#) – Revisions to Volume VIII

Year Issued: 2019

[#2019-01](#) – Revisions to Volume VIII

[#2019-02](#) – Revisions to Volume VIII

[#2019-03](#) – Revisions to Volume VIII

[#2019-04](#) – Revisions to Volume VIII

Year Issued: 2020

[#2020-01](#) – Revisions to Volume VIII

[#2020-02](#) – Revisions to Volume VIII

[#2020-03](#) – Revisions to Volume VIII

[#2020-04](#) – Revisions to Volume VIII

[#2020-05](#) – Revisions to Volume VIII

[#2020-06](#) – Revisions to Volume VIII

[#2020-07](#) – Revisions to Volume VIII

[#2020-08](#) – Revisions to Volume VIII

[#2020-09](#) – Revisions to Volume VIII

Year Issued: 2021

[#2021-01](#) – Revisions to Volume VIII

[#2021-02](#) – Revisions to Volume VIII

[#2021-03](#) – Revisions to Volume VIII

[#2021-04](#) - Revision to Volume VIII

[#2021-05](#) - Revision to Volume VIII

[#2021-06](#) - Guidance on Face Coverings for Service Delivery

[#2021-07](#) - Revisions to Volume VIII



**North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services**

Voice (919) 855-3500 • TDD (919) 855-3579 • Fax (919) 733-7968 • Toll Free (800) 689-9090

Beverly Eaves Perdue, Governor
Lanier M. Cansler, Secretary

Linda S. Harrington, Director

LOCATION:
805 Ruggles Drive
Raleigh, NC 27603

MAILING ADDRESS:
2801 Mail Service Center
Raleigh, NC 27699-2801
Courier # 56-20-07

MEMORANDUM

To: All Staff Assigned Volume VIII

From: Mac Britt – Chief of Policy *Mac Britt*

Date: July 1, 2010

Re: **Introducing Volume VIII – Casework and Service Delivery Policy for the Independent Living Rehabilitation Program**

VOLUME VIII TRANSMITTAL #1-2010

This transmittal is to introduce the Volume VIII policy manual. In order to create this manual, the IL policies currently found in the Volume I policy manual have been copied to the Volume VIII policy manual, and select policies have then been revised. The Volume I policy manual will be revised in the future to remove IL policies completely. At that time, the Volume I policy manual will become the Casework and Service Delivery Policy for the Vocational Rehabilitation Program only. All policies stated in the Volume VIII are effective July 1, 2010 and replace Independent Living Rehabilitation Program policy and procedural information issued for Volume I prior to this date. Subsequent revisions of Volume VIII will have a revision date. Unless otherwise specified, all policies relate to the Independent Living Rehabilitation Program.

The Volume VIII is divided into chapters, sections, and subsections. Each chapter, section, and subsection is numbered to provide for easy location of specific topics. An Appendix is provided which gives the reader general information and guidance on topics supporting the rehabilitation process. A Table of Contents and an Index identifying the location of each topic is also provided. The Table of Contents entries are hyperlinked to the corresponding chapters, sections, subsections, and appendix entries. Users can relocate to the desired chapter, section, or subsection by mouse clicking on the corresponding page number next to the table of contents entry desired.

IL Counselors received training on the content revisions associated with the release of this manual during the month of June 2010. Therefore, the numerous revisions to policies resulting from the shift from Volume I to Volume VIII will not be summarized here. The need for a few additional revisions to the manual content was identified during the training sessions. Edits which have



resulted from feedback during training sessions are summarized below. Additional edits may be released in the near future.

1. **Reference:** **Subsection 2-12-1: Chiropractic Services**

Effective Date: July 1, 2010

New/Revised: New

Table of Contents Change: Yes

Index Change: Yes

Comments: This policy was inadvertently omitted from the manual prior to the training of the policies.

2. **Reference:** **Appendix Entry – Durable Medical Equipment: Purchase Procedures**

Effective Date: July 1, 2010

New/Revised: New

Table of Contents Change: Yes

Index Change: Yes

Comments: This flowchart accompanies the content included in Section 2-3-8: Procedures to Purchase Durable Medical Equipment. The flowchart is intended to provide a visual representation of the purchase process.

3. **Reference:** **Subsection 2-3-7: Telecommunicative Devices**
 Subsection 2-12-2: Hearing Aids

Effective Date: July 1, 2010

New/Revised: New

Table of Contents Change: No

Index Change: Yes



Comments: References to the Telecommunication Equipment Distribution Program (TEDP) have been revised to reflect the current name of this program, the Equipment Distribution Service (EDS).

4. **Reference:** **Subsection 2-12-2: Hearing Aids**

Effective Date: July 1, 2010

New/Revised: New

Table of Contents Change: Yes

Index Change: Yes

Comments: This policy was inadvertently omitted from the manual prior to the training of the policies.

5. **Reference:** **Section 2-10: Modifications**

Effective Date: July 1, 2010

New/Revised: New

Table of Contents Change: No

Index Change: No

Comments: The description of Form DVR-7001, *Vehicle Inspection Sheet*, was revised to reflect that the form must be completed by an ASE Certified Mechanic.

6. **Reference:** **Subsection 6-3-1: Closure Standards**

Effective Date: July 1, 2010

New/Revised: New

Table of Contents Change: No

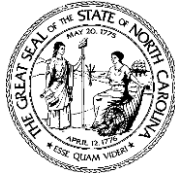
Index Change: No

Comments: The sentence, "This status is used when a client's record is closed after the client has been determined eligible, but prior to



the development and **implementation** of the IPIL.” is being revised to read, “This status is used when a client’s record is closed after the client has been determined eligible, but prior to the development and **initiation** of the IPIL.”





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Voice (919) 855-3500 • TDD (919) 855-3579 • Fax (919) 733-7968 • Toll Free (800) 689-9090

Beverly Eaves Perdue, Governor
Lanier M. Cansler, Secretary

Linda S. Harrington, Director

LOCATION:
805 Ruggles Drive
Raleigh, NC 27603

MAILING ADDRESS:
2801 Mail Service Center
Raleigh, NC 27699-2801
Courier # 56-20-07

MEMORANDUM

To: All Staff Assigned Volume I

From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*

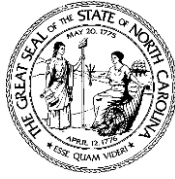
Date: September 19, 2011

Re: Volume VIII – Terminology Change

TRANSMITTAL #2011-01

<u>Section or Subsection</u>	<u>Comments On Revisions Effective Immediately</u>
Mental Retardation (Appendix) Table of Contents Change: Yes Index Change: Yes	All references of 'Mental Retardation' have been changed to 'Intellectual Disability' in accordance with Rosa's Law





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Voice (919) 855-3500 • TDD (919) 855-3579 • Fax (919) 733-7968 • Toll Free (800) 689-9090

Beverly Eaves Perdue, Governor
Albert A. Delia, Acting Secretary

Linda S. Harrington, Director

LOCATION:
805 Ruggles Drive
Raleigh, NC 27603

MAILING ADDRESS:
2801 Mail Service Center
Raleigh, NC 27699-2801
Courier # 56-20-07

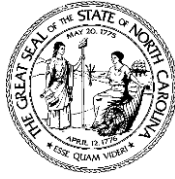
MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: March 19, 2012
Re: Two new sub-sections added to Section 3-7 Priority of Services:
3-7-2 Employment Priority and 3-7-3 Utilization of Resources

TRANSMITTAL #2012-01

<u>Section or Sub-Section</u>	<u>Comments on Revisions - Effective 4-1-2012</u>
<u>3-7-2: Employment Priority</u> Table of Contents Change: Yes Index Change: Yes	This is a new sub-section added to ensure that VR clients who need personal assistance services to maintain employment when the VR case is scheduled to close are considered a high priority.
<u>3-7-3: Utilization of Resources</u> Table of Contents Change: Yes Index Change: Yes	This is a new sub-section added to ensure that staff resources, time and funding are prioritized to assure that the highest priorities in the priority of service categories are served first.





**North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services**

Voice (919) 855-3500 • TDD (919) 855-3579 • Fax (919) 733-7968 • Toll Free (800) 689-9090

Beverly Eaves Perdue, Governor
Albert A. Delia, Acting Secretary

Linda S. Harrington, Director

LOCATION:
805 Ruggles Drive
Raleigh, NC 27603

MAILING ADDRESS:
2801 Mail Service Center
Raleigh, NC 27699-2801
Courier # 56-20-07

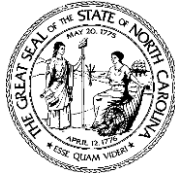
MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: March 19, 2012
Re: Revision to 3-8-3: Comparable Benefits

TRANSMITTAL #2012-02

<u>Section or Sub-Section</u>	<u>Comments on Revisions - Effective 4-1-2012</u>
<p><u>3-8-3: Comparable Benefits</u></p> <p>Table of Contents Change: No Index Change: Yes</p>	<p>Three comparable benefits are added to the policy:</p> <ol style="list-style-type: none"> 1. Money Follows the Person (MFP) 2. NC Housing Finance Agency which offers the Displacement Prevention Program (DPP) and the Urgent Repair Program. 3. Veterans Affairs





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Voice (919) 855-3500 • TDD (919) 855-3579 • Fax (919) 733-7968 • Toll Free (800) 689-9090

Beverly Eaves Perdue, Governor
Albert A. Delia, Acting Secretary

Linda S. Harrington, Director

LOCATION:
805 Ruggles Drive
Raleigh, NC 27603

MAILING ADDRESS:
2801 Mail Service Center
Raleigh, NC 27699-2801
Courier # 56-20-07

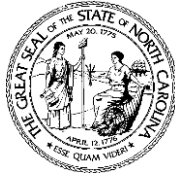
MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: May 22, 2012
Re: Revision to **3-8-3 Comparable Benefits**

TRANSMITTAL #2012-03

<u>Section or Sub-Section</u>	<u>Comments on Revisions - Effective 6-1-2012</u>
<u>3-8-3 Comparable Benefits</u> Table of Contents Change: No Index Change: No	The content under the subheading “NC Housing Finance Agency” has been revised to clarify that DPP funds must be used prior to using MFP funds.





