# Vocational Rehabilitation Services Manual D-200: Purchasing Goods and Services

Revised December 3, 2018

## D-203: Purchasing Decisions

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### D-203-4: Customer Participation in the Cost of Services

A customer's eligibility for VR services does not depend on the customer's income or liquid assets; however, if the customer's net income or liquid assets exceed the basic living requirements (BLR), the customer must participate in the cost of services.

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#### Determining the Customer's Requirement and Ability to Participate

To determine whether a customer must participate in the cost of services and his or her financial ability to do so, the VR counselor uses the following four-step procedure.

1. Determine whether the customer is required to participate in the cost of services

When determining whether the customer is required to participate in the cost of services, VR staff:

* considers the monthly net income and liquid assets of the customer;
* considers the monthly net income and liquid assets of the customer's spouse (if applicable); and
* considers the monthly net income and liquid assets of the parent or legal guardian- if the customer is claimed as a dependent for purposes of federal income taxes; and
* compares the total monthly net income and liquid assets BLR levels.

NOTE: When completing the Monthly Financial Information screen in RHW, the customer's net income must be entered in the Economic Resources section to get an accurate BLR calculation.

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## D-204: The Purchasing Process

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### D-204-6: Changing a Provider on a Service Authorization

The selected provider on an existing service authorization (SA) may need to be changed under certain circumstances. The ability to make these changes to the SA is limited to specific RHW user roles including the medical services coordinator and the unit purchasing specialist.

Changing the provider on an existing SA is only allowed in the following circumstances:

1. For medical services;
2. If the provider has changed their status, such as going from a sole provider (Dr. Smith) to an incorporated provider (ABC Medical Services) or vice versa; or
3. If the provider merged or was acquired by another provider.

The new provider on the SA must meet all the criteria that were in place for the existing SA. Refer to B-504-4: Planned Services and other relevant content throughout this manual for additional information.