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# **Vocational Rehabilitation**



# Vocational Rehabilitation

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# Vocational Rehabilitation

The vocational rehabilitation program is a federal and state program to assist individuals with disabilities to obtain, maintain and improve employment opportunities. Funding for the program is primarily provided by a federal vocational rehabilitation grant (78.7%) with state matching funds (21.3%). The purpose of the program is to provide comprehensive coordinated vocational rehabilitation services for individuals with disabilities to prepare participants for gainful employment consistent with their strengths, resources, priorities, concerns, and abilities.

In Wisconsin, the Department of Workforce Development (DWD) Division of Vocational Rehabilitation (DVR) administers the vocational rehabilitation program. To accomplish the statewide goals of the vocational rehabilitation program, Wisconsin is divided into 11 workforce development areas (WDAs) that serve individuals with disabilities. Appendix I shows a map of Wisconsin's WDA service areas. Each WDA covers one or more counties and is staffed by a DVR director, supervisor(s), counselors, case managers and a business services consultant located at several service sites within the WDA.

For individuals who have a potential need for vocational rehabilitation services, a referral for services may be made. The referred individual will meet with a DVR staff person to discuss roles and responsibilities under the program to assist the individual in making an informed choice when applying for services. If an individual is interested in applying for services, they may then complete an application. If the individual is found eligible for services, a team consisting of counselors and vocational rehabilitation specialists provides guidance and counseling, helps create a plan for employment, and provides services tailored to meet the specific vocational rehabilitation needs of each individual. Services may be provided directly by

DVR staff or by a third-party service provider.

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## Background

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Following World War I, federal legislation was enacted to assist disabled veterans with employment and educational opportunities. In 1920, the federal Smith-Fess Act expanded such opportunities to all disabled citizens. For the first time, the federal government provided funds to the states for vocational services, including vocational guidance, training, occupational adjustment, prosthetics, and job placement services, for all disabled citizens. The states were required to provide a 50% match to the federal funds.

Over the years, additional federal legislation expanded services and the definition of disability, such as the inclusion of mental illness and developmental disability. The Rehabilitation Act of 1973 replaced prior legislation and prioritized service for persons with severe disabilities, established affirmative action programs, and created the individual written rehabilitation program to ensure individual involvement in a rehabilitation plan of action. The Rehabilitation Act of 1973 was amended in 1978, 1986, 1992, 1998, and 2014 to, in part, maximize opportunities for individuals with disabilities, including individuals with significant disabilities, for competitive integrated employment, economic self-sufficiency, independence, and inclusion and integration into society.

According to the 2021 Annual Disability Statistics Compendium, in 2020, 10.8% of individuals (ages 18 through 64) in the United States reported a disability, 37.0% of these individuals were employed, and 27.8% of these individuals lived in poverty. In Wisconsin, 9.5% of these

individuals reported a disability, 43.4% of these individuals were employed, and 24.6% of these individuals lived in poverty.

The federal Workforce Innovation and Opportunity Act (WIOA), enacted July 22, 2014, made several major changes to the Rehabilitation Act of 1973, as amended. WIOA emphasizes transitioning students and youth with disabilities from school to postsecondary education and employment. In addition, WIOA expands the population of students who may qualify for those services. Specifically, WIOA requires state vocational rehabilitation agencies to reserve 15% of federal matching funds to provide pre-employment transition services to assist students with disabilities transitioning from secondary school to postsecondary education programs and employment in competitive integrated settings.

WIOA mandates the alignment of state vocational rehabilitation programs with other components of a state's workforce development system by imposing unified planning requirements, common performance accountability measures, and requiring a one-stop delivery system. As a result of these changes, DVR will more actively participate in state workforce development planning efforts and submit its annual state plan as part of the state's WIOA combined state plan.

In addition, Section 511 of the Rehabilitation Act, as amended by WIOA, requires that individuals who are seeking or continuing subminimum wage employment access vocational rehabilitation services. These vocational rehabilitation services include career counseling and information referral services that must be provided at specific intervals established under the final regulations.

The Rehabilitation Services Administration (RSA), in the Office of Special Education and Rehabilitative Services (OSERS) in the U.S. Department of Education, administers funding under the Rehabilitation Act. OSERS provides funding and guidance based on evidence-based practices in

special education, vocational rehabilitation, and disability research. The RSA oversees formula and discretionary grant funding for vocational rehabilitation.

To be eligible to receive funding from the RSA, each state must file a vocational rehabilitation services state plan as part of the state's WIOA combined state plan to describe how the state will conduct its vocational rehabilitation program in compliance with federal law. The plan also designates the state agency to administer the program. DWD's Division of Vocational Rehabilitation administers the program in Wisconsin and is the state's primary provider of employment services to people with disabilities. Appendix II lists the statutory requirements of the vocational rehabilitation program.

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## **Program Eligibility**

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Under federal law, to be eligible for vocational rehabilitation services, an individual must have a physical or mental impairment that results in a substantial impediment to employment and requires services to prepare for, secure, retain, advance, or regain employment.

A substantial impediment to work may include difficulty with: (a) getting to and from places; (b) communicating; (c) getting ready for work or taking care of oneself; (d) making realistic decisions and following through with plans; (e) getting along with others; (f) working full-time or performing all of the physical duties of a job; and (g) learning new job skills. Appendix III lists examples of disabilities that could result in a substantial impediment to employment and require DVR services.

An individual eligible for Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) benefits is presumed eligible for



DVR services provided that the individual intends to achieve an employment outcome. Completion of the DVR application process is sufficient evidence that the individual intends to achieve an employment outcome.

For individuals not eligible for SSI or SSDI benefits, DVR reviews information regarding the individual's disability, including DVR counselor observations, to determine eligibility. Other information may be obtained from other programs and providers, such as educational institutions, the Social Security Administration (SSA), physicians, hospitals, and other sources. The information used must describe the current functioning of the individual. If the information does not describe the current functioning of the individual or is unavailable, insufficient, or inappropriate, DVR bases its eligibility determination on an assessment of additional data resulting from the provision of vocational rehabilitation services.

**Referral Process.** DVR has staff in 41 locations throughout the state, in addition to the central administrative office in Madison. For individuals with a potential need for and interest in vocational rehabilitation services, a referral for services may be made by phone, mail, online, or electronic format. DVR will respond to referrals within five business days. In order to assist the individual in making an informed choice when applying for services, a referred individual will meet with a DVR staff person to discuss roles and responsibilities under the DVR program. A referred individual will be scheduled for an individual interview or orientation meeting within 30 days of the date of referral, unless the individual requests otherwise. If after this meeting they are interested in applying for DVR services, a DVR application will be completed.

**Application Process.** DVR considers an individual to have applied for services when the individual: (a) has completed a DVR application or otherwise requested services; (b) has provided the information necessary to initiate an assessment to

determine eligibility and priority for services; and (c) is available to complete the assessment process.

Eligibility must be determined within 60 days after the individual submits an application for DVR services. However, the counselor and the individual can agree on a specific extension of time due to exceptional and unforeseen circumstances beyond the control of either DVR or the individual.

A DVR counselor determines eligibility. A written statement of eligibility must be included in the case record. Individuals who are determined not to be eligible for DVR services are informed of the decision, in writing, and provided with the reasons for the determination of ineligibility, notification of their appeal rights, and information about the Client Assistance Program (CAP). The rights of the applicants are discussed in a later section under "Appeal and Other Rights."

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## Order of Selection

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Under federal law, if vocational rehabilitation services cannot be provided to all eligible individuals with disabilities in the state who apply for the services, the state plan must: (a) show the order to be followed in selecting eligible individuals to be provided vocational rehabilitation services; (b) provide the justification for the order of selection; (c) include an assurance that individuals with the most significant disabilities will be selected first for the provision of vocational rehabilitation services; and (d) provide that eligible individuals who do not meet the order of selection (OOS) criteria must have access to other services provided through an information and referral system.

DVR first implemented an OOS in 1994, which consisted of seven categories. In August 2000, DVR updated the OOS categories, reducing

the categories from seven to three. In October 2012, DVR updated the three categories and these are used today. When an individual is found eligible for vocational rehabilitation services, an OOS determination is completed. The individual's priority category is determined jointly by the counselor and individual by evaluating the individual's functional limitations, anticipated required services, and the duration of those services. DVR establishes a wait list of individuals who are eligible, but cannot be served due to lack of resources. When DVR determines it has adequate resources to serve more individuals on the waiting list, activations are made based on the category and date of application; individuals with the most significant disabilities are served first.

To determine the appropriate category placement, each eligible individual is assessed to determine the functional limitations and the number of those limitations resulting from their physical or mental impairment in areas such as mobility, communications, and work tolerance. Table 1 shows the types of abilities that are assessed to determine appropriate DVR placements.

Category 1 is the highest priority category and includes persons with a most significant disability.

An individual has a most significant disability if a serious mental or physical impairment exists that seriously limits four or more functional capacities needed for an employment outcome and whose vocational rehabilitation requires multiple services over an extended period of time.

Category 2 is the second priority category and includes persons with significant disabilities. An individual has a significant disability if a mental or physical impairment exists that seriously limits one to three functional capacities needed for an employment outcome, and whose vocational rehabilitation requires multiple services over an extended period of time. An allowed SSDI or SSI recipient is automatically considered to be, at least, an individual with a significant disability.