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Voice (919) 855-3500 • TDD (919) 855-3579 • Fax (919) 733-7968 • Toll Free (800) 689-9090

Beverly Eaves Perdue, Governor
Albert A. Delia, Acting Secretary

Linda S. Harrington, Director

LOCATION:
805 Ruggles Drive
Raleigh, NC 27603

MAILING ADDRESS:
2801 Mail Service Center
Raleigh, NC 27699-2801
Courier # 56-20-07

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: May 22, 2012
Re: Revisions to **2-10-1: Residence Modifications**

TRANSMITTAL #2012-04

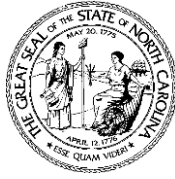
<u>Section or Sub-Section</u>	<u>Comments on Revisions - Effective 6-1-2012</u>
<u>Addition of a Cross-Reference to 2-10-1: Residence Modifications</u>	Staff are directed to <u>3-8-3: Comparable Benefits</u> as a cross reference
<u>2-10-1: Residence Modifications</u> Table of Contents Change: No Index Change: No	Under the subheading <u>Division Maximum Rates for Residence Modifications - Per Client</u> , clarification is made that the \$12,000 limit pertains to the Division's <u>State appropriated</u> case expenditures per client per lifetime.
<u>2-10-1: Residence Modifications</u> Table of Contents Change: No Index Change: No	Clarification is provided regarding requests for exception that may be made to the Chief of Policy for individual projects estimated to cost above the specific type of modification limit, and the manner in which exceptions are to be applied.



**2-10-1: Residence
Modifications**

Table of Contents Change: No
Index Change: No

Policy is clarified to address situations wherein the Division receives reimbursement by a third party towards the cost of a residence modification. In these situations, the amount of the third party contribution shall be deducted from the cost of the modification to the Division and to the lifetime cap of \$12,000 of Division State appropriated case expenditures per client.



North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Voice (919) 855-3500 • TDD (919) 855-3579 • Fax (919) 733-7968 • Toll Free (800) 689-9090

Beverly Eaves Perdue, Governor
Albert A. Delia, Acting Secretary

Linda S. Harrington, Director

LOCATION:
805 Ruggles Drive
Raleigh, NC 27603

MAILING ADDRESS:
2801 Mail Service Center
Raleigh, NC 27699-2801
Courier # 56-20-07

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: August 01, 2012
Re: Revision to **Section 2-11: Personal Assistance Services**

TRANSMITTAL #2012-05

The policy is revised to address usage of the fiscal agent in processing payroll and taxes for clients served by the IL program. These revisions will become effective August 15, 2012. The revised/new personal assistance forms will be posted on the DVRS Intranet by the effective date of this policy.

The significant changes to **Section 2-11: Personal Assistance Services** are as follows:

- The types of services that are not considered personal assistance services are specified.
- Form numbers are removed since DVR forms will not have numbers when BEAM is implemented.
- Remove **Form 0116** from 2-11-1 since personal assistance services are not subject to financial need for VR clients.
- The client will be required to use the Division's contract fiscal agent. The fiscal agent will process payroll and pay the personal assistant directly, pay the employer related taxes, conduct a criminal background check on

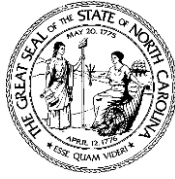


each personal assistant, and provide worker's compensation insurance coverage to the client.

- The client shall utilize the criminal background check information provided by the Division's contract fiscal agent when determining if the personal assistant will be hired.
- The evaluator (registered nurse, physical therapist, or occupational therapist) shall observe the client perform the activities of daily living to complete the Division's evaluation form. The evaluator shall not determine the number of hours that the Division will sponsor.
- The counselor in consultation with the client will determine the number of hours that are being requested for the Division to sponsor based on the evaluation and complete the "*Personal Assistance Service Needs Check List*." The Division shall only pay for services which are specified on the Division's "*Personal Assistance Service Needs Check List*".
- The Division shall not sponsor personal assistance services unless all of the hours as recommended on the evaluation are covered by all paid service providers and in-kind providers (family, friends and volunteers).
- An updated evaluation by a registered nurse, physical therapist, or occupational therapist is required only when there are significant changes in the client's functional capacity and subsequent need(s).
- A telephone contact and face-to-face visit will be alternated throughout the calendar year such that the client receives contact twice a year either by phone or in person.
- Clients who are required to contribute towards the cost of their personal assistance service due to excess income shall include on the timesheet both the number of hours that the Division will sponsor and the number of hours that the client is required to contribute towards the cost of their personal assistance service. The IL client shall submit the timesheet to the Division's fiscal agent as specified on the payroll calendar and provide a check to their IL counselor for the amount that the client is required to contribute. The client shall make the check payable to DVRS. The Division's fiscal agent shall pay the personal assistant for both the number of hours that the Division will sponsor and the number of hours that the client is required to contribute towards the cost of their personal assistance service.
- In the rare situation when an IL client temporarily contracts with a home health agency for personal assistance services, the Division shall authorize payment directly to the vendor.
- The counselor will provide the Division's contract fiscal agent with the completed DVR Forms: *Personal Assistance Services and Reimbursement Agreement*, the *Personal Assistance Service Needs*

Check List and the *Client Information Sheet*. The fiscal agent will calculate the authorization amount and provide this information to the counselor within three days of receiving the *Client Information Sheet*. The counselor will issue the authorization and provide the authorization to the fiscal agent within three days of receiving the authorization amount from the fiscal agent.

- For clients who are required to contribute towards their personal assistance service due to excess income, the counselor shall provide the Division's contract fiscal agent with the annual amount that the client is required to contribute and the approved hourly rate for paying their personal assistant(s) on the *Client Information Sheet*. The fiscal agent shall calculate the number of hours that the client is required to contribute per week based on the hourly rate and the federal/state taxes. The fiscal agent shall provide the number of hours per week and the semi-monthly amount that the client is required to contribute towards the cost of their personal assistance service to the counselor within three days of receiving the *Client Information Sheet*.
- If the hourly rate or number of hours is increased (after the Assistant Regional Director approval) prior to the expiration date of the authorization, the counselor will provide the Division's contract fiscal agent with the new DVR Form *Personal Assistance Services and Reimbursement Agreement* and service dates. The fiscal agent will calculate the new authorization amount and provide this information to the counselor within three days of receiving the client information from the counselor. The counselor will issue a new authorization and provide the new authorization to the fiscal agent within three days of receiving the authorization amount from the fiscal agent.



North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Voice (919) 855-3500 • TDD (919) 855-3579 • Fax (919) 733-7968 • Toll Free (800) 689-9090

Beverly Eaves Perdue, Governor
Albert A. Delia, Acting Secretary

Linda S. Harrington, Director

LOCATION:
805 Ruggles Drive
Raleigh, NC 27603

MAILING ADDRESS:
2801 Mail Service Center
Raleigh, NC 27699-2801
Courier # 56-20-07

MEMORANDUM

To: All Staff Assigned Volume VIII

From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*

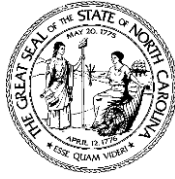
Date: September 18, 2012

Re: **New Policy Directive for Volume VIII – Interim Policy and Procedure Directive #1-2012 – Displacement Prevention Partnership (DPP) as a Comparable Benefit**

TRANSMITTAL #2012-06

The Division has determined that the Displacement Prevention Partnership (DPP) is a comparable benefit for IL home modification services. This is a new policy directive that provides guidelines for how IL staff are to access this comparable benefit. Special provisions for extenuating circumstances on the **DVR-O116 Financial Statement** are covered. Other requirements such as the DPP Promissory Note, definition of a qualified home, and funding limits are covered. This Policy Directive becomes effective October 01, 2012.





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Voice (919) 855-3500 • TDD (919) 855-3579 • Fax (919) 733-7968 • Toll Free (800) 689-9090

Beverly Eaves Perdue, Governor
Albert A. Delia, Acting Secretary

Linda S. Harrington, Director

LOCATION:
805 Ruggles Drive
Raleigh, NC 27603

MAILING ADDRESS:
2801 Mail Service Center
Raleigh, NC 27699-2801
Courier # 56-20-07

MEMORANDUM

To: All Staff Assigned Volume VIII

From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*

Date: September 18, 2012

Re: **New Policy Directive for Volume VIII – Interim Policy and Procedure Directive #2-2012 – Money Follows the Person (MFP) and Deinstitutionalization**

TRANSMITTAL #2012-07

Money Follows the Person (MFP) is a state demonstration project funded by Medicaid that supports Medicaid-eligible North Carolinians to have greater choice about where they receive long-term services and supports. DVRS' Independent Living Program has been identified as the MFP lead agency for individuals with physical disabilities who are under 65 years old. As lead agency, this means these referrals will be directed to IL first. This is a new policy directive that provides the guidelines for IL staff in reviewing referrals from MFP, guidelines for providing MFP services, and the specific IL casework process for addressing MFP referrals. This Policy Directive becomes effective October 01, 2012.





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Linda S. Harrington
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII

From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*

Date: February 25, 2013

Re: Interim Policy and Procedure Directive #1-2013: Staff Use of Social Media

TRANSMITTAL #2013-01

The purpose of this Directive is to address the use of Social Media and Social Networking Sites by Division staff, specifically communications with active consumers of the Division. This Directive was developed in accordance with the broader DHHS Policy on Social Networking/ Social Media Sites and with the Division's policy on Confidentiality of Client Information (Volume I and VIII) and is effective immediately.





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: **June 13, 2013**
Re: **Interim Policy and Procedure Directive #2-2013:
1281 Budget Suspension**

TRANSMITTAL #2013-02

The purpose of this Directive is to notify staff regarding the suspension of the 1281 budget effective July 1, 2013. Procedures for handing current authorizations and invoices are provided. The Directive also provides guidelines for authorizing future VR/IL Concurrent Cases.

