POLICY ON PHYSICAL AND MENTAL RESTORATION SERVICES:
Corrective Surgery and Therapeutic Treatment, Dental Services, Vision Services, and Medication

PURPOSE

This policy addresses factors and conditions surrounding the provision of certain physical and mental restoration services, including corrective surgery or therapeutic treatment, dental services, and vision services for individuals eligible for Vocational Rehabilitation Services. It is written in accord with 34 CFR Part 361.

Restoration services are provided to enable an individual to achieve an employment outcome by reducing or eliminating functional limitations resulting from the disability, thus lessening the impediment to employment and providing greater opportunity for vocational success.

Definition of Physical or Mental Restoration Services relative to corrective surgery or therapeutic treatment:

Vocational Rehabilitation does not function as a medical provider or insurance broker. However, there are certain rare situations where it may be appropriate for VR to assist with corrective surgery or therapeutic treatment for eligible individuals. The first requirement in doing so is that the surgery or treatment must be likely, within a reasonable period of time, to either correct or substantially modify a physical or mental impairment that is a substantial impediment to employment and is stable or slowly progressive.

The following criteria must be met prior to the authorization of medical restoration services:

1. The individual has been determined eligible for DVR services.

2. The individual has been available to participate in the completion of a comprehensive assessment of their unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

3. The individual has been determined to have a physical or mental disability that is stable or slowly progressive and that results in a functional limitation leading to an impediment to employment.

4. The physical or mental restoration service should be considered only on the basis of appropriate medical documentation from a qualified medical professional. The
extent of medical documentation needed may vary depending on the individual’s unique condition and treatment needs. Medical documentation may include but may not be limited to:

a. Information regarding the individual’s diagnosis
b. Expected outcome, especially as it relates to the individual’s functional limitations in regard to employment
c. Treatment recommendations or a written prescription

5. The plan for medical restoration services must be included on the IPE and must be authorized prior to the initiation of the medical service.

6. The restoration service(s) must be expected to eliminate, substantially reduce, or curb the impact of the disability within a reasonable period of time as determined by the nature of the individual’s disability, the prognosis regarding life expectancy and employability, and the individual’s general health.

7. In providing physical or mental restoration services, comparable services and benefits must be identified, explored and utilized if they are readily available before DVR will contribute to the cost of the service. The comparable services and benefits should be documented on the IPE. Examples of medical comparable benefits include but are not limited to: medical insurance or medical/medication programs available to the individual that are intended to reduce the cost of the service such as prescription plans, community health clinics, etc. Counselors are encouraged to use the resources document for medical services as well as their own region specific comparable benefits resources.

8. In providing physical or mental restoration services, DVR must comply with the prevailing medical assistance fee schedule, except for certain diagnostic services that Medicaid excludes (75-08-01-29). The authorization for payment should specify that DVR payments for medical services are in accordance with North Dakota Medicaid rates. Extenuating situations where the North Dakota Medicaid rate does not apply will be considered on a case-by-case basis with the involvement of the Regional Administrator.

9. If participating in the purchase of prescription medication, pharmacies should use the “Authorization and Request for Payment - Drug/Pharmacy” form - SFN 302 (10-2012) to submit their claim.

10. In providing physical or mental restoration services, DVR must apply a financial needs test to determine the individual’s financial participation and require the individual’s financial participation in accordance with DVR administrative code (see 75-08-01-26).

11. In providing physical or mental restoration services, DVR must also comply with the Operational Policy regarding Client Purchases (see NDVR OP 12-01). Certain
purchases may require bids depending on the cost and nature of the service being provided. The purchase policy specifies which purchases do not require bids such as medical services, including but not limited to medical treatment, prescriptions, and psychiatric, psychological, functional capacity evaluations, and chemical dependency evaluations, as well as prescription aids and devices (any prosthetic/orthotic device prescribed by a licensed professional to meet the specific needs of the individual). Examples of prosthetic/orthotic devices can include but are not limited to: hearing aids and other types of sound amplification, artificial limbs, corrective lenses, braces, and wheelchairs.

12. DVR cannot pay for recipient liability. This would be considered as income to the individual who would then be at a financial disadvantage.

The duration of each service needed by an individual must be determined on an individual basis. DVR is not a medical-maintenance program and does not provide long term medical rehabilitation services, routine health maintenance needs, routine replacement and repair of medical devices, elective services, elective surgeries, or emergency medical services. In the event that an emergency medical service is associated with or rises out of the provision of physical and mental restoration services, counselors will consult with the Regional Administrator.

Additional information regarding specific medical or mental restoration services:

Dental Services: DVR does not assume responsibility for a program of general dental care. Ordinarily, dental conditions such as cavities, gum abscess, or tooth extractions do not meet the criteria for provision of dental services. However, DVR may provide dental services if the evaluation indicates that the condition is disability related or is so severe that it may cause or aggravate problems of speech, personal appearance, or other specified health problems to the extent that they will interfere with the individual’s ability to achieve a successful employment outcome or interfere with their ability to participate in services on their IPE.

Vision Services: DVR may assist with the cost of eyeglasses, visual services, and the examination necessary for prescription and provision of eyeglasses and vision services in accord with the current North Dakota Medicaid payment guidelines. If the individual chooses an alternative eyewear option that is not covered by North Dakota Medicaid, DVR will only assist with the cost of the item up to the North Dakota Medicaid rate and the individual is responsible for any cost above the North Dakota Medicaid rate. This assumes that the individual’s choice provides a comparable level of restoration in addressing the barrier to employment and that this solution has been agreed to by the counselor, the individual, and the provider in advance of the purchase. This is also a service that can be provided as a diagnostic and evaluative (D &E) service if required for eligibility determination or completion of the comprehensive assessment.

Medication: DVR will only assist with the cost of medication if the medication is expected to correct or modify the physical or mental impediment and allow the individual
to achieve their employment goal. Assistance with medication must be short term and if it is provided on a continual basis throughout the IPE, the individual must show continuous and substantial progress towards the employment goal. As with all other medical restoration services, comparable benefits should first be explored, applied for, and utilized prior to DVR participating in the cost of medication. This is also a service that can be provided as a diagnostic and evaluative (D&E) service if required for completion of the comprehensive assessment. In accord with Medicaid, VR does not pay for brand names unless specifically prescribed by the individual's physician.