Category 3 is the third priority category and is for all other persons eligible for DVR services, including those who do not have a disability that seriously limits functional capacities and do not require multiple services over an extended period of time. This category also includes persons who may have a disability that seriously limits one or more functional capacities, but who do not require multiple services over an extended period of time.

**Table 1: Factors in Determining DVR Placements**

Mobility	The ability to get to work from home and to move around a worksite or participate in work activity.
Communication	The ability to exchange information effectively when participating in work-related activities.
Self-Care	The ability to perform activities of daily living at a level allowing the individual to participate in work-related activities.
Self-Direction	The ability to initiate, organize, and make decisions in one's own best interest at a level allowing the individual to participate in work-related activities.
Interpersonal Skills	The ability to establish and maintain relationships with others at a level allowing the individual to participate in work-related activities.
Work Tolerance	The ability to meet the demands of participating in work-related activities, such as how long and under what circumstances the individual can work.
Work Skills	The ability to meet employment expectations for entry-level workers, or in the case of someone who is already employed, the expectations of employers for someone at that level of employment.

Placement into an OOS category is determined without regard to length of residency, income level, type of disability, age, sex, race, creed, color, national origin, source of referral, expected employment outcome, type of service needs, or costs of services. All individuals receive official notification of their specific determination and their right to appeal their category placement. An individual may also request a review of his or her category within the OOS whenever new evidence is available. Those who are not immediately activated from the wait list to develop an employment plan are offered referral services and the option of remaining on the waiting list until the individual can be activated for employment plan development.

Table 2 shows the OOS waiting list from 2011 through 2022. The significant decline in the wait list from 2013 to 2015 coincided with DVR receiving a full state match, which resulted in additional funding and staffing levels to deliver DVR services. As of September 30, 2022, eligible applicants with the most significant disabilities (Category 1), significant disabilities (Category 2), and non-significant disabilities (Category 3) did not experience a waiting period. Individuals could expect immediate activation upon determining eligibility, with an individualized plan for employment developed within 90 days after the person is activated.

**Table 2: Order of Selection Waiting List as of Sept 30 by Category - FFY 2011 through FFY 2022**

FFY	Category 1	Category 2	Category 3	Total
2011	1	2,838	1,434	4,273
2012	5	3,029	1,530	4,564
2013		3,441	968	4,409
2014		1,136	362	1,498
2015			237	237
2016			156	156
2017			125	125
2018			105	105
2019			96	96
2020			91	91
2021			0	0
2022			0	0

Each individual on the OOS wait list is contacted annually to determine if additional information is available and if he or she wishes to remain on the waiting list. If an individual no longer wishes to remain on the waiting list, his or her case is closed and the individual is notified in writing of the closure and the right to appeal the closure.

DVR is required to consult with the Wisconsin Rehabilitation Council (WRC) regarding the need to have and implement an order of selection. DVR provides quarterly updates to the WRC regarding the order of selection and waiting list status. The Council advises DVR and is described further in a later section.

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### Individualized Plans for Employment

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Once an individual is assigned to an OOS category and invited from a waiting list, an individualized plan for employment (IPE) is developed by the DVR counselor and the individual. The IPE must be developed within 90 days, unless an extension of time is approved by the individual, counselor, and DVR management.

The process to develop an IPE begins with an assessment to determine the needs of the individual. Assessments determine interests and capabilities, vocational rehabilitation needs, and rehabilitation technology needs.

DVR must provide the individual, or the individual's representative, in writing and in an appropriate mode of communication, with information regarding options for developing an IPE. These options must include: (a) the availability of assistance from a counselor, to the extent determined to be appropriate by the individual, to develop all or part of the IPE; (b) the availability of technical assistance in developing all or part of the IPE; (c) a description of the full range of components

included in an IPE; (d) as appropriate, an explanation of the DVR guidelines and criteria associated with financial commitments, additional information an individual requests or DVR determines necessary, and review of the consumer responsibilities agreement; (e) a description of the rights and remedies available to the individual, including recourse to due process and mediation; (f) a description of the Client Assistance Program and information about how to contact CAP; and (g) review and completion of the consumer fiscal responsibilities agreement.

**Mandatory Components of an IPE.** The IPE itself contains a description of the specific competitive integrated employment outcome chosen by the individual that is consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities, career interests, and informed choice. The plan must include a description of the entity chosen by the individual, or the individual's representative, to provide the services and the methods chosen by the individual to procure the services. The IPE also includes a description of the specific services to be provided in an integrated setting, including pre-employment transition services

The IPE also describes criteria to evaluate the progress toward achievement of the employment outcome and the terms and conditions of the IPE. Terms typically include: (a) DVR responsibilities; (b) individual responsibilities in relation to the employment outcome; (c) expectations and outcomes needed to measure satisfactory progress; (d) the individual's participation in paying for the costs of services; (e) the individual's responsibilities in applying for and securing comparable benefits; and (f) the responsibilities of other entities as the result of arrangements made pursuant to comparable services or benefits.

Finally, for an individual with the most significant disabilities with an employment outcome in a supported employment setting, the IPE includes information that identifies the extended services needed by the individual and a source of the extended services needed by the individual. Finally, the IPE must contain a statement of projected need for post-employment services. Post-employment services are additional services or supports that the consumer requires to maintain their job. These services are intended to occur during the follow-along period which is a minimum of 90 days.

**Mandatory Procedures of an IPE.** An IPE must be a written document prepared on DVR forms. The IPE must be developed and implemented in a manner that affords the individual the opportunity to exercise informed choice in selecting an employment outcome. For high school students eligible for an IPE, the IPE must be completed before the student leaves high school. The IPE must be agreed to and signed by the individual, or the individual's representative, and approved and signed by a DVR counselor. A copy of the IPE must be provided to the individual, or the individual's representative, in writing and, if appropriate, in the native language or mode of communication of the individual, or the individual's representative.

The IPE must be reviewed, at a minimum, annually by a DVR counselor and the individual, or the individual's representative. The IPE is amended as necessary by the individual, or individual's representative, in collaboration with DVR staff. An amendment is necessary if there are substantive changes in the employment outcome, services to be provided, or the providers of the services. Amendments do not take effect until agreed to and signed by the individual, or individual's representative, and the DVR counselor.

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## Program Services

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Services are provided to an individual based on the IPE. Services must be necessary and appropriate to assist an individual in preparing for, securing, retaining, or regaining an employment outcome that is consistent with the strengths, resources, priorities, abilities, and informed choice of the individual. In addition to the assessments discussed above, other types of services are described below.

**Career Guidance and Counseling.** A DVR counselor provides information and shares knowledge about the impact disabilities have on employment. The counselor discusses the individual's abilities, needs, and interests to establish an IPE. Guidance and counseling also include support services to assist an individual in exercising informed choice.

**Information and Referral Services.** Individuals may be referred to other federal or state programs for services best suited to address their specific employment needs. For each of these programs, the individual is provided with the notice of the referral by DVR to the agency carrying out the program. The individual also receives information identifying a specific point of contact within the agency carrying out the program and information and advice regarding the most suitable services to assist the individual to prepare for, secure, retain, or regain employment.

**Job Search and Placement Assistance.** The goal of DVR is for an individual to find and keep a job. These services include job-seeking skills, job search and placement assistance, job-retention services, follow-up services, and follow-along services. The individual learns to create a resumé and cover letter, find job openings, research employers, and interview.

**Vocational and Training Services.** These

services include the provision of personal and vocational adjustment services, books, tools, and other training materials. For employment training goals that require attending a college, university, technical college, or vocational training program, the individual may apply for a DVR training grant.

The training grant amount is for up to \$5,000 per academic year for a full-time student or \$208 per credit for a part-time student. The actual amount of a training grant awarded depends on how much financial aid is received and the unmet need based on other sources of financial aid, which the student must apply for and accept, if eligible, to be considered for a training grant. The grant is paid directly to the school, divided in payments by academic year, semester, or quarters. DVR must receive a grade report or transcript at the end of each semester or quarter to verify adequate completion before the next installment of the grant can be issued. The grant may be used to fund tuition and fees, books and supplies, transportation, room and board, dependent care, student loan fees, and other personal expenses.

**Diagnosis and Treatment.** If financial support for diagnosis and treatment of physical and mental impairments is not readily available from another source, such as health insurance, diagnosis and treatment may be covered DVR services. A decision to provide funding is based upon a determination that the service is likely to correct or modify substantially a stable or slowly progressive physical or mental impairment that constitutes a substantial impediment to employment, and that comparable benefits have been well researched.

Covered services may include: (a) corrective surgery or therapeutic treatment (including hospitalization) necessary to correct or substantially modify a physical or mental condition that constitutes a substantial impediment to employment, but is of such a nature that such correction or modification may reasonably be expected to eliminate or reduce such impediment to employment within a

reasonable length of time; (b) prosthetic and orthotic devices; (c) eyeglasses and visual services prescribed by qualified personnel who are selected by the individual; (d) special services (including transplantation and dialysis), artificial kidneys, and supplies necessary for the treatment of individuals with end-stage renal disease; (e) diagnosis and treatment of mental and emotional disorders by licensed personnel; and (f) necessary hospitalization in connection with surgery or treatment.

**Maintenance for Additional Costs.** Additional costs, such as expenses for food, shelter, and clothing, incurred while participating in a DVR assessment or while receiving services under an IPE may be covered. Maintenance is provided when relocation is necessitated by the IPE, is feasible, and results in increased costs to the individual. If commuting and relocation are both feasible, then the individual may choose between the two. However, DVR costs will be limited to the less costly of the two alternatives.