Reference: 1-13 VR/IL Concurrent Records of Service; 2-11 Personal Assistance Services





**North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services**

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

MEMORANDUM

To: All Staff Assigned Volume VIII

From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*

Date: June 13, 2013

Re: Revised Sections 1-13: VR/IL Concurrent Records of Service and 2-11 Personal Assistance Services

TRANSMITTAL #2013-03

Section or Subsection	Comments on revisions to be effective July 1, 2013
<p><u>Section: 1-13: VR/IL Concurrent Records of Service</u></p> <p>Table of contents change: No Index change: No</p>	<p>Policy is revised to explain in greater detail the responsibilities of the VR and IL counselor in concurrent records of service. Also, the revised policy removes the reference to the 1281 budget since this budget has been suspended.</p>
<p><u>Section: 2-11: Personal Assistance Services</u></p> <p>Table of contents change: No Index change: No</p>	





**North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services**

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: July 1, 2013
Re: Revisions to Volume VIII

TRANSMITTAL #2013-04

<u>Section or Subsection</u>	<u>Comments on Revisions (Eff. Immediately)</u>
<u>Subsection: 1-2-2: Responsibilities of the Transferring Counselor</u> Table of Contents Change: No Index Change: No	Clarification of policy
<u>Subsection: 1-2-3: Responsibilities of the Receiving Counselor</u> Table of Contents Change: No Index Change: No	Clarification of policy
<u>Section: 1-4: Client Assistance Program</u> Table of Contents Change: No Index Change: No	Clarification on signed consent
<u>Subsection: 1-8-3: Residence</u> Table of Contents Change: No Index Change: No	Clarification of policy regarding services provided by two States



<u>Section or Subsection</u>	<u>Comments on Revisions (Eff. Immediately)</u>
<p><u>Section: 2-10: Modifications</u></p> <p>Table of Contents Change: No Index Change: No</p>	<p>Clarification of policy regarding DMV Reviews (Definitions section)</p>
<p><u>Subsection: 2-10-1: Residence Modifications</u></p> <p>Table of Contents Change: No Index Change: No</p>	<p>Added cross reference to Appendix Entry: Residence Modification General Guidelines</p>
<p><u>Subsection: 3-8-1: Financial Statement</u></p> <p>Table of Contents Change: No Index Change: No</p>	<p>Under <i>Services Subject to Financial Need</i>, added a reference to Financial Needs Worksheet A</p>



North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: July 1, 2013
Re: Revisions to Volume VIII Appendix

TRANSMITTAL #2013-05

<u>Appendix Entry</u>	<u>Comments on Revisions (Eff. Immediately)</u>
<u>Rehabilitation Counselor II (RCII) Process</u> Table of Contents Change: Yes Index Change: Yes	Omitted by mistake
<u>Residence Modification General Guidelines</u> Table of Contents Change: Yes Index Change: Yes	Omitted by mistake





**North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services**

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: November 15, 2013
Re: Revisions to Volume VIII

TRANSMITTAL #2013-06

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Section 1-17: Medical Consultation</u></p> <p>Table of Contents Change: No Index Change: No</p>	<p>Removes references to <u>Unit</u> Medical consultant</p>
<p><u>2-3-7: Telecommunicative Devices</u></p> <p>Table of Contents Change: No Index Change: No</p>	<p>Explains that EDS is not a comparable benefit for Telecommunicative devices</p>
<p><u>2-12-2: Hearing Aids</u></p> <p>Table of Contents Change: No Index Change: No</p>	<p>Explains that EDS is not a comparable benefit for hearing aids</p>
<p><u>Appendix Item: Learning Disability</u></p> <p>Table of Contents Change: No Index Change: No</p>	<p>Clarifies “Broad Written Language” used as part of eligibility decisions</p>





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: April 24, 2014
Re: Interim Policy and Procedure Directive #1-2014:
Durable Medical Equipment and Supplies for IL

TRANSMITTAL #2014-01

This directive describes new procedures for the purchase of durable medical equipment and replaces material currently found under **2-3-8: Procedures to Purchase Durable Medical Equipment**. At BEAM go-live, this directive will be replaced by permanent policy on purchase of DME that will contain guidance and procedures that are specific to the BEAM RFQ process. This directive is effective immediately.





**North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services**

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: April 24, 2014
Re: Revisions to Volume VIII

TRANSMITTAL #2014-02

Section/Subsection or Appendix Item	Comments on Revisions
<p><u>Subsection 2-2-1: Substantial Services</u></p> <p>Table of Contents Change: Yes Index Change: Yes</p>	<p>This new section defines substantial services for the IL program.</p>
<p><u>Subsection 2-2-2: Major Independent Living Services</u></p> <p>Table of Contents Change: Yes Index Change: Yes</p>	<p>This new section defines major independent living services.</p>
<p><u>Subsection 2-2-3: Timeliness of Services</u></p> <p>Table of Contents Change: Yes Index Change: No</p>	<p>Subsection number change from 2-2-1</p>
<p><u>Subsection 2-2-4: Policy Exceptions</u></p> <p>Table of Contents Change: Yes Index Change: No</p>	<p>Subsection number change from 2-2-2</p>



Section/Subsection or Appendix Item	Comments on Revisions
<p data-bbox="201 304 740 369"><u>Subsection 2-11-2: Independent Living Program</u></p> <p data-bbox="201 407 599 472">Table of Contents Change: No Index Change: No</p>	<p data-bbox="800 304 1390 499">The Division no longer requires obtaining existing records from CAP-DA, Division of Aging and Adult Services or DMA for the purpose of a personal assistance evaluation. Clarification is provided for priority category 2 for PAS.</p>
<p data-bbox="201 541 760 573"><u>Section 2-14: Rehabilitation Technology</u></p> <p data-bbox="201 611 613 676">Table of Contents Change: Yes Index Change: Yes</p>	<p data-bbox="800 541 1357 606">Clarification is provided for the definition of Rehabilitation Technology.</p>
<p data-bbox="201 745 667 810"><u>Subsection 2-14-1: Rehabilitation Engineering</u></p> <p data-bbox="201 848 613 913">Table of Contents Change: Yes Index Change: No</p>	<p data-bbox="800 745 1166 777">Subsection number change.</p>
<p data-bbox="201 982 516 1014"><u>Appendix Item: DSM-5</u></p> <p data-bbox="201 1052 621 1117">Table of Contents Change: Yes Index Change: Yes</p>	<p data-bbox="800 982 1341 1047">Highlights of changes from DSM-IV-TR to DSM-5</p>



**North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services**

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: June 27, 2014
Re: Revisions to Volume VIII: BEAM Updates

TRANSMITTAL #2014-03

Effective: July 1, 2014

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Section 1-11 Case Service Authorizations</u></p> <p>Table of Contents Change: No Index Change: Yes</p>	<p>Defines pre-planned, planned and authorizations to client</p>
<p><u>Section 1-12 Invoice Processing</u></p> <p>Table of Contents Change: Yes Index Change: No</p>	<p>Explains that overpayments are now called authorization adjustments. Supervisor approval is needed when the amount billed is 10% or more of the initially authorized amount.</p>
<p><u>Section 1-13 VR/IL Concurrent Records of Service</u></p> <p>Table of Contents Change: No Index Change: Yes</p>	<p>Policy is revised to correspond with changes in form names and to identify “Information & Referral” as the planned service to be selected in concurrent records of service.</p>
<p><u>Section 1-14 Client Signatures</u></p> <p>Table of Contents Change: No Index Change: No</p>	<p>Explains the use of electronic signatures</p>



<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Section 1-15 Imprest Cash</u></p> <p>Table of Contents Change: No Index Change: No</p>	<p>Clarifies procedures for utilizing imprest cash</p>
<p><u>Section 1-19 Supervisor Approval</u></p> <p>Table of Contents Change: Yes Index Change: Yes</p>	<p>Explains that all supervisors have the same role in the Electronic Case Management system. Clarifies services requiring Supervisor approval and where the approval must occur (plan vs. authorization)</p>
<p><u>Section 2-2 Scope of Services</u></p> <p>Table of Contents Change: Yes Index Change: No</p>	<p>Clarifications in language specific to BEAM</p>
<p><u>Section 2-3 IL Equipment</u></p> <p>Table of Contents Change: Yes Index Change: Yes</p>	<p>Numerous updates including the addition of definitions, procedural changes to the purchase of DME, the bidding/RFQ process and approvals required</p>
<p><u>Section 3-1 Timelines for Eligibility Determination</u></p> <p>Table of Contents Change: No Index Change: No</p>	<p>Eligibility Extensions cannot exceed 60 days</p>
<p><u>Section 3-3 IL Case Status Codes and Definitions</u></p> <p>Table of Contents Change: No Index Change: Yes</p>	<p>Updates new status codes</p>
<p><u>Section 3-8 Financial Need and Client Resources</u></p> <p>Table of Contents Change: Yes Index Change: Yes</p>	<p>Clarifications in language specific to BEAM</p>

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p data-bbox="201 304 646 369"><u>Chapter 4: Rehabilitation Needs Assessment</u></p> <p data-bbox="201 407 618 472">Table of Contents Change: Yes Index Change: No</p>	<p data-bbox="831 304 1365 338">Deletes information regarding the WRAP</p>
<p data-bbox="201 541 678 575"><u>Chapter 5: Rehabilitation Program</u></p> <p data-bbox="201 611 618 676">Table of Contents Change: Yes Index Change: Yes</p>	<p data-bbox="831 541 1360 638">Updates sections of the IL Service Plan including documentation requirements in counselor comments</p>
<p data-bbox="201 745 756 779"><u>Chapter 6: Record of Service Outcomes</u></p> <p data-bbox="201 814 618 879">Table of Contents Change: Yes Index Change: Yes</p>	<p data-bbox="831 745 1328 779">Updates procedures and status codes</p>
<p data-bbox="201 949 667 982"><u>Chapter 7: Post-Closure Services</u></p> <p data-bbox="201 1018 618 1083">Table of Contents Change: Yes Index Change: Yes</p>	<p data-bbox="831 949 1328 982">Updates procedures and status codes</p>
<p data-bbox="201 1152 756 1218"><u>Appendix - Durable Medical Equipment Purchase Procedures - Charts A & B</u></p> <p data-bbox="201 1253 607 1318">Table of Contents Change: No Index Change: No</p>	<p data-bbox="831 1152 1279 1186">Revised to show process in BEAM</p>
<p data-bbox="201 1390 727 1423"><u>Appendix – IL Closure Process Guide</u></p> <p data-bbox="201 1459 618 1524">Table of Contents Change: Yes Index Change: Yes</p>	<p data-bbox="831 1390 1386 1423">Details procedures to follow to close cases</p>



North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: June 30, 2014
Re: **Interim Policy and Procedure Directive #2-2014:
Excess Income “Workaround” in BEAM**

TRANSMITTAL: #2014-04

Effective: July 1, 2014

This directive explains procedures needed in order to authorize above the amount listed in estimated Agency expenditures when there is excess income.





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: June 30, 2014
Re: **Interim Policy and Procedure Directive #3-2014:
BEAM Service Structure and Service Selection**

TRANSMITTAL: #2014-05

Effective: July 1, 2014

This directive explains how services are set up in BEAM.





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Elizabeth W. Bishop
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: August 1, 2014
Re: Revisions to Volume VIII: Section 2-3 – IL Equipment

TRANSMITTAL: #2014-06

Effective: Immediately

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Section 2-3: Equipment</u></p> <p>Table of Contents Change: No Index Change: No</p>	<p>Clarifies RFQ process for DME and Non-Medical Equipment purchases</p>
<p><u>Appendix Items</u></p> <p>Table of Contents Change: Yes Index Change: Yes</p>	<ul style="list-style-type: none"> • Revisions to flow charts: Durable Medical Equipment Purchase Procedures - Chart A and Durable Medical Equipment Purchase Procedures - Chart B • New flow charts for Non-Medical Equipment: Purchase Procedures – Chart A and Non-Medical Equipment: Purchase Procedures – Chart B





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Elizabeth W. Bishop
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: October 22, 2014
Re: Revisions to Volume VIII

TRANSMITTAL: #2014-07

Effective: Immediately

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Section 1-12: Invoice Processing</u></p> <p>Table of Contents Change: No Index Change: Yes</p>	<ul style="list-style-type: none"> Pharmacy Invoices: the prescription drug dispensing fee is automatic and the form is not in Beam but on the DVRS Intranet site Invoice Numbering Convention: new system established to identify invoices that have no invoice number
<p><u>Section 1-19: Supervisor Approval</u></p> <p>Table of Contents Change: No Index Change: No</p>	<p>Exceptions to sponsor more than three prescriptions requires supervisor approval and not Chief of Policy (revised based on service set-up in Beam)</p>



<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p data-bbox="203 304 565 338"><u>Section 2-3: IL Equipment</u></p> <p data-bbox="203 373 613 438">Table of Contents Change: Yes Index Change: No</p>	<ul data-bbox="852 304 1409 877" style="list-style-type: none"> <li data-bbox="852 304 1409 405">• Purchase of equipment (including DME) under \$500: Just need one quote (no RFQ) <li data-bbox="852 443 1409 573">• Changes to Flow Charts (Appendix Entries): DME: Purchase Procedures – Chart B; and Non-Medical Equipment: Purchase Procedures – Chart B <li data-bbox="852 611 1409 779">• New form was created that is attached to invoices for equipment – this goes to our fiscal services section first for review prior to going to the Controller’s Office for payment <li data-bbox="852 816 1409 877">• New subsection 2-3-5: Procedures to Purchase Durable Medical Supplies
<p data-bbox="203 982 639 1016"><u>Section 2-17-2: Vehicle Repairs</u></p> <p data-bbox="203 1052 602 1117">Table of Contents Change: No Index Change: No</p>	<p data-bbox="802 982 1409 1150">Policy on vehicle repairs is revised so that only “one” quote is required for vehicle repairs costing \$750 or less. Greater than \$750 still requires three quotes. Repairs exceeding \$2500 require Chief of Policy approval.</p>



North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Elizabeth W. Bishop
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: October 22, 2014
Re: Interim Policy and Procedure Directive #4-2014: Documents to be Signed and Retained in the Case Record

TRANSMITTAL: #2014-08

Effective: Immediately

This policy directive identifies specific documents that must be printed and maintained in the hard copy case record. All documents that require a client/guardian signature must be printed in their entirety, signed by the client/guardian, and retained in the case record. There are other documents that must be printed and given to the client. For auditing purposes and consistency, these documents should also be copied for the case record.





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Elizabeth W. Bishop
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: January 7, 2015
Re: Revisions to Volume VIII

TRANSMITTAL: #2015-01

Effective: January 7, 2015

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Subsection 2-12-3: Orthotics</u></p> <p><u>Table of Contents Change: No</u></p> <p><u>Index Change: No</u></p>	<ul style="list-style-type: none"> • Clarifies that rates are subject to the fee schedule (DMA link) in Volume V. • Purchasing procedures and staff responsible (field vs. state office staff) are explained based on the cost of the item. • There is a new requirement to document the following statement in Counselor Comments on the plan: <i>“Sole source of the vendor is warranted in accordance with Waiver section 01 NCAC 05b.1401 because a particular orthotic appliance is needed”</i>



<p><u>Subsection 2-12-4: Prosthetics</u></p> <p><u>Table of Contents Change: No</u></p> <p><u>Index Change: No</u></p>	<ul style="list-style-type: none"> • Clarifies that rates are subject to the fee schedule (DMA link) in Volume V. • Purchasing procedures and staff responsible (field vs. state office staff) are explained based on the cost of the item. • There is a new requirement to document the following statement in Counselor Comments on the plan: <i>“Sole source of the vendor is warranted in accordance with Waiver section 01 NCAC 05b.1401 because a particular prosthetic appliance is needed”</i>
<p><u>Subsection 3-8-1: Financial Needs Survey</u></p> <p><u>Table of Contents Change: No</u></p> <p><u>Index Change: No</u></p>	<p>Policy is revised to require that: Copies of bank account statements (checking and savings), a minimum of 3 months, must be obtained from all applicable family members. The amount in the account must be considered as an asset and recorded in Section D – Available Assets.</p> <p>This is part of the Divisions corrective action to the 2013-14 State Audit.</p>



North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Elizabeth W. Bishop
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: January 30, 2015
Re: Revisions to Volume VIII

TRANSMITTAL: #2015-02

Effective: February 1, 2015

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Subsection 1-19-1: Rehabilitation Counselor I and Rehabilitation Counselor Trainee</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	<p>This policy revision allows a Manager to enable a counselor with a minimum of six months of employment the discretion to authorize services and authorization revisions up to and including \$500 without supervisory approval.</p>
<p><u>Subsection 3-8-1: Financial Needs Survey</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	<p>This policy revision allows a Supervisor to add additional line items to Section G of a previously completed FNS in order to increase the overall Estimated Agency Expenditure, increasing the total for which the counselor may authorize. The circumstances must be explained in <i>Extenuating Circumstances</i> section.</p>





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Elizabeth W. Bishop
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: February 16, 2015
Re: Interim Policy and Procedure Directive #1-2015: MFP Presumptive Eligibility

TRANSMITTAL: #2015-03

Effective: Immediately

If an individual has been determined eligible for MFP the individual is presumed to be eligible for IL services. The MFP application and pre-transition checklist will suffice for verification of MFP eligibility. These documents must be maintained in the IL case record. Presumptive eligibility should be determined as quickly as possible, not to exceed 30 days from the date of the application.

Please refer to the Policy Directive for more detailed information and procedures.





**North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services**

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Claudia B. Horn, M.S.
Senior Director

Elizabeth W. Bishop
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: April 1, 2015
Re: Revisions to Volume VIII

TRANSMITTAL: #2015-04

Effective: Immediately

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Section 1-12: Invoice Processing</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: Yes</u></p>	<ul style="list-style-type: none"> • Vendor Signatures: Medical Invoices • Pharmacy Invoices • Invoice Numbering Convention • Comparable Benefits • Methodology for Paying Medical/Pharmacy Claims • Prior Approval of Unusual Charges
<p><u>Sub-Section: 2-3-10: Equipment Repairs</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	<p>Describes purchasing procedures, monetary thresholds and when approval is required</p>
<p><u>Sub-Section 3-8-3: Comparable Benefits</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	<p>Comparable benefits do not need to be utilized for diagnostic services if required for eligibility or rehab needs planning. COP approval is NOT required for this waiver. Cross reference 1-11 for procedures to document this waiver on authorizations</p>





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Claudia B. Horn, M.S.
Senior Director

Elizabeth W. Bishop
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: April 1, 2015
Re: Interim Policy and Procedure Directive #2-2015:
Changes to Paper-Based Financial Needs Survey (FNS) and
Completion of the Electronic FNS

TRANSMITTAL: #2015-05

Effective Immediately

Due to revisions to the 1040 tax form by the IRS and changes to North Carolina income tax withholding percentages, the paper version of the Financial Needs Survey worksheet, accessible via the agency intranet, has been updated. See directive for details.





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Claudia B. Horn, M.S.
Senior Director

Elizabeth W. Bishop
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Neil Mac Britt – Chief of Policy *Neil Mac Britt*
Date: June 17, 2015
Re: Revisions to Volume VIII

TRANSMITTAL: #2015-06

Effective: July 1, 2015

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<u>Subsection 3-8-1: Financial Needs Survey</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	If a client and all applicable family members do not have a bank account, the Bank Account Non-Existence Contract (BANC) form must be completed and signed by the client and VR representative.
<u>Interim Policy and Procedure Directive #1-2014: Durable Medical Equipment and Supplies for IL</u>	Marked obsolete
<u>Interim Policy and Procedure Directive #2-2014: Excess Income "Workaround" in Beam</u>	Marked obsolete





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Claudia B. Horn, M.S.
Senior Director

Elizabeth W. Bishop
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller, Chief of Policy *Vicky Miller*
Date: August 1, 2015
Re: Revisions to Volume VIII

TRANSMITTAL: #2015-07

Effective: August 1, 2015

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<u>Section 1-13: VR/IL Concurrent Records of Service</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Removes requirement to obtain documents that are now available to both programs in the BEAM ECF.
<u>Section 3-1: Timelines for Eligibility Determination</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Revised to correspond with changes to form names in BEAM.
<u>Subsection 3-6-3: Functional Improvement</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Updates goal areas for functional improvement.