**Transportation.** Travel and related expenses necessary to enable an individual to participate in a vocational rehabilitation service and needed by an individual to achieve an employment outcome can be provided by DVR. Transportation services also include adequate training in the use of public transportation vehicles and systems.

**Personal Assistance.** Personal assistance services are designed to assist an individual with a disability to perform daily living activities on or off the job that the individual would typically perform without assistance if the individual did not have a disability. These services are designed to increase the individual's control in life and ability to perform everyday activities on or off the job, and are necessary to the achievement of an employment outcome.

**Interpreter Services.** Interpreter services, including sign language and oral interpreter services, may be provided by qualified personnel for individuals who are deaf, hard of hearing, or

deaf-blind.

**Services for Blind Individuals.** Rehabilitation teaching services and orientation and mobility services may be provided to individuals who are blind. Services also include reader services for individuals who are determined to be blind after an examination by licensed personnel.

**Occupational Licenses, Tools, Equipment, and Supplies.** To achieve an employment goal or to start a business consistent with the goals of an established IPE, services may be provided to obtain an occupational license, tools, equipment, and initial stocks and supplies necessary to achieve the goal.

**Assistance in Small-Business Plan Development** For individuals who complete a thorough and well-researched business plan on self-employment or the operation of a small business, services may be provided to achieve self-employment or small-business goals. DVR must assess the individual's readiness and appropriateness for self-employment including knowledge, ability, skills, experience, motivation, and personal commitment to establish, operate, and maintain a business that generates a competitive, self-sustaining wage. DVR also assesses the feasibility of the proposed business idea. The plan must address all aspects of start-up costs, such as identifying funding sources, demonstrating sufficient resources to leverage start-up capital, determining ongoing operation costs, and predicting the likelihood of profitability within a reasonable timeframe.

**Rehabilitation Technology.** Individuals may receive technological aids and devices that can make it easier to do a job or to continue with the training needed. Rehabilitation technology includes telecommunications, sensory, vehicular modifications, and other technological aids and devices. Replacement of equipment must be disability-related and linked directly to an IPE.

**Transition-to-Work Services.** These services

are provided to ensure a smooth transition for students with disabilities from high school to postsecondary education or employment in order to facilitate the achievement of the employment outcome identified in the IPE. Eligible students with disabilities are contacted in high school to formulate an IPE so that a plan is in place for either employment or additional education when the student graduates from high school. Transition services are discussed in more detail in a later section entitled, "Specialized Programs."

**Supported Employment Services.** Supported employment services, including ongoing support and other services needed to support and maintain individuals with a most significant disability in supported employment, and made available to assist the person in achieving competitive employment.

Supported employment services are provided based on a determination of the needs of the individual and specified in an IPE. Supported employment services are provided for up to a maximum of 24 months unless, under special circumstances, the individual and the counselor agree to extend the time to achieve the rehabilitation objectives identified in the IPE. Services after the initial intensive services are called extended services. Supported employment is discussed in additional detail in the "Specialized Programs" section.

**Family Services.** Services may be provided to the family of an individual if the services are necessary to assist the individual to achieve an employment outcome. For example, transportation or child care may be provided to family members if needed for the family members to participate in the individual's evaluation or IPE.

**Post-Employment Services.** Post-Employment services are services that are necessary to assist an individual to: (a) retain employment when the limitations resulting from the disability cause the individual to be at risk of losing the job; (b) regain employment when the individual is unable,

due to the disability, to seek employment without assistance; or (c) advance in employment, when the job is no longer consistent with the individual's strengths, priorities, abilities, interests, and informed choice. These services are available to meet rehabilitation needs that do not require complex and comprehensive services.

**Internship / Temporary Work.** Internship / Temporary Work (I/TW) services can be provided when it is necessary and appropriate for the achievement of the employment goal. The I/TW site must be in an integrated setting consistent with the individual's interests and employment goal. Wages paid to the individual must be commensurate wages paid to others performing the same or similar work. I/TW services should not be provided for the purpose of maintenance (i.e., to meet the individual's financial needs). Based on identified individual needs, appropriate purposes of I/TW may include: (a) the opportunity to evaluate the individual's interests, job suitability, job accommodation needs, productivity; (b) career exploration; (c) work hardening (i.e. improving physical, mental, or emotional capacity to work); (d) learn about basic work behavior and workplace requirements regardless of the specific job goal; (e) skill enhancement; (f) and reference development. Use of I/TW may be provided prior to creation of an IPE and can range from two weeks to no more than 90 calendar days.

**Other Goods and Services.** Any other goods and services may be provided if they are determined necessary for the individual to achieve an employment outcome.

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## Program Providers

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**Service Providers and Partners.** DVR purchases services from providers to assist individuals with disabilities to obtain and maintain employment. The individual chooses the service

provider based on information provided by DVR, including: (a) a list of providers; (b) the cost, accessibility, and duration of potential services; (c) consumer satisfaction with those services, to the extent that information is available; (d) qualifications of potential service providers; (e) types of services offered by the potential providers; (f) the degree to which services are provided in integrated settings; and (g) the outcomes achieved by individuals working with the service providers, to the extent that information is available.

All purchased services are authorized prior to the provision of services. Most services are provided on a fee-for-service basis. Once services are completed for the individual, the provider submits an invoice to DVR for the authorized service. Direct payments may be made to individuals for situations such as the provision of bus tokens if direct purchase or reimbursement is not feasible. A receipt or other appropriate documentation that the funds were used as intended is required for direct payments.

Providers of DVR services must be licensed, certified, registered, or otherwise accredited, as applicable, for the occupation, facility, or service provided or, in the absence of these requirements, must possess other equivalent competency assurance. Any facility in which services are provided must meet the accessibility and the civil rights compliance standards required by law, including meeting the special communication needs of individuals. Providers must also take affirmative action to employ and advance individuals with disabilities. Services are to be provided in an integrated setting, must meet the competitive employment standard, and follow procedures and/or technical specifications outlined for those services.

DVR also partners with state agencies, educational institutions, state and national organizations, tribal governments, and community agencies to provide needed services.

**Comparable Benefits or Services.** Prior to

providing any vocational rehabilitation services to an individual, except services exempted, DVR staff must determine if comparable benefits or services exist under any other federal, state, or local public agencies, by health insurance, or by employee benefits and whether those benefits or services are available to the consumer at the time needed. If available, the comparable benefits and services must be used in whole or in part to cover the cost of services, unless the use of these benefits and services would interrupt or delay: (a) the progress of the individual toward achieving the employment outcome identified in the IPE; (b) an immediate job placement; or (c) the provision of such service to any individual at extreme medical risk.

Exemptions from the determination of comparable benefits include assessments for eligibility and IPE needs, counseling and guidance, referral and other services to secure services from other agencies, placement services, and rehabilitation technology. Comparable benefits do not include awards and scholarships based on merit.

**Financial Contribution and Fees.** DVR does not require a financial needs test as a condition for providing services, except that a financial needs test, applied by the Free Application for Federal Student Aid (FAFSA) is required for postsecondary education services. Individuals are advised that they may voluntarily contribute to the cost of the services listed in the IPE, but are not required to do so.

Federal guidelines permit DVR to establish limits on fees that DVR counselors may pay providers for services in order to ensure a reasonable cost to the program for each service. DVR has established maximum fees that counselors may pay to providers for specific goods and services. If the individual chooses a product or vendor that exceeds the established fee schedule and does not obtain an exception, the individual is responsible for the excess amount. DVR also requires prior written authorization before specific services can be rendered and payment can be made.



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## Case Closure

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Cases may be closed for a variety of reasons at any point during the DVR process. The following paragraphs describe the reasons cases may be closed.

**Too Severely Disabled to Benefit from Services.** A case cannot be closed during the OOS process because the individual is too severely disabled to benefit from services, due to the presumption that all applicants can benefit from vocational rehabilitation services. If, however, at any other time in the case process it is believed that the individual may be too severely disabled to benefit from services, an IPE will be written or amended to assess the individual's ability to participate in and benefit from services. Trial work experiences are required services for these plans. If trial work experiences are not available, alternate evaluation services must be provided in integrated settings and consistent with the individual's informed choice. The decision to close the case due to the severity of the individual's disability can be made only after a variety of work experiences over a sufficient period of time result in clear and convincing evidence that the individual is incapable of benefiting from vocational rehabilitation services to achieve an employment outcome. No one assessment strategy alone can result in clear and convincing evidence.

Individuals whose cases are closed because they are incapable of benefiting from services must be provided an opportunity for a review of that determination a year after case closure and, thereafter, at the request of the individual. The review must assess whether their condition may have changed and if reapplication for services is appropriate.

**Prior to Eligibility.** An individual's case will be closed without an eligibility determination when the individual declines to participate, refuses

services, fails to cooperate, has died, or is institutionalized. The case will also be closed if the individual is unavailable during an extended period to complete an assessment for determining eligibility and DVR has made multiple attempts using multiple methods to contact the individual or, as appropriate, the individual's representative to encourage participation.

**Due to Ineligibility.** The individual or, if appropriate, the individual's representative must be provided an opportunity for a full consultation of an ineligibility decision before the individual's case is closed due to ineligibility. The individual must also be offered referral services.

**After Eligibility Determination.** An eligible individual's case will be closed when it has not been possible to develop an IPE, the individual achieved their employment outcome, services are no longer necessary or appropriate, the individual fails to cooperate, the individual does not achieve satisfactory progress in an IPE, or the individual is no longer eligible. The individual or the individual's representative must be provided an opportunity to discuss the closure decision before the case is closed. Multiple attempts and multiple methods, including the individual's preferred mode of contact, must be used to contact the individual.

**After Achieving an Employment Outcome.** A case may be closed when the rehabilitation services result in an employment outcome.

An individual has achieved an employment outcome only if the following requirements are met and documented: (a) services provided under an IPE have contributed to the achievement of the employment outcome; (b) the individual has achieved the employment outcome described in the IPE; (c) the employment outcome is the most integrated setting possible and is consistent with the individual's strengths, resources, priorities, concerns, abilities and informed choice; (d) the individual is compensated at or above the minimum

wage and receives at least the customary wage and benefit level paid to other individuals performing similar work for the same employer; (e) employment has been maintained for at least 90 days; (f) the individual and counselor consider the employment to be satisfactory and agree the individual is performing well on the job; and (g) the employment is stable and the individual no longer requires vocational rehabilitation services to maintain the employment. Paid work experience cannot be considered a "closure after rehabilitation" until 90 days of employment have been completed after the end of the work experience period.

Work in a nonintegrated or sheltered setting or work for which there is no payment is not considered an employment outcome. Nonintegrated or sheltered employment means the individual is normally paid on a piece rate basis, is not doing the same type of job and is not generally afforded a benefits package offered other employees of the organization, and is supported by other resources, such as county funding. Individuals employed by the program earning wages and benefits normally afforded a person engaged in an employment relationship are considered competitively employed in an integrated setting and, thus, a successful rehabilitation outcome.

At the time of closure, the individual is informed of the availability of postemployment services and will be provided services, if necessary, to maintain, regain, or advance employment consistent with the individual's strengths, resources, priorities, concerns, abilities, capabilities, and interests.

**After Achieving an Employment Outcome in Supported Employment.** An individual's case will be closed when the individual is working in supported employment only when the employment represents competitive employment or employment in integrated work settings in which the individual is working toward competitive employment. The employment must be in an integrated

work setting where most employees do not have disabilities and the individual regularly interacts with these employees while performing job duties, or when the individual regularly interacts with individuals who do not have disabilities, including the general public, while performing job duties as part of a work group of employees with disabilities. There must be confirmation of extended support services after case closure by another party identified in the IPE. Closure occurs no sooner than 90 days after transition to extended support services. Individuals must be compensated in accordance with the federal Fair Labor Standards Act.

**Notification of Closure.** Individuals whose cases are closed for any reason except death or no known address must be notified, in writing, of the case closure, the type of closure, the reasons for the closure, the right to appeal the closure decision, and the process for appealing, including the availability of the Client Assistance Program to assist with an appeal. Individuals must be provided an opportunity for full consultation prior to case closure. Notification to the individual or individual's representative must be supplemented as necessary by other appropriate modes of communication consistent with the informed choice of the individual.

**Review if Working Under a Subminimum Wage Certificate.** If an individual's case is closed because the individual has been working under a subminimum wage certificate, career counseling and referral services must be carried out every six months for the first two years and annually thereafter for as long as the individual is employed at subminimum wage.

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## Appeal and Other Rights

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An individual or, if appropriate, an individual's representative who is dissatisfied with any DVR

decision concerning the furnishing or denial of vocational rehabilitation services may request a timely review within 180 days of the determination. This process may include any or all the following:

**Informal Resolution.** When the individual agrees, DVR must use informal resolution procedures, including mediation. An individual may choose to go directly to a formal hearing without participating in an informal resolution process.

**Mediation.** Mediation is conducted by a qualified and impartial mediator trained in mediation techniques. The process is confidential, voluntary, and must be agreed to by both parties. Mediation is not to be used to deny or delay the right of an individual to a hearing. Discussions that occur during the mediation process will not be used as evidence in any subsequent due process hearing or civil proceeding.

**Impartial Hearing.** The impartial hearing is performed by an impartial hearing officer selected from a pool of qualified individuals defined by DVR and the Wisconsin Rehabilitation Council.

The individual must have an opportunity to be represented by counsel or other appropriate advocates selected by the individual and shall have the opportunity to submit additional evidence, information, and witnesses to the impartial hearing officer. Also, the individual must be given the opportunity to examine all witnesses and other relevant sources of information and evidence. Services that have been initiated shall not be suspended, reduced, or terminated pending the final hearing decision unless the individual so requests or there is evidence that the services have been obtained through misrepresentation, fraud, collusion, or criminal conduct on the part of the individual.

The hearing must be held within 60 days of an individual's initial request for review unless informal resolution is achieved prior to the 60th day or

the parties agree to a specific extension of time. The impartial hearing officer must make a decision based on federal and state regulations and requirements. The impartial hearing officer must provide to the DVR Administrator, and the individual, a full written report of the findings and grounds for the decision within 30 days of the completion of the hearing.

The decision of the hearing officer is final and must be implemented pending a review by the court if either party chooses to file with the court. A request for review must be filed within 30 days of the decision of the hearing officer to the Circuit Court of Appeals.

**Client Assistance Program (CAP).** Pursuant to federal law, CAP provides information about services for people with disabilities and provides assistance when a person is having difficulty receiving services that are funded under the Rehabilitation Act.

CAP serves people seeking services from DVR, tribal vocational rehabilitation projects, or independent living centers in Wisconsin. These programs must inform a person of CAP services whenever: (a) a service is denied, reduced, or changed; (b) a person is found not eligible; or (c) a case is closed against the person's wishes.

CAP services include providing information regarding services for people with disabilities, assistance with the determination of whether an individual is receiving appropriate services, assistance with resolving differences between an individual and the counselor or rehabilitation teacher, and assistance with an appeal or other legal remedy when appropriate services have been denied. CAP services are provided at no cost to individuals.

**Confidential Information.** No person may disclose, directly or indirectly, any information concerning any person who applies for or receives vocational rehabilitation services without the

consent of the person, except when necessary for program administration or to carry out an individual's IPE.

Exceptions to this requirement include disclosing information: (a) in the administration of the DVR program; (b) as needed to protect the individual from physical harm to self or others; (c) in response to criminal investigations; (d) in response to a judicial order; (e) when required by federal law for an approved audit, research, or evaluation purpose; or (f) in suspected cases of abuse, neglect, exploitation, or endangerment, unless expressly prohibited by state or federal laws.

**Other Rights and Responsibilities.** Individuals are advised, in writing, of all of their rights, including the availability of CAP, when they apply for services, when they are determined not eligible for services or do not meet the requirements of an open OOS category, when the IPE is prepared or amended, when services are denied, reduced, or suspended, when a decision to close the case is made, and at any other time upon request by the individual during the process.

Each individual must have his or her responsibilities clearly defined as they relate to the rehabilitation process. Responsibilities vary according to the abilities of each individual and are defined within the counseling and guidance relationship.

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### Specialized Programs

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DVR provides specific services tailored to the needs of individuals and employers. Several specialized programs have been created to serve groups of individuals who have specific needs in common. Some of these programs receive targeted federal funding and some programs provide match funds to draw federal funds to the DVR program. Provided below are brief descriptions of each of these programs and their DVR funding

relationship.

**Business Enterprise Program.** The business enterprise program (BEP) began in 1936 with the Randolph-Sheppard Act. This federal law gives priority and preference to legally blind individuals in the operation of any vending or cafeteria service in a federally owned, funded, or leased facility. The Wisconsin DVR exercised a voluntary option to apply to the Department of Education for a state licensing agency designation for the "Vending Facility Program for the Blind on Federal and Other Property." The federal license allows DVR to exercise priority preferences for legally blind individuals to operate vending or cafeteria service on federal properties in Wisconsin.

Wisconsin later enacted companion legislation to ensure that state government gives similar priority to blind individuals whenever establishing or contracting food service or vending operations on state-owned or leased properties. DVR establishes and maintains BEP businesses in state buildings and on federal properties when the business is feasible and profitable. The ultimate objective of the program is to enable blind persons to operate their own businesses. Typical BEP businesses include vending machine operations, snack bars, coffee shops, or full-service cafeterias.

DWD is authorized by the BEP state statute to collect a portion of the proceeds from the BEP operators as well as from private food and beverage vendors operating on federal and state-owned and leased properties. The collected funds support a portion of the expenses of the program. These funds can be used as state match for federal vocational rehabilitation funds allocated to DVR. The matched funds can then be used for the purposes identified in the federal Rehabilitation Act.

When vendor fund collection is insufficient to cover the costs of the BEP, DVR may choose to supplement the BEP with case aid funds. Historically DVR has used case aid funds to pay for BEP management services and to assist new BEP

operators with their business start-up costs and equipment. However, even for established BEP operators, the program has relied heavily on DVR funding supplements for BEP equipment purchase and maintenance.

**Native Americans with Disabilities.** DVR has a memorandum of understanding (MOU) with Great Lakes Inter-Tribal Council (GLITC) to assist GLITC and member tribes in providing vocational rehabilitation services to Native Americans with disabilities in Wisconsin.

The purpose of the agreement is to help GLITC expand and support Section 121 vocational rehabilitation programs throughout Wisconsin. [The tribal programs are authorized under Section 121 of the federal Rehabilitation Services Act.] DVR provides technical assistance to GLITC to help support its efforts to serve eligible individuals on or near the reservations, including services to Native Americans living in urban areas such as Milwaukee, Madison, and Black River Falls.