<p><u>Subsection 3-6-5: Record of Service Documentation</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	<p>Combines the eligibility and SD process. Form names changed to correspond with BEAM.</p>
<p><u>Section 4-2: Record of Service Documentation</u></p> <p><u>Table of Contents Change: Yes</u> <u>Index Change: Yes</u></p>	<p>The WRAP is required documentation before IL Service Plan development. Explanations of specific criteria to document on the WRAP are included in this policy revision.</p>
<p><u>Subsection 5-2-4: Counselor Comments</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	<p>Removes requirement to document additional information gathered during the comprehensive assessment in the counselor comment section of the IL Service plan. This information is now documented on the WRAP.</p>



North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Richard O. Brajer
Secretary

Claudia B. Horn, M.S.
Senior Director

Elizabeth W. Bishop
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller, Chief of Policy *Vicky Miller*
Date: August 21, 2015
Re: Revisions to Volume VIII

TRANSMITTAL: #2015-08

Effective: September 1, 2015

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Subsection 1-3-4: Release of Confidential Information Without the Consent of the Client</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	<p>Revised as a result of a new data sharing agreement with the State Office of Information Technology Services (OITS).</p>
<p><u>Subsection 3-4-2: Referrals</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	<p>Revised as a result of a new data sharing agreement with the State Office of Information Technology Services (OITS).</p>





North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services

Pat McCrory
Governor

Richard O. Brajer
Secretary

Claudia B. Horn, M.S.
Senior Director

Elizabeth W. Bishop
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: November 9, 2015
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2015-09

Effective: Immediately

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Section 1-15: Imprest Cash Fund</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	Clarifies reimbursement process and documentation requirements
<p><u>Section 2-3: IL Equipment</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	Terminology change; reference to Client Data Packet checklist
<p><u>Subsection 2-10-1: Residence Modifications</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: Yes</u></p>	Updated to reflect changes in Beam; reference to Client Data Packet checklist



<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Subsection 2-10-2: Vehicle Modifications</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: Yes</u></p>	<p>Updated to reflect changes in Beam; reference to Client Data Packet checklist</p>
<p><u>Subsection 2-10-3: Worksite Modifications</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: Yes</u></p>	<p>Updated to reflect changes in Beam; reference to Client Data Packet checklist</p>
<p><u>Section 3-8-1: Financial Needs Survey</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	<p>Updated functionality in BEAM renders PD #2-2014 obsolete. The supervisor can add additional line items to Section G in certain circumstances.</p>



MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: February 2, 2016
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2016-01

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<u>Section 1-1-3: Immediate Family</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Effective Immediately Allows the Regional Director to appoint a designee to determine eligibility for an employee or employee’s family member.
<u>Section 1-12: Invoice Processing</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Effective Immediately Updated to reflect changes in BEAM
<u>Interim Policy and Procedure Directive #1-2016: FNS Allowable Net Monthly Income Table</u>	Effective: 2/15/2016 Updates the allowed net monthly income levels based on 2016 Federal Poverty guidelines.





Vocational Rehabilitation Services
HEALTH AND HUMAN SERVICES

CLAUDIA B. HORN
Senior Director

KENNETH W. GIBBS
Interim Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy *Vicky Miller*
Date: February 15, 2016
Re: Revisions to Volume VIII: Section 2-3: IL Equipment

TRANSMITTAL: #2016-02

Effective: March 1, 2016

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Section 2-3: IL Equipment</u></p> <p><u>Table of Contents Change: No</u></p> <p><u>Index Change: Yes</u></p>	<p>Revisions to policy and procedures including approval thresholds for the DME Convenience Contract. The DME Purchasing Flow Charts in the Appendix have been updated to include Convenience Contract language.</p>





Vocational Rehabilitation Services
HEALTH AND HUMAN SERVICES

CLAUDIA B. HORN
Senior Director

KENNETH W. GIBBS
Interim Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy *Vicky Miller*
Date: **March 17, 2016**
Re: **Interim Policy and Procedure Directive #2-2016: Voter Registration**

TRANSMITTAL: #2016-03

Effective: April 1, 2016

This new Policy Directive explains procedures required to comply with the National Voter Registration Act (NVRA), including the requirement to offer voter registration at the application process, change of name or address and implementation of post closure services. Requirements for the reporting of voter registration data and retention of records are also addressed.





Vocational Rehabilitation Services
HEALTH AND HUMAN SERVICES

CLAUDIA B. HORN
Senior Director

KENNETH W. GIBBS
Interim Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII

From: Vicky Miller – Chief of Policy

Vicky Miller

Date: May 1, 2016

Re: Revisions to Volume VIII

TRANSMITTAL: #2016-04

Effective: May 1, 2016

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Section 1-12-1: [Invoice Processing]</u> <u>Vendor Signatures</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	<p>Revised to provide clarification of invoice types and requirements for information.</p>





Vocational Rehabilitation Services
HEALTH AND HUMAN SERVICES

CLAUDIA B. HORN
Senior Director

KENNETH W. GIBBS
Interim Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: May 16, 2016
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2016-05

Effective: June 1, 2016

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Subsection 1-12-2: [Invoice Processing]: Additional Information Required on Invoices</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: Yes</u></p>	<p>Clarifies that when paying a competitive bid or contract rate price secondary to a comparable benefit, IL will pay the difference between the bid/contract rate and comparable benefit payment amount</p>
<p><u>Subsection 3-8-3: Comparable Benefits</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: Yes</u></p>	<p>Describes when comparable benefits must be verified via NC Tracks</p>
<p><u>Interim Policy and Procedure Directive #3-2016: Displacement Prevention Partnership (DPP) as a Comparable Benefit</u></p>	<p>Clarifies procedures for utilizing DPP including home ownership, financial considerations and promissory note requirements</p>





Vocational Rehabilitation Services
HEALTH AND HUMAN SERVICES

CLAUDIA B. HORN
Senior Director

TARA K. MYERS
Division Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy *Vicky Miller*
Date: August 1, 2016
Re: Interim Policy and Procedure Directive #4-2016: Money Follows the Person (MFP) Presumptive Eligibility

TRANSMITTAL: #2016-06

Effective: August 15, 2016

This revised Policy Directive replaces Interim Policy and Procedure Directive #1-2015: Money Follows the Person (MFP) Presumptive Eligibility.

Important changes in this update:

- Specifies the NC Division of Medical Assistance (DMA) criteria for MFP eligibility
- Explains MFP procedures required to comply with Federal timelines and ensure access to a system of community-based services and supports
- MFP funded services are exempt from determination of financial need; “MFP Waiver” is documented in the extenuating circumstances section of the Financial Needs Survey. If both MFP and IL funds are needed for the transition, the client will need to meet the financial needs test for IL funded services.
- MFP Presumptive Eligibility Documentation requirements will be posted in the August 11th Beam blog.

Please refer to the Policy Directive for more detailed information and procedures.





MEMORANDUM

To: All Staff Assigned Volume VIII

From: Vicky Miller – Chief of Policy

Vicky Miller

Date: November 7, 2016

Re: Revisions to Volume VIII

TRANSMITTAL: #2016-07

Effective: November 15, 2016

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<p><u>Subsection 2-10-1: Residence Modifications</u></p> <p><u>Table of Contents Change: No</u></p> <p><u>Index Change: No</u></p>	Clarifies thresholds requiring approval when DPP and comparable benefits are available to contribute to the total cost
<p><u>Subsection 2-10-3: Worksite Modifications</u></p> <p><u>Table of Contents Change: No</u></p> <p><u>Index Change: No</u></p>	Changes threshold for which Chief of Policy approval is required from \$500 to \$2500 per project





MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: January 3, 2017
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2016-08

Effective: January 3, 2017

<u>Section/Subsection or Appendix Item</u>	<u>Comments on Revisions</u>
<u>Subsection 1-3-5: Subpoenas</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Clarifies procedures required when an employee receives a subpoena
<u>Section 1-12: Invoice Processing</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Transportation invoices no longer require the number of trips to be included when submitting for payment. All invoices should reflect the actual dates the travel will or has occurred.
<u>Subsection 2-17-2: Vehicle Repairs</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Prohibits the sponsorship of repairs to mopeds and motorcycles
<u>Appendix Item: AgrAbility</u>	Provides background information, general guidelines and procedures for handling cases with AgrAbility





**DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF VOCATIONAL REHABILITATION SERVICES**

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

CLAUDIA B. HORN, M.S.
SENIOR DIRECTOR

TARA K. MYERS
DIVISION DIRECTOR

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: February 27, 2017
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2017-01

Effective: 3/1/2017

<u>Section/Subsection/Appendix Item or Policy Directive</u>	<u>Comments on Revisions</u>
<p><u>Interim Policy and Procedure Directive #1-2017 – Voter Registration</u></p>	<p><i>(Replaces Policy Directive #2-2016)</i> Preregistration for individuals age 16 or 17 is required. The Voter Registration Preference form does not need to be signed and kept in the hard copy file, but must be completed in BEAM. Submission is no longer required through the on-line portal.</p>
<p><u>Interim Policy and Procedure Directive #2-2017 – FNS Allowable Net Monthly Income Table</u></p>	<p><i>(Replaces Policy Directive #1-2016)</i> Updates the allowed net monthly income levels based on 2017 Federal Poverty guidelines.</p>



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF VOCATIONAL REHABILITATION SERVICES

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

CLAUDIA B. HORN, M.S.
SENIOR DIRECTOR

TARA K. MYERS
DIVISION DIRECTOR

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: April 18, 2017
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2017-02

Effective: May 1, 2017

<u>Section/Subsection/Appendix Item or Policy Directive</u>	<u>Comments on Revisions</u>
<u>Section 3-5-3: Psychological/Psychiatric Conditions</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Many LME/MCO's specifically require adaptive testing for individuals to qualify for long term supports. These rate increases include a specific separate rate for adaptive behavior testing. When required, sponsorship of additional testing to access long term supports through LME/MCO's is permitted.
<u>Section 6-5-1: Retrieval of Status 26 Closures</u> <u>Table of Contents Change: Yes</u> <u>Index Change: Yes</u>	Procedures for retraction of status 26 closures and other unsuccessful outcomes. These procedures will assist with new reporting requirements required by WIOA in effect July 1.