Prior to federal fiscal year (FFY) 2011, the funding of this MOU was a joint venture between GLITC and DVR for the use of tribal gaming program revenue (PR) funds as an allowable source of match funds for federal vocational rehabilitation funds allocated to DVR. Beginning in FFY 2011, the types of services provided under this MOU through tribal gaming funds are not an allowable source of match dollars for the DVR program. DVR's state plan instead passes tribal gaming funds to GLITC in support of maintaining those services.

The agreement has been in place since state fiscal year 1998-99, and is renewed annually, contingent upon funding availability and achievement of outcome and reporting objectives. Since 2011-12, GLITC has been provided \$314,900 annually in tribal gaming PR for staffing, equipment, travel, supplies and services, and other support services. Under this MOU, DVR provides technical consultation to the GLITC vocational rehabilitation

program. The Division also provides consultation and case management training to newly hired staff. DVR works closely with GLITC in providing technical assistance related to rehabilitation technology, training, ongoing support, job coaching, benefits counseling, and other needed support and specialized training.

The program allows GLITC to add staff to the Section 121 grant program and expand Native American vocational rehabilitation services in the urban areas of Wisconsin that cannot be served through the Section 121 grant program. The Section 121 grant requires that individuals live on or near a reservation. This cooperative relationship assists both GLITC and DVR to reach an underserved population of individuals with disabilities and increase their employment rate.

In addition to the GLITC Section 121 program, three other Wisconsin tribes operate Section 121 programs: the Oneida Tribe of Wisconsin, Lac Courte Oreilles Band of Lake Superior Chippewa, and Menominee Tribe of Wisconsin through the College of Menominee Nation. DVR maintains cooperative agreements with each of the tribes operating Section 121 programs with a focus on cooperation and collaboration in the delivery of services to Native Americans with disabilities in Wisconsin.

**Supported Employment (SE).** Federal law defines SE as competitive work in integrated work settings, or employment in integrated work settings in which individuals are working toward competitive work, consistent with the strengths, priorities, abilities, interests, and informed choice of the individuals. SE is for individuals with the most significant disabilities for whom competitive employment has not traditionally occurred or has been interrupted or intermittent as a result of the significant disability, and who, because of the nature and severity of their disability, need intensive SE services, as described earlier, to perform such work.

Employers are provided services at no cost, including identification of job tasks, recruitment of employees, matching skills to job requirements, and training the new employee. SE specialists also provide ongoing assistance with supervision, performance evaluations, and additional training or other support as needed.

DVR annually receives a federal allocation for supported employment (Title VI, Part B of the Rehabilitation Act, as amended). These funds are to be used only for individuals with the most significant disabilities. Because supported employment funds are meant to be used to support and maintain an individual with a most significant disability in employment, the SE services may not be provided prior to an individual being placed into an employment position requiring SE services. All federal expenditures for an individual that occur prior to the individual being placed into a supported employment position must be provided with regular vocational rehabilitation funds. States must reserve and expend half of their supported employment allocation to provide supported employment services to eligible youth. The state is required to provide a match of at least 10% in non-federal expenditures for the total expenditures incurred with the set-aside for SE services to youth.

In federal fiscal year 2021, 4,252 individuals participated in supported employment in Wisconsin (Category 1), of which 606 gained competitive integrated employment.

**Ticket to Work and Work Incentives Act.** An individual who receives SSI or SSDI receives a ticket to work (TTW) from the Social Security Administration (SSA). If the individual wants to go to work, the ticket may be used to get employment services from DVR or another SSA-approved employment network (EN). If the individual is receiving services from DVR, the ticket is considered in use and may not be assigned to another EN. If the individual is not receiving services from DVR or if their case has been closed by DVR, the ticket or the remaining value of the

ticket may be used to get employment services from an approved EN. Through special arrangements called Partnership Plus, DVR works in partnership with ENs to improve an individual's employment retention and independence. Ideally, an agreement between DVR and an EN will provide for a smooth transition for the individual from DVR services to postemployment retention services provided by an EN. DVR allows for consumer choice when choosing an EN.

The goal of the Ticket to Work program is to help the individual go to work at a level of earnings that reduces the reliance on SSI or SSDI cash benefits to the point where the cash benefit is no longer needed. If this goal is reached, the SSA provides Social Security reimbursement payments to DVR or the employment network for the successful vocational rehabilitation of the SSI or SSDI recipients. Social Security reimbursement fund payments made to DVR are discussed in further detail under the section "Social Security Reimbursements."

According to SSA guidelines, individuals between 18 and 64 years of age who receive disability cash benefits are eligible for a ticket. Participation in the program is voluntary. Tickets are valid for five years as long as the individual is receiving cash benefits from the SSA, has decided to use the ticket, and is making timely progress to achieve self-sufficiency through employment earnings.

The SSA has contracted with Maximus, Inc. to manage the Ticket to Work program. A ticket holder may use the ticket with DVR or at an employment network that is approved by Maximus, Inc.

SSI or SSDI recipients may not assign their ticket to an employment network while they have an open casefile with DVR. When an individual is notified of their order of selection (OOS) wait list status, and at the time of their case closure, DVR provides SSI or SSDI recipients with a list of local

employment networks. These networks may be of assistance to the individual in obtaining or maintaining employment.

**Pre-Employment Transition Services (Pre-ETS).** Transition services are defined as a coordinated set of activities provided to students to promote movement from high school to other activities, including postsecondary education, vocational training, competitive integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation.

Federal requirements obligate DVR, in collaboration with local educational agencies, to offer high school students with disabilities (ages 14 to 21) Pre-ETS services using 15% of DVR's federal allocation on an annual basis. Pre-ETS services include job exploration counseling, work-based learning experiences, counseling on opportunities for enrollment in postsecondary educational programs, workplace readiness training, and instruction in self-advocacy.

DVR collaborates with the Wisconsin Departments of Public Instruction (DPI) and Health Services (DHS) to assist students through the transition process and toward achieving their employment goal. DVR, DPI, and DHS developed and executed an Interagency Agreement in 2007, which was most recently revised in 2020, with the purpose to clarify and develop a common understanding regarding the agencies' roles, policies, and procedures related to providing transition services and supports for students with disabilities entering employment. A toolkit resource has been developed among DVR, DPI, and DHS to provide a guidance framework and effective practices for improved coordination and communication between all stakeholders in the transition process.

For high school students who are eligible for an IPE, the plan for employment will be completed prior to departure from high school. The IPE developed with DVR is based on the individual

student's needs, taking into account the student's preferences and interests, and includes instruction, community experiences, the development of employment and other adult living objectives, and, when appropriate, acquisition of daily living skills and a functional vocational evaluation.

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### **Wisconsin Rehabilitation Council**

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The Rehabilitation Act of 1973, as amended, requires the creation, by each state, of a state rehabilitation council. The Wisconsin Rehabilitation Council (WRC) fulfills this mandate.

WRC functions include:

- a. Reviewing, analyzing, and advising DVR concerning: (1) the performance of DVR responsibilities, particularly those related to eligibility; (2) the extent and effectiveness of its services; and (3) agency functions that affect individuals with disabilities and their rehabilitation goals.
- b. Advising and assisting DVR in preparing the state plan for vocational rehabilitation services and the plan's amendments, applications, reports, needs, assessments, and evaluations.
- c. Reviewing and analyzing the experiences, outcomes, and satisfaction of individuals who receive DVR services.
- d. Coordinating WRC activities with those of other disability-related councils.
- e. Establishing a working relationship between DVR, independent living centers, and the Independent Living Council of Wisconsin.

The WRC consists of 24 members: one non-voting DVR administrator, one non-voting DVR counselor and 22 citizen voting members. WRC

members are appointed to staggered three-year terms by the Governor. Under federal law, members must include: (a) at least one representative of the statewide Independent Living Council; (b) at least one representative of a parent training and information center; (c) at least one representative of the Client Assistance Program; (d) at least one qualified vocational rehabilitation counselor; (e) at least one representative of community rehabilitation program service providers; (f) four representatives of business, industry, and labor; (g) representatives of disability advocacy groups representing a cross-section of individuals with physical, cognitive, sensory, and mental disabilities and these individuals' representatives; (h) current or former applicants for, or recipients of, vocational rehabilitation services; (i) at least one representative of the directors of projects involving Native American tribes, if the state has any such projects; (j) at least one representative of the educational agency responsible for the public education of students with disabilities who are eligible to receive services; and (k) at least one representative of the state workforce investment board.

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### Program Participation

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This section provides information regarding the population receiving DVR services in the state. During FFY 2021, there were 25,846 individuals who applied to and/or who received services from DVR, including individuals continuing services from prior years and those placed on the OOS waiting list. New applicants totaled 8,353, and 3,259 individuals achieved an employment outcome.

Tables 3 through 7 show the population of DVR individuals by the order of selection (OOS) category, disability type, age group, type of job, and employment outcome in FFY 2021.

Table 3 shows that 47.8% of DVR individuals in FFY 2021 were designated as having the most significant disabilities and received priority for services as part of OOS Category 1. Table 3 also shows that 43.7% of DVR individuals in FFY 2021 were identified as a person with a significant disability and placed in OOS Category 2.

**Table 3: Caseload by Order of Selection Categories -- FFY 2021**

OOS Category	Number of Individuals	Percent of Total
1	12,362	47.8%
2	11,286	43.7
3	148	0.6
Not Classified/Other	<u>2,050</u>	<u>7.9</u>
Total	25,846	100.0%

Table 4 shows that mental illness and autism were the two most common disability types for individuals that received DVR services in FFY 2021.

**Table 4: Caseload by Disability Type -- FFY 2021**

Disability Type	Number of Individuals	Percent of Total
Mental Illness	4,778	18.5%
Autism	3,161	12.2
Cognitive	2,834	11.0
Orthopedic	2,587	10.0
Other	2,345	9.1
Learning Disabilities	2,111	8.2
Eligibility Undetermined*	2,025	7.8
Other Physical	1,836	7.1
Attention-Deficit/Hyperactivity Disorder	1,539	6.0
Deaf/Hard of Hearing	1,033	4.0
Blind/Visual	509	2.0
Brain Injuries	486	1.9
Congenital Condition or Birth Injury	337	1.3
Alcohol/Drug	<u>265</u>	<u>1.0</u>
Total	25,846	100.0%

\*Cases closed prior to eligibility determination.



Table 5 shows that 43.2% of the DVR individuals in FFY 2021 were under the age of 25. Fewer than 8% were over the age of 59.

**Table 5: Caseload by Age Group -- FFY 2021**

Age Group	Number of Individuals	Percent of Total
14 and Under	38	0.1%
15-19	5,852	22.6
20-24	5,309	20.5
25-34	4,091	15.8
35-44	3,451	13.4
45-54	3,404	13.2
55-59	1,800	7.0
60-64	1,229	4.8
65 +	<u>672</u>	<u>2.6</u>
Total	25,846	100.0%

Table 6 indicates that, of the individuals who achieved an employment outcome, 58% were employed in jobs related to office and administrative support, food preparation and service, building

**Table 6: Caseload by Type of Job -- FFY 2021**

Type of Job	Number of Individuals	Percent of Total
Office and Administrative Support	723	22.2%
Food Preparation and Serving Related	455	14.0
Building and Grounds Cleaning and Maintenance	360	11.0
Production	366	11.2
Sales and Related	276	8.5
Transportation and Material Moving	238	7.3
Personal Care and Service	173	5.3
Healthcare Support	70	2.1
Community and Social Service	70	2.1
Education, Training, and Library	84	2.6
Healthcare Practitioners and Technical	84	2.6
Installation, Maintenance, and Repair	70	2.1
Management	63	1.9
Computer and Mathematical	43	1.3
Arts, Design, Entertainment, Sports, and Media	35	1.1
Business and Financial Operations	36	1.1
Protective Service	29	0.9
Construction and Extraction	26	0.8
Architecture and Engineering	26	0.8
Farming, Fishing, and Forestry	15	0.5
Life, Physical, and Social Science	11	0.3
Legal	<u>6</u>	<u>0.2</u>
Total	3,259	100.0%

and grounds cleaning and maintenance, and production.

Table 7 shows that, of the individuals who achieved an employment outcome, 82.8% achieved an employment outcome without the need for ongoing employment supports. Competitive integrated employment refers to a workplace where a person with a disability earns at least minimum wage, works with people without disabilities, and has the same pay, benefits, and opportunities for promotion as workers without disabilities.

**Table 7: Caseload by Employment Outcome -- FFY 2021**

Employment Outcome	Number of Individuals	Percent of Total
Competitive Integrated Employment	2,697	82.8%
Supported Employment in		
Competitive Integrated Employment	542	16.6
Self-Employment (Except BEP)	17	0.5
Business Enterprise Program (BEP)	<u>3</u>	<u>0.1</u>
Total	3,259	100.0%

As noted in the Background section, 9.5% of working-age individuals in Wisconsin reported a disability as of 2020 and 43.4% of these individuals were employed. At 9.5%, Wisconsin had the 16<sup>th</sup>-lowest percentage of working-age population with disabilities. The national average was 10.8%. At 43.4%, Wisconsin had the 9<sup>th</sup>-highest employment rate of working-age people with disabilities. The national average was 37.0%. Appendices IV and V show how these percentages compare with other states.

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## Program Funding

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**Vocational Rehabilitation Revenue.** The primary source of funding for the vocational rehabilitation program is a 78.7% federal share

provided under the Rehabilitation Act of 1973, as amended. Additional funding is provided from a state match of 21.3% of program funds. The state match of 21.3% is the same for all states and is required to receive the federal grant funds. Allocation of federal funds is based on a formula under the Rehabilitation Act of 1973, as amended. The formula is, in part, based on population and per-capita income. In addition to the formula allotment, the Rehabilitation Act of 1973 requires the Rehabilitation Services Administration (RSA) to determine each year if any state or territory will not be able to fully spend its formula allotment and then reallocate this money to states that will be able to fully utilize these funds. In each year since 2013, Wisconsin has fully matched the available federal allocation. Appendix VI compares the actual awards received for all states and territories in FFY 2022. The Rehabilitation Act of 1973, as amended, also requires state vocational rehabilitation agencies to maintain a level of non-federal expenditures in the previous fiscal year that is at least equal to non-federal expenditures from two years prior.

The federal grant is authorized an annual increase in funding. This increase in funding is based on the percentage change in the Consumer Price Index. As the federal grant increases, the corresponding state matching funds need to be increased to capture the full grant amount.

State matching funds have been provided through general purpose revenue (GPR) and program revenue (PR) funds in DVR, and BEP vendor proceeds collections. Generally, program revenue funds include gifts and grants from small donations from private citizens.

Table 8 shows the amount of federal grants allocated to Wisconsin and the amount of state matching funds provided from FFY 2017 through FFY 2022. In each year in the table shown, Wisconsin fully matched the available federal allocation. For 2017, DVR did not receive the full projected federal reallocation and therefore was

required to "overmatch" in order to meet DVR's maintenance of effort of two years prior (\$17,547,763). Appendix VI compares the actual awards received for all states and territories in FFY 2022.

**Table 8: Federal Vocational Rehabilitation Grants and State Matching Funds -- FFY 2017 through FFY 2022**

Federal Fiscal Year	Grant Allocation	State Matching Funds (GPR)	Total Funding
2017	\$62,801,169	\$17,547,763	\$80,348,932
2018	65,053,321	17,606,553	82,659,874
2019	64,836,101	17,547,763	82,383,864
2020	65,053,321	17,606,553	82,659,874
2021	65,064,265	17,609,515	82,673,780
2022	66,303,351	17,944,871	84,248,222

**Social Security Reimbursements.** Additional funding for DVR is received through reimbursements from the SSA for the successful vocational rehabilitation of each individual who receives either SSI or SSDI such that the individual earns wages and no longer receives cash benefits from the SSA. Social Security reimbursement funds can be used to purchase services for disabled individuals, but cannot be used as a match for other federal funds. These reimbursements are authorized under either the Ticket to Work and Work Incentives Improvement Act of 1999 (TWWIIA) or under Title II of the Social Security Act.

The TWWIIA authorizes payment to employment networks for outcomes and long-term results through an outcome payment system or an outcome-milestone payment system. The outcome payment system provides payment to employment networks of up to 40% of the average monthly disability benefit for each month benefits are not paid to the beneficiary due to work, not to exceed 60 months. The outcome-milestone payment system is similar, except it provides for early payments based on the achievement of one or more milestones directed towards the goal of permanent employment.

Under Title II of the Social Security Act, the SSA reimburses state vocational rehabilitation agencies for the reasonable and necessary costs of services that resulted in SSI or SSDI recipients being successfully rehabilitated. Each recipient must achieve the SSA benchmark for substantial gainful earnings activity for nine months. For FFY 2022, 492 individuals achieved substantial gainful activity for at least nine continuous months. Substantial gainful activity means earning over \$1,350 per month for non-blind individuals and over \$2,260 per month for blind individuals after deducting allowable work expenses.

DVR has the option of receiving its Social Security reimbursement funds from the SSA under the TWWIA or under Title II of the Social Security Act. DVR has chosen to accept its reimbursements under Title II of the Social Security Act to receive its full costs of successful rehabilitation of individuals who received SSI or SSDI and to collect the first two milestone payments under the TWWIA for qualified individuals who do not later achieve and sustain the substantial gainful activity benchmark that would trigger the reimbursement payment.

Table 9 shows Social Security reimbursements earned by DVR for the last six federal fiscal years. From the Social Security reimbursement funds it receives, DVR allocates a portion of these monies to support 12 business service consultant positions, one for each of the 11 workforce development areas of the state with an additional

**Table 9: Social Security Reimbursement Payments - FFY 2017 through FFY 2022**

Federal Fiscal Year	Amount
2017	\$4,440,800
2018	7,009,800
2019	4,475,200
2020	5,326,500
2021	4,873,968
2022	4,902,388

position for the Milwaukee County WDA. Business service consultants' primary functions relate to business engagement requirements under federal WIOA legislation, including conducting business needs assessments, developing job matches, and placing DVR consumers in jobs.

**Vocational Rehabilitation Expenditures.**

Funding for the vocational rehabilitation program is expended on administration of the program and on services for the individuals served by the program. Table 10 shows the allocation of administrative and case services expenditures, by federal funds and state match, to the federal fiscal year 2021 grant award.