<u>Section/Subsection/Appendix Item or Policy Directive</u>	<u>Comments on Revisions</u>
<u>Section 6-5-2: Retrieval of All Other Closures</u> <u>Table of Contents Change: Yes</u> <u>Index Change: Yes</u>	Procedures for retraction of all other closures and other unsuccessful outcomes. These procedures will assist with new reporting requirements required by WIOA in effect July 1.
<u>Appendix Entry: DSM-5</u>	Updates adaptive behavior functioning definition.
<u>Appendix Entry: Intellectual Disability</u>	Updates language to comply with DSM-5 criteria.



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF VOCATIONAL REHABILITATION SERVICES

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

CLAUDIA B. HORN, M.S.
SENIOR DIRECTOR

TARA K. MYERS
DIVISION DIRECTOR

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: June 16, 2017
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2017-03

Effective: July 1, 2017

<u>Section/Subsection/Appendix Item or Policy Directive</u>	<u>Comments on Revisions</u>
<u>Section 1-15: Imprest Cash Fund</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Updates procedures for the use of the imprest cash fund.
<u>Chapter 2: Nature and Scope of Services</u> <u>Table of Contents Change: Yes</u> <u>Index Change: Yes</u>	Clarifies purchasing procedures and when a service is subject to financial need and/or comparable benefits. Updates policy regarding the purchase of Computers and Assistive Technology. Adds Personal Needs section (2-9-1) and removes references to Recreational Therapy services provided directly by Division staff.

<u>Section/Subsection/Appendix Item or Policy Directive</u>	<u>Comments on Revisions</u>
<u>Section 3-6-4: Presumption of Eligibility</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Updates policy to clarify that there is a presumption of eligibility for IL if the individual is determined eligible for MFP.
<u>Appendix Entry: Morbid Obesity</u>	Revised to focus on serious functional capacity limitations associated with Morbid Obesity that could impact independent living.
<u>Interim Policy and Procedure Directive #3-2017: Functional Electrical Stimulation or Foot Drop Stimulator Systems</u>	Prohibits the sponsorship of Functional Electrical Stimulation and Foot Drop Stimulator Systems



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF VOCATIONAL REHABILITATION SERVICES

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

CLAUDIA B. HORN, M.S.
SENIOR DIRECTOR

TARA K. MYERS
DIVISION DIRECTOR

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: October 9, 2017
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2017-04

Effective: IMMEDIATELY

<u>Section/Subsection/Appendix Item or Policy Directive</u>	<u>Comments on Revisions</u>
<p><u>Section 1-11: Case Service Authorizations</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	<p>Revised to explain that claims received after 365 days of the last date of service must be approved by the Unit Manager. Claims received after two years from the last date of service must be approved by Fiscal Services.</p>
<p><u>Section 1-19: Supervisor Approval</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	<p>Revised to coincide with policy change in Section 1-11 regarding case service invoices for authorizations exceeding 365 days.</p>



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF VOCATIONAL REHABILITATION SERVICES

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

CLAUDIA B. HORN, M.S.
SENIOR DIRECTOR

TARA K. MYERS
DIVISION DIRECTOR

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: **October 16, 2017**
Re: **Revisions to Volume VIII**

Vicky Miller

TRANSMITTAL: #2017-05

Effective: November 1, 2017

<u>Section/Subsection/Appendix Item or Policy Directive</u>	<u>Comments on Revisions</u>
<u>Appendix Entry: AgrAbility</u>	Adds additional information to the Appendix entry to help provide guidance in these cases including potential questions for consideration during the initial interview phase. A checklist has also been created to identify information required for Policy Office review when indicated. The checklist will be posted on the Intranet forms page.



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF VOCATIONAL REHABILITATION SERVICES

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

CLAUDIA B. HORN, M.S.
SENIOR DIRECTOR

TARA K. MYERS
DIVISION DIRECTOR

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: November 13, 2017
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2017-06

Effective: Immediately

<u>Section/Subsection/Appendix Item or Policy Directive</u>	<u>Comments on Revisions</u>
<p><u>Sub-Section 3-8-1: Financial Needs Survey</u></p> <p><u>Table of Contents Change: No</u></p> <p><u>Index Change: No</u></p>	<p>This revision allows for bank statements to be within six (6) months of the completion of the Financial Needs Survey (FNS). The statements must be consecutive.</p>



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF VOCATIONAL REHABILITATION SERVICES

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

TARA K. MYERS, MS, CRC, CPM
INTERIM SENIOR DIRECTOR/DIVISION DIRECTOR

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: **January 19, 2018**
Re: **Revisions to Volume VIII**

Vicky Miller

TRANSMITTAL: #2018-01

Effective: February 1, 2018

<u>Section/Subsection/Appendix Item or Policy Directive</u>	<u>Comments on Revisions</u>
<u>Sub-Section 2-2-4: Timeliness of Services</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Clarifies that substantial services should be documented within 90 days of initiation. If service implementation is delayed, an explanation for the delay must be documented on a Progress Review.



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF VOCATIONAL REHABILITATION SERVICES

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

TARA K. MYERS, MS, CRC, CPM
INTERIM SENIOR DIRECTOR/DIVISION DIRECTOR

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: February 15, 2018
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2018-02

Effective: March 1, 2018

<u>Section/Subsection/Appendix Item or Policy Directive</u>	<u>Comments on Revisions</u>
<u>Interim Policy and Procedure Directive #02-2018: FNS Allowable Net Monthly Income Table</u>	<i>(Replaces Policy Directive #2-2017)</i> Updates the allowed net monthly income levels based on 2018 Federal Poverty guidelines.



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

Division of Vocational
Rehabilitation Services

ROY COOPER • Governor

MANDY COHEN, MD, MPH • Secretary

TARA MYERS, MS, CRC, CPM • Senior Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: May 15, 2018
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2018-03

Effective: June 1, 2018

<u>Section/Subsection/Appendix Item or Policy Directive</u>	<u>Comments on Revisions</u>
<u>2-10: Modifications</u> <u>Table of Contents Change: No</u> <u>Index Change: Yes</u>	Updates procedures for the bidding and award process, eliminates the owned mobile home on rented property residence type, adds new forms required for documentation
<u>2-11-2: Independent Living Program</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Clarifies procedures when a client fails to pay his/her required contribution to PAS
<u>Appendix: Residence Modification General Guidelines</u>	Updates guidelines with clarifications and new additions.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
TARA MYERS, MS, CRC, CPM • Senior Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: July 13, 2018
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2018-04

Effective: August 1, 2018

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Appendix: Hearing Disabilities</u>	Creates a structured form for providing a hearing consultation and requires approval from a supervisor if the DHH counselor providing the consultation is not an independent/proficient counselor.
<u>Interim Policy and Procedure Directive #2-2018: Documents to be Signed and Retained in the Case Record</u>	Provides updates regarding BEAM forms that need to be maintained in the hard copy case record.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: December 14, 2018
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2018-05

Effective: January 1, 2019

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Section 1-11: Case Service Authorizations</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Defines authorization procedures for when a client has excess income and must pay a vendor for services.
<u>Section 3-8: Financial Need and Client Resources</u> <u>Table of Contents Change: No</u> <u>Index Change: No</u>	Defines general procedures for when a client has excess income and must pay a vendor for services.
<u>Appendix: North Carolina Achieving a Better Life Experience (NC ABLE) Program</u>	Provides general guidance on ABLE accounts and specifies that these accounts are not to be considered during the assessment of financial need.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: February 22, 2019
Re: Revisions to Volume VIII

Vicky Miller (handwritten signature)

TRANSMITTAL: #2019-01

Effective: March 1, 2019

Table with 2 columns: Section/Subsection/Appendix/Policy Directive and Comments on Revisions. Row 1: Interim Policy and Procedure Directive #1-2019 – FNS Allowable Net Monthly Income Table; (Replaces Policy Directive #2-2018) Updates the allowed net monthly income levels based on 2019 Federal Poverty guidelines.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603
MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801
www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LPC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: May 16, 2019
Re: Revisions to Volume VIII

Vicky Miller (handwritten signature)

TRANSMITTAL: #2019-02

Effective: June 1, 2019

Table with 2 columns: Section/Subsection/Appendix/Policy Directive and Comments on Revisions. Row 1: Section 1-3-2: Requests for Client Information (Disability Determination Section). Table of Contents Change: No. Index Change: No. Comment: This directive outlines procedures to follow for requesting records from DDS. It also clarifies that a signed consent form is required to release or obtain records from DDS.



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LPC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: July 1, 2019
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2019-03

Effective: July 15, 2019

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<p><u>Section: 2-12-3: Orthotics</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	Removes the requirement to verify L codes
<p><u>Section: 2-12-4: Prosthetics</u></p> <p><u>Table of Contents Change: No</u> <u>Index Change: No</u></p>	Removes the requirement to verify L codes
<p><u>Interim Policy and Procedure Directive</u> <u>#2-2019: Direct Express</u></p>	Due to difficulty obtaining three months of statements from Direct Express and Netspend specific requirements have been changed for clients receiving SSI and SSDI and applicable family members .