**Table 10: DVR Administration and Case Services Allocations -- FFY 2021**

Fund Source	Administration	Case Services	Total
Federal	\$27,089,695	\$37,974,570	\$65,064,265
State Match	<u>7,347,061</u>	<u>10,262,454</u>	<u>17,609,515</u>
Total	\$34,436,756	\$48,237,024	\$82,673,780

Federal regulations allow states to obligate the funds within one year and to spend the funds within two years. As a result, expenditures for a federal award are not confined to a 12-month period. Therefore, expenditures within any given federal fiscal year (Tables 11, 12, and 13) may not equal the amount of the federal allotment and state match for that year (Table 10). In addition, the FFY21 case service expenditure total of \$48.2 million shown in Table 10 does not equal the case service expenditure totals shown in Tables 11 through 13; these later tables reference expenditures that occurred during the FFY21 period, while Table 10 shows expenditures that are attributed to the FFY21 grant award, but additional committed FFY21 funds may not be fully expended until subsequent years.

Table 11 shows that in FFY 2021, DVR spent \$45.1 million on case services. It also includes

**Table 11: Case Services Expenditures by Order of Selection -- FFY 2021**

Category	Amount	Percent of Total
1	\$28,289,044	62.8%
2	16,443,959	36.5
3	156,695	0.3
Not Classified/other	<u>176,822</u>	0.4
Total	\$45,066,521	100.0%

expenditures by OOS category, as well as each category's percentage of overall expenditures. Category 1 consists of individuals with the most significant disabilities, who must be served first. Category 2 consists of individuals with significant disabilities, but not the most significant. Category 3 consists of individuals with non-significant disabilities.

Tables 12 and 13 show case services expenditures by disability impairment or cause and by service type. Table 12 shows expenditures by disability for FFY 2021, and each disability's percentage of overall expenditures.

Just under 45% of all case service expenditures were for individuals whose disability impairment or cause was from the first three listed: a cognitive disability, autism, or a specific learning disability. The fourth largest category, unknown cause, generally describes an individual who has not identified a cause for the disability type, which could include an unknown cause of a physical or mental health issue.

Table 13 shows expenditures by service provided for FFY 2021, and each service category's percentage of overall expenditures. The largest expenditure categories were pre-employment transition services, job search assistance, and supported employment. Together, these three categories accounted for 58% of total expenditures in FFY 2021.

**Table 12: Case Services Expenditures by Disability Impairment or Cause -- FFY 2021**

Disability	Amount	Percent of Total
Cognitive Disability	\$8,169,520	18.1%
Autism	7,265,013	16.1
Specific Learning Disabilities	4,860,867	10.8
Cause Unknown	3,601,135	8.0
Depressive and Other Mood Disorders	2,916,148	6.5
Congenital Condition or Birth Injury	2,721,854	6.0
Accident/injury (other than TBI or SCI)	2,022,666	4.5
Attention-Deficit Hyperactivity Disorder	2,007,820	4.5
Physical Disorders/Conditions (not listed elsewhere)	1,743,059	3.9
Anxiety Disorders	1,640,518	3.6
Cerebral Palsy	1,557,198	3.5
Arthritis And Rheumatism	933,835	2.1
Mental Illness (not listed elsewhere)	895,377	2.0
Schizophrenia and other Psychotic Disorders	714,357	1.6
Traumatic Brain Injury (TBI)	667,119	1.5
Spinal Cord Injury (SCI)	411,222	0.9
Stroke	383,848	0.9
Muscular Dystrophy	308,856	0.7
Epilepsy	302,441	0.7
Cancer	236,413	0.5
Cardiac and Other Conditions of the Circulatory System	224,919	0.5
Alcohol Abuse or Dependence	178,159	0.4
Diabetes Mellitus	176,586	0.4
Multiple Sclerosis	172,577	0.4
Parkinsons Disease and Other Neurological Disorders	170,682	0.4
Personality Disorders	145,114	0.3
Amputations	135,549	0.3
Respiratory Disorders other than Cystic Fibrosis or Asthma	120,920	0.3
End-stage Renal Disease/other Genitourinary System Disorders	73,018	0.2
Asthma and Other Allergies	66,728	0.1
Drug Abuse or Dependence (other than Alcohol)	56,447	0.1
Immune Deficiencies Excluding HIV/AIDS	52,261	0.1
Digestive	40,696	0.1
Other - Not Defined	36,218	0.1
Cystic Fibrosis	23,836	0.1
Blood Disorders	17,388	<0.1
HIV and AIDS	12,879	<0.1
Polio	3,042	<0.1
Eating Disorders (Anorexia, Bulimia, Compulsive Overeating)	<u>236</u>	<u>&lt;0.1</u>
Total	\$45,066,521	100.0%

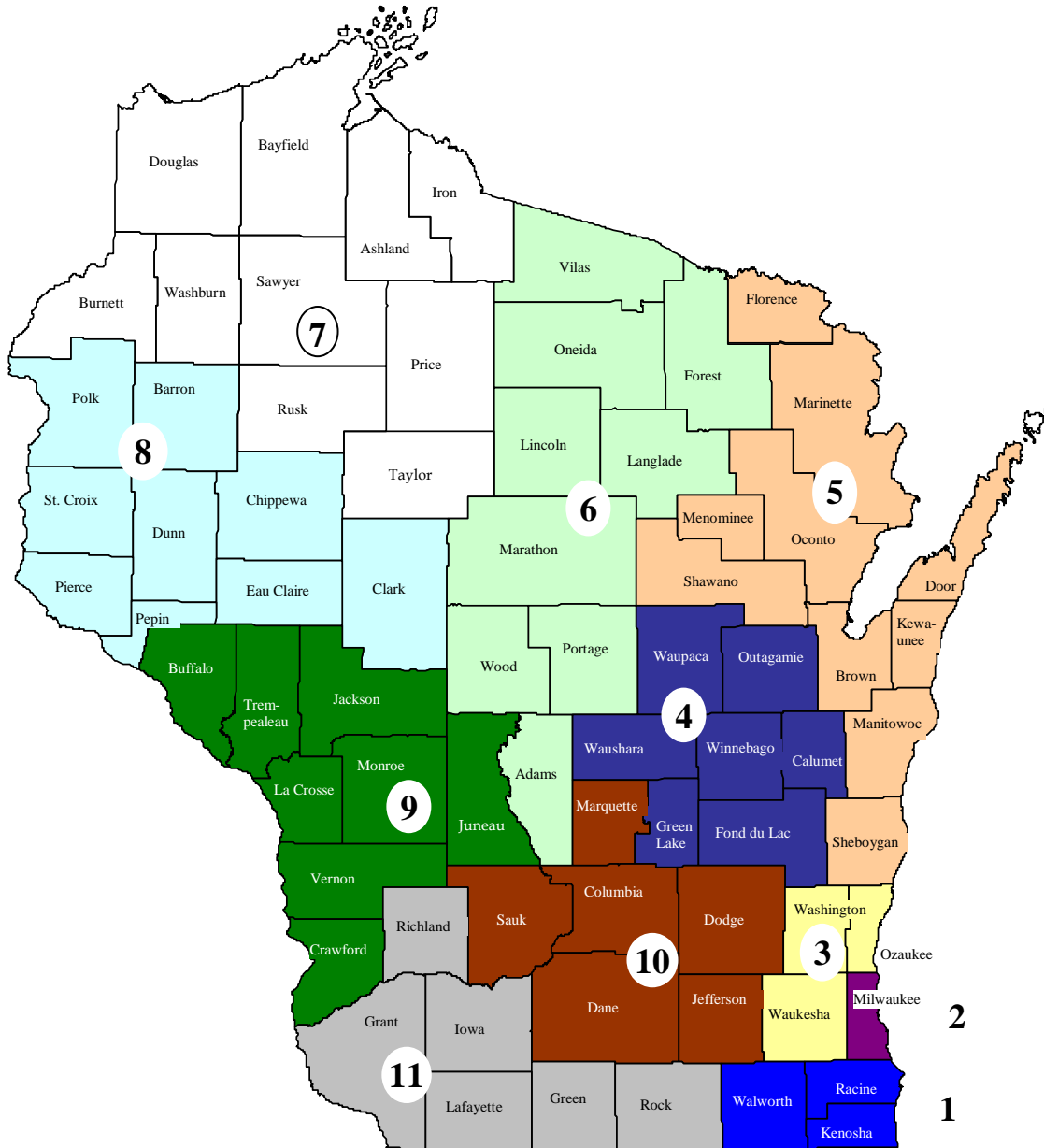
**Table 13: Case Services Expenditures by Service --  
FFY 2021**

	Amount	Percent of Total
Pre-Employment Transition Services	\$9,709,341	21.5%
Job Search Assistance	8,991,803	20.0
Supported Employment	7,423,148	16.5
Training	6,357,317	14.1
On The Job Supports	3,630,948	8.1
Assessment	2,770,299	6.1
Rehabilitation Technology	2,454,711	5.4
Eligibility/OOS Assessment Services	1,442,102	3.2
Transportation	890,372	2.0
Other and Unspecified Services	596,412	1.3
Individual Placement & Support	304,098	0.7
Project Search	198,499	0.4
Interpreter Services	97,542	0.2
Technical Assistant Services	79,629	0.2
Customized Employment	63,650	0.1
Diagnosis and Treatment	44,144	0.1
Self-Advocacy	12,296	<0.1
Information and Referral	<u>210</u>	<u>&lt;0.1</u>
<b>Total</b>	<b>\$45,066,521</b>	<b>100.0%</b>



# APPENDIX I

## Vocational Rehabilitation Workforce Development Areas



## APPENDIX II

### Statutory Requirements of the Vocational Rehabilitation Program

Under Chapter 47 of the Wisconsin Statutes, DVR is required to:

- a. make vocational rehabilitation services available in every county to all persons with disabilities who are present in the state, regardless of residency;
- b. provide that persons with severe disabilities will receive priority for services;
- c. advise and assist any person with a disability who applies to DVR concerning his or her rehabilitation;
- d. provide full and prompt consultation with, and diagnostic study for, each person who applies to DVR to determine if a vocational rehabilitation plan is feasible;
- e. acquaint each person for whom a vocational rehabilitation program is feasible with DVR services, counsel the person concerning selection of a suitable vocation, assist the person in identifying vocational needs, and provide services necessary for vocational rehabilitation;
- f. register and keep records for each person who uses DVR services;
- g. provide medical or other evaluations at no cost to the applicant to determine the applicant's eligibility for DVR services;
- h. provide assessment and evaluation services appropriate to each individual, develop an individualized written rehabilitation program with each person with a disability, and develop and supervise services that are part of the vocational rehabilitation program of any person with a disability;
- i. assure that eligibility for DVR services is determined without regard to the sex, race, age, creed, color, or national origin of the individual applying for services, that no class of individuals is found ineligible solely on the basis of type of disability, and that no age limitations for eligibility exist which, by themselves, would result in ineligibility for DVR services;
- j. aid persons with disabilities in securing the services needed to make them more employable, place persons with disabilities in suitable occupations, and provide postemployment services necessary to maintain employment;
- k. consider the views of persons who receive DVR services, or their parents, guardians, or legal custodians, and of vocational rehabilitation professionals and providers of DVR services concerning general policy administration of the DVR program;
- l. provide DVR services to blind and visually impaired persons, appropriate to each individual;
- m. maintain current records and statistics on all blind and visually impaired persons in the state concerning vocational rehabilitation, rehabilitation teaching, and other services provided and the results achieved in order to plan its services to blind and visually impaired persons;
- n. maintain a cooperative relationship with counties to assist in administering and providing uniform services to blind and visually impaired persons throughout the state, to prevent duplication of effort, and to ensure that blind and visually impaired persons receive adequate services;



o. promote the establishment of local resources for the vocational rehabilitation of persons with disabilities;

p. except as provided under (q), determine the financial need of persons with disabilities based upon a uniform fee schedule for the provision or purchase of DVR services specified in the rehabilitation program developed for the person with a disability;

q. assure that no financial needs test is applied as a condition for the provision of counseling, guidance, referral and job placement services (those services are provided at no cost to persons eligible for DVR services); and

r. report to the U.S. Department of Education as required under the Rehabilitation Act of 1973, as amended.

## APPENDIX III

### Examples of Disabilities That Could Require DVR Services

AIDS/HIV  
Alcohol or Other Drug Disorder  
Amputation  
Arthritis  
Attention-Deficit/Hyperactivity Disorder

Autism  
Back Injury  
Blindness or Visual Impairment  
Brain Injury  
Cancer

Carpal Tunnel (Repetitive Use Syndrome)  
Cerebral Palsy  
Cognitive Disability  
Cystic Fibrosis  
Deaf or Hard of Hearing

Deaf-Blind  
Depression  
Diabetes  
Epilepsy  
Fibromyalgia

Heart Disease  
Hemophilia  
Hip/Knee/Other Joint Dysfunction  
Kidney Failure  
Mental Illness

Missing or Deformed Limb  
Multiple Sclerosis  
Muscular Dystrophy  
Myofascial Disorder  
Paraplegia or Quadriplegia

Post-Traumatic Stress Disorder  
Respiratory/Pulmonary/Allergies  
Specific Learning Disability  
Spinal Cord Injury  
Stroke

## APPENDIX IV

### Prevalence of Working-Age People (18-64) With Disabilities

**2020 (by Rank)**

State	Percentage of Working-Age People With Disabilities	Rank	State	Percentage of Working-Age People With Disabilities	Rank
New Jersey	8.3%	1	Wyoming	11.3	26
California	8.4	2	Pennsylvania	11.4	27
Hawaii	8.5	3	Vermont	11.4	28
North Dakota	8.5	4	Georgia	11.5	29
Nebraska	8.7	5	North Carolina	11.6	30
Connecticut	9.1	6	Montana	11.7	31
Maryland	9.1	7	Delaware	11.9	32
Minnesota	9.1	8	Rhode Island	11.9	33
New York	9.1	9	Kansas	12.0	34
Alaska	9.3	10	Idaho	12.2	35
Colorado	9.3	11	Oregon	12.2	36
Illinois	9.3	12	Missouri	12.3	37
District of Columbia	9.5	13	South Carolina	12.3	38
Massachusetts	9.5	14	Ohio	12.4	39
South Dakota	9.5	15	Michigan	12.5	40
WISCONSIN	9.5	16	Indiana	12.6	41
Utah	9.6	17	Tennessee	13.2	42
Virginia	9.9	18	Maine	13.7	43
Texas	10.1	19	Louisiana	14.2	44
New Hampshire	10.3	20	New Mexico	14.5	45
Florida	10.5	21	Alabama	14.7	46
Iowa	10.5	22	Mississippi	15.4	47
Nevada	10.9	23	Oklahoma	15.7	48
Arizona	11.1	24	Kentucky	16.6	49
Washington	11.2	25	Arkansas	16.7	50
			West Virginia	16.8	51

Source: Annual Disability Statistics Compendium: 2021. University of New Hampshire, Institute on Disability.

## APPENDIX V

### Employment Rates of Working-Age People (18-64) With Disabilities

#### 2020 (by Rank)

State	Percentage of Working-Age People With Disabilities Who are Employed	Rank	State	Percentage of Working-Age People With Disabilities Who are Employed	Rank
North Dakota	52.1%	1	Arizona	38.0	26
Nebraska	48.1	2	Massachusetts	38.0	27
Utah	47.5	3	Oklahoma	37.8	28
South Dakota	46.6	4	Ohio	36.8	29
Iowa	44.9	5	Missouri	36.6	30
Hawaii	44.5	6	Oregon	36.6	31
New Hampshire	44.2	7	California	36.5	32
Kansas	44.1	8	Nevada	36.4	33
WISCONSIN	43.4	9	Pennsylvania	36.1	34
Delaware	43.2	10	Georgia	36.0	35
Minnesota	43.0	11	Florida	35.2	36
Idaho	42.2	12	South Carolina	34.6	37
Colorado	41.6	13	Maine	34.4	38
Montana	41.6	14	New York	33.8	39
Wyoming	41.5	15	Michigan	33.6	40
New Jersey	40.8	16	Tennessee	33.6	41
Texas	40.6	17	Louisiana	33.3	42
Rhode Island	40.3	18	North Carolina	33.2	43
Maryland	40.2	19	Kentucky	32.3	44
Virginia	40.2	20	Vermont	31.2	45
Alaska	39.1	21	Alabama	31.0	46
Illinois	39.1	22	New Mexico	30.6	47
Indiana	39.0	23	Arkansas	30.5	48
Washington	38.8	24	District of Columbia	30.1	49
Connecticut	38.1	25	Mississippi	28.5	50
			West Virginia	27.6	51

Source: Annual Disability Statistics Compendium: 2021. University of New Hampshire, Institute on Disability.

## APPENDIX VI

### Vocational Rehabilitation State Grants

**FFY 2022**

State or Other Area	Grant Amount	Percent of Total	State or Other Area	Grant Amount	Percent of Total
Alabama	\$69,944,263	2.1%	Missouri	\$76,518,479	2.3%
Alaska	11,521,604	0.3	Montana	6,003,734	0.2
Arizona	83,588,387	2.5	Nebraska	18,854,302	0.6
Arkansas	41,972,054	1.2	Nevada	29,936,237	0.9
California	291,751,447	8.7	New Hampshire	12,053,171	0.4
Colorado	48,748,391	1.4	New Jersey	64,480,218	1.9
Connecticut	22,526,143	0.7	New Mexico	28,392,663	0.8
Delaware	11,521,604	0.3	New York	144,701,976	4.3
District of Columbia	15,840,814	0.5	North Carolina	127,266,712	3.8
Florida	217,459,906	6.5	North Dakota	11,521,604	0.3
Georgia	121,401,749	3.6	Ohio	141,828,782	4.2
Hawaii	13,086,861	0.4	Oklahoma	50,564,126	1.5
Idaho	21,881,933	0.6	Oregon	44,354,055	1.3
Illinois	119,882,242	3.6	Pennsylvania	136,191,182	4.0
Indiana	83,020,975	2.5	Rhode Island	11,521,604	0.3
Iowa	36,942,205	1.1	South Carolina	67,334,721	2.0
Kansas	32,063,921	1.0	South Dakota	11,521,604	0.3
Kentucky	63,404,314	1.9	Tennessee	84,549,335	2.5
Louisiana	63,368,205	1.9	Texas	300,138,007	8.9
Maine	17,251,176	0.5	Utah	36,643,917	1.1
Maryland	48,623,984	1.4	Vermont	11,521,604	0.3
Massachusetts	49,483,840	1.5	Virginia	78,717,315	2.3
Michigan	119,958,255	3.6	Washington	59,669,129	1.8
Minnesota	54,423,542	1.6	West Virginia	28,130,717	0.8
Mississippi	48,272,648	1.4	Wisconsin	66,303,351	2.0
			Wyoming	<u>11,521,604</u>	<u>0.3</u>
			Total	\$3,368,180,612	100.0%

Source: U.S. Department of Education: Rehabilitation Services Administration (rsa.ed.gov)