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603
MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801
www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LPC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: August 1, 2019
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2019-04

Effective: August 15, 2019

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Interim Policy and Procedure Directive #3-2019: Voter Registration</u>	Instructions for complying with the National Voter Registration Act have been updated to include providing Voter Registration information, documentation requirements and procedures for submitting Voter Registration forms to the Board of Elections.
<u>Interim Policy and Procedure Directive #4-2019: Revised Paper Application</u>	The IL Application for Services has been revised to incorporate the Voter Registration Preference Form. A hard copy must be completed.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: February 21, 2020
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2020-01

Effective: March 1, 2020

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Interim Policy and Procedure Directive #01-2020: FNS Allowable Net Monthly Income Table</u>	<i>(Replaces Policy Directive #1-2019)</i> Updates the allowed net monthly income levels based on 2020 Federal Poverty guidelines.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: April 1, 2020
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2020-02

Effective: Immediately

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Interim Policy and Procedure Directive #02-2020: Verbal/Email Agreement for Client Signatures</u>	Provides guidance for obtaining a verbal or email agreement from a client in lieu of a physical signature.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: April 13, 2020
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2020-03

Effective: Immediately

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Interim Policy and Procedure Directive #03-2020: Revised Residence Modification Process in Response to COVID-19</u>	Clarifies process for handling interior modifications during social distancing restrictions imposed by COVID-19.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: May 1, 2020
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2020-04

Effective: May 15, 2020

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Subsection 2-5-4: Procedures to Purchase DME</u>	Clarifies terms and procedures when purchasing on or off the DME Convenience Contract.
<u>Appendix: Assertive Community Treatment</u>	New Policy guidance and information on serving individuals who receive services from Assertive Community Treatment.
<u>Appendix: DME Purchase Quick Reference</u>	Reference supplement to the DME policy

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: June 1, 2020
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2020-05

Effective: Immediately

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>SubSection 1-12-2: Invoice Processing: Transportation Invoices</u>	Clarifies information to include on invoices for transportation
<u>SubSection 1-16-1: [Vendor Review and Certification] General Provisions</u>	Provides general surface level updates to required forms
<u>Interim Policy and Procedure Directive #04-2020: Background Checks</u>	Notes requirements to obtain written consent and provide information regarding Fair Credit Reporting Act before sponsorship of a background check

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: June 3, 2020
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2020-06

Effective: June 15, 2020

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Interim Policy and Procedure Directive #05-2020: Using Approved Videoconferencing Technologies to Provide Services Remotely</u>	This new policy details procedures and requirements for both staff and approved vendors to provide approved services remotely to clients.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: July 6, 2020
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2020-07

Effective: July 15, 2020

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Interim Policy and Procedure Directive #06-2020: In-Home and In-Person Services Provision During COVID-19 Pandemic</u>	This directive provides necessary requirements and procedures for providing services in home and in person. In person contact should be minimized whenever possible. When in home or in person services are required, the client's consent must be obtained and the supervisor must approve the service as critical. In addition, self-health assessments are required. These procedures apply to staff and services providers.
<u>Interim Policy and Procedure Directive #07-2020: Purchasing Face Coverings for Clients</u>	This directive provides instructions for the purchase, distribution and tracking of <u>disposable</u> face coverings to clients. Face coverings should only be provided when clients require them for IL service delivery and have no other means to secure suitable face coverings.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: July 1, 2020
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2020-08

Effective: August 1, 2020

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Chapter Four: IL Comprehensive Assessment</u>	Clarifies components of the comprehensive assessment including analysis of rehabilitation needs and required documentation on the WRAP.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: December 18, 2020
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2020-09

Effective: December 18, 2020

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Interim Policy and Procedure Directive #08-2020: In-Home and In-Person Services Provision During COVID-19 Pandemic</u>	<p>This directive requires that all services provided in-consumers' homes or in-person services provided by VR/IL staff in the community and in-agency office services must be assessed and approved as an emergency service by the RD/NCATP Director. Additional details include a definition of emergency services and specific requirements for select services; potential exceptions are also addressed.</p>

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: December 22, 2020
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2021-01

Effective: January 1, 2021

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Section 1-2: Records Management</u>	Clarification is provided regarding case transfers and ensuring that cases always have a caseload assignment. Updated procedures for the hands-on annual verification of cases as well as the Agency's obligation to conduct and annual review on cases closed due to the significance of disability are also included.
<u>Section 1-12: Invoice Processing</u>	Clarifies documentation requirements for Case Service Invoices.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603
MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801
www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: February 23, 2021
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2021-02

Effective: March 1, 2021

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Interim Policy and Procedure Directive #01-2021: FNS Allowable Net Monthly Income Table</u>	<i>(Replaces Policy Directive #01-2020)</i> Updates the allowed net monthly income levels based on 2021 Federal Poverty guidelines.
<u>Interim Policy and Procedure Directive #02-2021: In-Home and In-Person Services Provision During COVID-19 Pandemic</u>	<i>(Replaces Policy Directive #08-2020).</i> This policy directive changes the level of need from emergency to critical status for the provision of in-person and in-office services. Approval from the RD or AT Director is required.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: February 26, 2021
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2021-03

Effective: March 15, 2021

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Section 1-3-4: Release of Confidential Information without the Consent of the Client</u>	Defines specific guidance and action steps for staff to take when faced with a client who is threatening suicide.
<u>Appendix: Attention-Deficit/Hyperactivity Disorder (ADD/ADHD)</u>	This policy revision adds Family Medical Practitioner as an appropriate specialist for establishing ADHD as an impairment and reinforces that OHI data cannot be used to establish an impairment. Clarification and examples of potential impediments and other VR services to consider are also included.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: June 7, 2021
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2021-04

Effective Immediately

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Interim Policy and Procedure Directive #03-2021: In-Person Service Delivery</u>	This directive provides requirements and procedures for providing in-person services based on Governor Cooper's Executive Order # 215.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: July 1, 2021
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2021-05

Effective: July 15, 2021

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>Subsection: 2-10-2: Vehicle Modifications</u>	The maximum rate for IL sponsorship of vehicle modifications increases from \$7,000 to \$12,000.
<u>Vehicle Mod Guidelines for Consumers</u>	<ul style="list-style-type: none">• This form has not changed since the early 2000's, and it required numerous edits to address policy changes over the years.• Revised a lot of the content regarding terms and the scope of services related to vehicle modifications. This should make it easier to communicate with clients about what vehicle modifications are and how NCDVRS can assist.• Clarified the client responsibilities and expectations regarding related maintenance and services timelines.• Included informational links to outside funding sources and wheelchair transportation safety.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>DVR-7000: Individualized Pre-Modification Vehicle Requirements Form</u>	<ul style="list-style-type: none"> • This form has not been changed since 2012. • Revised the form in general to make it easier to communicate the information to clients and their families regarding basic vehicle requirements and limits. • Significant revisions to the Year & Odometer mileage limits and the project cost ranges. These new ranges reflect NCDVRS best practices when supporting modifications for vehicles that are lasting longer and have higher mileages.
<u>DVR-7001: Vehicle Inspection Form</u>	<ul style="list-style-type: none"> • This form has not been changed since 2005. • The format was revised to better reflect the most critical vehicle components and how they should be evaluated by the mechanic. • Clarified the section for the Rehab. Engineer to determine whether this form is required or can be waived. • Revised the form in general to make it easier to complete by third parties (mechanics) – clear instructions on including/attaching any diagnostic results and/or repair estimates.
<u>Interim Policy and Procedure Directive #04-2021: IL – SSI Waiver of Needs Test Requirement</u>	Obtaining bank statements and other financial documents is not required when the client is a family of one and receives SSI only. Supervisor approval is required. Additional procedures are noted in the policy directive.



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy *Vicky Miller*
Date: August 6, 2021
Re: Guidance on Face Coverings for Service Delivery

TRANSMITTAL: #2021-06

Effective: August 6, 2021

<u>Transmittal</u>	<u>Comments on Revisions</u>
<u>Guidance on Face Coverings for Service Delivery</u>	IL Policy Directive #03-2021 is obsolete. Staff should follow instructions in the attached Interim Policy on Face Covering Requirements.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

Interim Policy on Face Covering Requirements

Contents

§ 1. Introduction.....	2
§ 2. Scope of This Policy	2
Agencies Covered by This Policy	2
Areas Covered by This Policy	2
§ 3. Policy	2
Options for Participating Agencies Concerning Face Coverings.....	2
How Agencies Can Elect One of These Options	3
§ 4. Requirement to Wear Face Coverings	3
Covered Workers	3
Guests	3
Exceptions	3
§ 5. Interim Process for How, Under Option 1, Workers Can Show They Are Fully Vaccinated	3
Information Provided by Workers to Qualify for Exception.....	3
What Staff Should Do with Vaccination Information Provided by a Worker.....	5
Duty to Provide Truthful Information.....	5
§ 6. Discipline for Violations of this Policy	6
§ 7. Accommodation Requests	6
§ 8. Definitions.....	6
§ 9. Effective Date and Duration	8
§ 10. Miscellaneous Terms.....	8
No Private Right of Action	8
Savings Clause	9
§ 11. Authorities	9
Source of Authority	9
§ 12. History of this Policy	9

§ 1. Introduction

This Interim Policy is issued under Section 4.2 of Executive Order 224, issued on July 29, 2021. This policy implements only Section 4.2 of the order, which is effective August 2, 2021. A later policy, to be issued by the Office of State Human Resources (“OSHR”) by August 13, 2021, will implement both Sections 4.1 and 4.2 of the executive order. That later policy will replace this Interim Policy effective September 1, 2021.

§ 2. Scope of This Policy

Agencies Covered by This Policy

Section 4 of Executive Order 224 applies by default only to agencies that are either part of the Governor’s Office or are headed by a member of the Governor’s Cabinet. Other state and local government agencies are strongly encouraged by the Governor to voluntarily adopt the policy. Agencies may adopt this policy by sending a letter or email to Glenda Farrell (glenda.farrell@nc.gov) or Ronnie Condrey (ronnie.condrey@nc.gov) at OSHR.

Areas Covered by This Policy

This Interim Policy applies to any indoor space, within a state government office, building, or facility, that is controlled by a Participating Agency. It does not apply to teleworking Workers’ homes.

§ 3. Policy

Options for Participating Agencies Concerning Face Coverings

Participating Agencies have the flexibility to adopt either:

1. A policy requiring all Workers to wear Face Coverings indoors if they are not Fully Vaccinated;¹ or
2. A policy requiring Face Coverings indoors for all Workers — vaccinated and unvaccinated.²

¹ Exec. Order 224 § 4.2(a)-(b).

² Exec. Order 224 § 4.2(c).

How Agencies Can Elect One of These Options

By sending an email to all employees, posting a notice in the workplace, or any other reasonably effective means, agencies may instruct whether they are adopting option 1 (under which Fully Vaccinated Workers are not required to wear Face Coverings) or option 2 (under which all Workers are required to wear Face Coverings).

§ 4. Requirement to Wear Face Coverings

Covered Workers

Effective August 2, 2021, all Covered Workers must wear Face Coverings in any indoor space, within a state government office, building, or facility, that is controlled by a Participating Agency.

Guests

Each Participating Agency may set its own policy about whether Face Coverings are required for Guests.³ This policy may be issued by posting a notice at entrances and exits, or by any other reasonably effective means.

Exceptions

The Face Covering requirements in this policy do not apply if the Worker is alone in a room, if a Face Covering Exception applies, or if the Worker is in his or her home.

§ 5. Interim Process for How, Under Option 1, Workers Can Show They Are Fully Vaccinated

Information Provided by Workers to Qualify for Exception

If a Participating Agency elects option 1 (under which Fully Vaccinated Workers are not required to wear Face Coverings), a Worker can show that he or she is Fully Vaccinated and

³ Exec. Order 224 § 4.2(c).

qualify not to wear a Face Covering only by providing information to Human Resources staff under the process listed below. Statements to supervisors or to any other employees do not qualify Workers for the Face Covering exemption; the only method to gain the Face Covering exception is to provide information to Human Resources under the process below.

If a Participating Agency elects option 1 (under which fully vaccinated workers are not required to wear face coverings), a Worker can show that he or she is Fully Vaccinated by providing to Human Resources staff any of the following. A Worker may give this information directly to Human Resources or choose to have a supervisor, manager, or friend provide this.

1. An original or copy of a COVID-19 Vaccination Record Card issued on the form provided by the U.S. Centers for Disease Control and Prevention (“CDC”).
2. A note or receipt signed by a licensed nurse, physician pharmacist, physician’s assistant, or other representative of the place where the vaccine was administered. This note or receipt must show at least:
 - a. Your name
 - b. The name of the healthcare provider administering the vaccine
 - c. Date(s) of vaccination
 - d. Place of vaccination
 - e. Vaccine product name (i.e., Moderna, Pfizer, or Johnson & Johnson)
3. A printout made by the Worker of the Worker’s record from North Carolina’s COVID-19 Vaccine Management System (“CVMS”). (Note that some people may not have their information available in CVMS.) For information about accessing CVMS and to register, Workers may visit https://covid-vaccine-portal.ncdhhs.gov/s/?language=en_US.⁴

NOTE: Under the policy effective September 1, this interim verification process will be updated. This verification process only covers requests for Face Covering exemptions during the period from August 2 to August 31. Re-verification may be required for exemptions under the revised process that becomes effective September 1.

⁴ Other vaccine management systems (for example, the systems used in other states or the systems used by pharmacies or other health care providers) may also contain vaccination information. This Interim Policy may be updated in the future to identify additional systems that can have printouts used to show that an employee is Fully Vaccinated.

What Staff Should Do with Vaccination Information Provided by a Worker

If staff at a Participating Agency receive any of the vaccination information listed above from a Worker as part of verification under this Interim Policy, they must do the following.

1. Authorized Human Resources staff must review the material provided by the Worker in good faith to determine whether it appears to be valid.
 - a. Under this Interim Policy, no additional research is required by the Human Resources staff member to determine whether the information provided by the Worker is truthful and accurate.
 - b. However, the Human Resources staff member is authorized to require additional verification if the information provided by the Worker, upon review, shows signs of being inauthentic or fraudulent.
2. Each staff member who receives this information must keep any records resulting from this review only in an agency confidential health information file. This file (including any database containing this information) must be separate from any employees' general personnel files and must be available only to Human Resources staff within the agency.
3. So that managers and supervisors may implement the policy that Fully Vaccinated Workers are not required to wear Face Coverings:
 - a. Human Resources staff members may communicate whether Workers are exempt from the Face Covering policy because they have shown that they are Fully Vaccinated.
 - b. Human Resources staff members should tell managers and supervisors which of their employees (if any) are exempt from the Face Covering policy.
 - c. If asked, managers and supervisors may tell other workers that a particular worker is exempt from the Face Covering policy.

Duty to Provide Truthful Information

Workers violate this Policy if they knowingly provide a false or inauthentic document in an attempt to show that they are Fully Vaccinated and gain an exemption from wearing Face Coverings under this Policy.

§ 6. Discipline for Violations of this Policy

Employees may be subject to disciplinary action for violations of this Interim Policy, up to and including dismissal. Each Participating Agency may determine the appropriate level of discipline for violations. This determination may be made by issuing guidelines or policy. Different Participating Agencies need not adopt the same kind of discipline for violations of this Interim Policy, but each Participating Agency must be consistent with respect to the kind of discipline issued by that particular Participating Agency.

§ 7. Accommodation Requests

Workers may seek reasonable accommodations from Face Covering requirements on the basis of disabilities that impair or prevent wearing Face Coverings or for any other lawful reason. These workers may request an exception by contacting their agency's Human Resources office. These requests shall be considered under the agency's standard reasonable accommodation process.

§ 8. Definitions

Covered Worker – If an agency chooses to adopt option 1 (under which Fully Vaccinated Workers are not required to wear Face Coverings), “Covered Worker” means any Worker who is not Fully Vaccinated. If an agency chooses to adopt option 2 (under which all Workers are required to wear Face Coverings), “Covered Worker” means all Workers.

Face Covering – A covering of the nose and mouth that is secured to the head with ties, straps, or loops over the ears and fits snugly against the side of a person's face. Based on recommendations from the CDC, face shields do not meet the requirements for Face Coverings.

Face Covering Exception means any of the following exceptions from a requirement to wear a Face Covering.

1. Children under five (5) years of age need not wear a Face Covering, and children under two (2) years of age should not wear a Face Covering.

2. Face Coverings need not be worn by a child whose parent, guardian, or responsible person has been unable to place the Face Covering safely on the child's face.

Further, a Face Covering does not need to be worn by a Worker or Guest who:

3. Should not wear a Face Covering due to any medical or behavioral condition or disability (including, but not limited to, any person who has trouble breathing, or is unconscious or incapacitated, or is otherwise unable to put on or remove the Face Covering without assistance);
4. Is actively eating or drinking;
5. Is seeking to communicate with someone who is hearing-impaired in a way that requires the mouth to be visible;
6. Is giving a speech for a broadcast or to an audience;
7. Is working at home or is in a personal vehicle;
8. Is temporarily removing his or her Face Covering to secure government or medical services or for identification purposes;
9. Would be at risk from wearing a Face Covering at work, as determined by local, state, or federal regulations or workplace safety guidelines; or
10. Has found that his or her Face Covering is impeding visibility to operate equipment or a vehicle.

In addition, people need not wear a Face Covering while exercising if:

11. They have symptoms while strenuously exercising, such as trouble breathing, dizziness, or lightheadedness;
12. They are wearing equipment like a mouthguard or helmet and are having trouble breathing;
13. They are doing any activity in which the Face Covering could become entangled and a choking hazard or impair vision in high risk activities such as gymnastics, cheerleading, or tumbling; or
14. They are doing activities that may cause the Face Covering to become wet, like swimming or other activities in a pool, lake, water attraction, or similar body of water.⁵

⁵ Exec. Order 224 § 1.2(b); Exec. Order 209 §§ 2.3 and 2.4.

Fully Vaccinated means that it has been two weeks after someone has received the second dose in a two-dose COVID-19 vaccine series (Pfizer or Moderna), or that it has been two weeks after someone has received a single-dose COVID-19 vaccine (Johnson & Johnson).

Guest – Any attendee, customer, guest, member, patron, spectator, or other person lawfully on the property of the agency, other than a Worker.

Participating agency – Any agency that either (1) is part of the Governor’s Office or is headed by a member of the Governor’s Cabinet or (2) elects to adopt this policy.

Worker – An employee (full or part-time, permanent, temporary, probationary, or time-limited) or contractor, regardless of whether the employee or contractor is generally working on-site or generally teleworking.

§ 9. Effective Date and Duration

This Interim Policy is effective at the beginning of the day on August 2, 2021. Pursuant to Section 4.2(b) of Executive Order 224, this Interim Policy will be replaced, effective September 1, 2021, by a policy that implements both Sections 4.1 and 4.2 of the order.

§ 10. Miscellaneous Terms

No Private Right of Action

This Interim Policy is not intended to create, and does not create, any individual right, privilege, or benefit, whether substantive or procedural, enforceable at law or in equity by any party against the State of North Carolina, its agencies, departments, political subdivisions, or other entities, or any officers, employees, or agents thereof, or any emergency management worker (as defined in N.C. Gen. Stat. § 166A-19.60), or any other person.

A violation of this Interim Policy is not grievable.

Savings Clause

If any provision of this Interim Policy or its application to any person or circumstances is held invalid by any court of competent jurisdiction, this invalidity does not affect any other provision or application of this Interim Policy which can be given effect without the invalid provision or application. To achieve this purpose, the provisions of this Interim Policy are declared to be severable.

§ 11. Authorities

Source of Authority

This policy is issued by direction of Section 4 of Executive Order 224 (July 29, 2021). Section 4 of the executive order takes the form of (1) prohibitions and restrictions issued under the Emergency Management Act, as well as (2) a direction to the Office of State Human Resources to issue a policy. Therefore, this policy is issued under the Emergency Management Act (Chapter 166A of the North Carolina General Statutes), the statute empowering the Director of the Office of State Human Resources to issue rules In accordance with the statutory authorities referenced in Executive Order 224, this policy is issued under N.C.G.S. § 143B-10(j)(3), and this policy is also issued under the Communicable Disease Emergency Policy issued by the State Human Resources Commission pursuant to N.C.G.S. § 126-4.

§ 12. History of this Policy

Date	Version
July 30, 2021	First version



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
CHRIS EGAN, MSW, LCSW • Senior Director
KATHIE B. TROTTER, MS, CRC, LCMHC, CPM • Director

MEMORANDUM

To: All Staff Assigned Volume VIII
From: Vicky Miller – Chief of Policy
Date: September 17, 2021
Re: Revisions to Volume VIII

Vicky Miller

TRANSMITTAL: #2021-07

Effective: October 1, 2021

<u>Section/Subsection/Appendix/Policy Directive</u>	<u>Comments on Revisions</u>
<u>2-10-1: Residence Modifications</u>	The maximum rates for residence modifications based on property type have been increased. Bidding procedures when the estimate exceeds the maximum rate per property type are clarified.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF VOCATIONAL REHABILITATION SERVICES

LOCATION: 805 Ruggles Drive • Haywood Building • Raleigh, NC 27603

MAILING ADDRESS: 2801 Mail Service Center • Raleigh, NC 27699-2801

www.ncdhhs.gov/dvrs • TEL: 919-855-3500 • FAX: 919-733-7968 • TDD 919-855-3579 • TOLL FREE 800-689-9090

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER