INSTRUCTIONS FOR AUTHORIZATIONS AND BILLINGS
(R-450)

Authorizations for services to rehabilitation clients shall be in writing before the purchase of those services. In the event that circumstances require a verbal authorization to be made, it shall be followed up in writing at the earliest possible time.

Supervisors may authorize staff to sign authorizations and billings. In these instructions, those individuals are referred to as authorized staff.

The Agencyôs uses a unified authorization and billing form (R-450). Both processes are accommodated on one form, which has been designed for ease of completion by all parties.

It is acceptable for all or part of the document to be HAND PRINTED in ink, as long as it is clear and readable.

When a casefile is opened or transferred in, clerical staff may want to routinely complete the items asterisked (*) below. Working from photocopies or the template on the Intranet, these items will not have to be retyped as long as the file is open. However, a new form can be used for any part of the operation at any time. This might be necessary if the file was not immediately available and an authorization, claim, amendment or cancellation needed to be done.

AUTHORIZATION

***Services to be Provided to:** Enter the name and address of the client.

***Case No:** Enter the clientôs case number.

Payee Name and Address: Enter the name and address of the payee to match what is on or will be on the i3 Vendor Table. If the client is also the payee, enter ñClient is payeeò.

Tax ID No: The payeeõs taxpayer ID number must be entered. The payeeõs taxpayer identification number is either the payeeõs nine digit federal identification number or Social Security number depending upon the payeeõs type of organization. An additional two digits are assigned by the State vendor system (part of I3). Compare the tax ID number to the I3 Vendor Table to confirm the number and address you are using. If no match shows up on I3, have the payee complete a W-9 Vendor Update Form to get added to this table. Include your office number on the form in case Financial staff have questions.

If the payee has moved and continues to use the same taxpayer identification number, an email or letter can be sent to Financial indicating the vendor name, taxpayer ID number, old address and new address.

A payee must be on I3 before an authorization can be put on VRAP, unless the client is the payee, in which case it is left Blank.

(Note: Just below the Tax ID item there is a dotted line, which can be used as the fold line for authorizations being sent to the Payee.)

***Return Billing Copy to:** Enter the name and address of the IVRS office where you want the bill to go. In most instances, this will be the issuing office, but there may be instances where one office is writing the authorization, but the client will actually be receiving services from another office (ex: college cases) In those cases, put the new officeõs name and address in this block.

***Agency Representative's Name:** Enter the name of the staff person to whom the case is assigned.

***Agency Representative's Phone #:** Enter the telephone number of the staff person to whom the case is assigned.

Status: Enter the three-digit status the client will be in when they begin to receive the service called for on the authorization. Authorizations showing Status 04 will not be accepted.

***Office #:** Enter the office number of the staff person to whom the case is assigned.

***SSN:** Enter the clientõs Social Security number.

SECTION 1: INITIAL AUTHORIZATION

Period Covered: Enter the six-digit date the authorization begins (the date on or after which the service can begin) and the six-digit date the authorization ends (the date by which the service must have been completed ï it can be no later than September 30 of the Federal Fiscal Year in which the authorization begins unless the service is for tuition).

Enter the entire period the service covers regardless of whether authorization is payable to client or third party vendor.

When requesting medical records, enter ñRecords through (current date)ò

You may not know the exact beginning and ending dates of college semesters. It is acceptable to use 8/15/02 ï 12/20/02 for Fall Semester and 1/8/03 ï 5/25/03 for Spring Semester. If the school uses something other than a Semester system you should adjust the dates to approximate their system.

Services to be Provided: Enter the authorized item, number of units, and cost per unit. Example: (tuition, Fall Semester, 10 hours @ $20/hour, $200; Spring Semester, 9 hours @ $20/hour, $180).

When providing ñclass required extra expensesò to individuals in post-secondary training, the authorization must detail the specific goods and/or services. It is not adequate to simply authorize ñclass required extra expensesò

When authorizing maintenance, briefly describe what the maintenance will be used for, such as rent or utilities.

When providing money to clients through a third party, indicate if the money is to be provided as a lump sum or if it is to be provided weekly, monthly, etc. This effects when the third party can bill IVRS for the money. Also indicate what the dollar amount is for (i.e. maintenance, transportation, etc.).

Authorized Amount: Multiply the cost per unit by the number of units and enter the amount in this column. If there is more than one entry, add all together and enter at the bottom (Total) of the column. If there is only one entry, no entry needs to be made at the Total.

Refer to Page II-C-1 for approval requirements and exceptions to policy.

Authorized Signature and Date: The document is to be signed and dated by the supervisor, or when approved by the supervisor, any other authorized staff person, and distributed as detailed below.

Exception Approval: If the type of service or amounts authorized require an exception to policy, the handwritten initials of the approving authority must be placed here. Exceptions without the initials will be returned to the supervisor.

Distribution:
1. Billing Copy* - to the Payee
2. Financial Copy - to IVRS Financial section
3. Casefile Copy - to the clientôs casefile
4. Client Copy - to the client

*The payee is sent the original (Billing Copy) and as many photocopies as are determined to be necessary to have sufficient copies for the number of bills to be submitted. Example: Payee is to bill for five months rent, one month at a time - IVRS would send the original (Billing Copy) and four photocopies. If more copies are needed, the payee can photocopy their copy or request additional copies from you.

Section 2: BILLING/CHANGE

This section is only to be used for one of the following at a time: amendment, billing, cancellation, or medical. You must check only one of the items to indicate the action for which you are using this copy of the form:

- **Amendment**: An amendment should be used when there is a change in dollar amounts or dates. Work from a photocopy of the original **Do not amend dates to cross from September to October. See cancellation procedure. Also see cancellation procedure to change services.**

If the change is done when a billing is received, staff should approve the billing (see procedure for bill) and make the amendment on a photocopy of the original authorization.

Period: On a copy of the Casefile Copy of the authorization enter any changes in the Period section.

Services: Briefly explain what is being changed.

Amount: To increase the dollar amount of an already existing authorization, make a photocopy of the Casefile Copy of the authorization and enter the dollar amount of the increase on the photocopy in Section 2. After the increase, the total amount authorized should not exceed established limits without supervisory approval**.**

Transaction #: Enter the first three digits of the Transaction # of the authorization being amended. The Transaction # is found in the Vocational Rehabilitation Authorization Program (VRAP).

Payee Signature and Date: LEAVE BLANK

IVRS Approval and Date: Sign and date the photocopy with the changes entered and send it to Financial, after making a copy for the casefile, payee, and client. If change is done when billing is received, staple the amendment on top of the billing when sending to Financial.

- **Bill: This field should be checked to indicate that this is a claim on a previously authorized good or service:**

Period: The payee should enter the date the services started and the date they were completed. These must match the way in which the services were authorized (i.e., if the authorization was for ñxx weeks of maintenanceò, the billing must be by the week or multiples of weeks; it could not be for ñone monthò).

Services cannot be claimed for until they have been provided. If the authorization is to allow a third party to provide funds to a client for maintenance or transportation, once the third party has given the money to the client the service has been provided, even though the period in which the client is expected to expend the money has not yet ended. The dates used in this column must fall within the dates in the Period Covered section of this form.

All daily, weekly or monthly services must be claimed separately for June and July.

Services: The type or nature of the service provided should be indicated in this section and should agree with what was authorized.

Amount Billed: The amount charged for the service provided is entered. If it is different than called for in the Authorization Section, the staff member will need to review the instructions for Amendments and/or Cancellations.

Transaction #: Enter the first three digits of the transaction number of the authorization being claimed.

Payee Signature and Date: The payee must sign and date the form, unless there is an original invoice attached. On multiple claims, each must have an original signature or original invoice. If original invoice is attached, there is no need for payee to sign. Just write õoriginal invoice attachedò where payee would sign.

IVRS Approval and Date: An authorized staff person must indicate their approval of the payment of the claim by initialing and dating this section prior to sending the form to Financial for payment.

- **Cancellation:** Check this field if you want to decrease the amount of the authorization. Work from a photocopy of the original authorization.

Period: Enter the dates of the service being decreased.

Services: Briefly explain what is being changed.

Amount: To decrease the dollar amount of an already existing authorization, make a photocopy of the Casefile Copy of the authorization and enter the dollar amount of the decrease in this field on the photocopy. When more than one service is authorized, indicate the amount of change for each service.

If the casefile is still open and a refund is received, make a photocopy of the authorization to which the refund relates. On the photocopy do a cancellation for the refund amount and staple the refund check to the authorization with the cancellation on it. Enter the three digit Transaction number of the authorization being refunded.

If the change is done when a billing is received, staff should approve the billing (see procedure for bill) and make the cancellation on a photocopy of the original authorization.

Transaction #: Enter the first three digits of the Transaction # of the authorization being decreased.

Payee Signature and Date: Nothing needs to be entered here.

IVRS Approval and Date: Sign and date the photocopy with the decrease entered and send it to Financial, after making a copy for the casefile, payee, and client.

- **Medical:** Check this field if the service purchased is a diagnostic medical one in nature. This includes all medical information purchased for the purposes of diagnosis at any point in the rehabilitation process, including medical records, medical exams, and psychological records or exams.

The authorization and claim on medical diagnostic items are submitted and paid at the same time. Only send to Financial when Section 2 is completed with period billed, service provided, amount billed, and original payee signature or original invoice attached and IVRS approval and date. Place a copy in the casefile.

Transfer of Repossessed Client Equipment or Agency Surplus items:
The transfer of repossessed items or Agency surplus equipment to a client will be accomplished through the usual authorization channels and procedures. The R-450, authorization form, should be labeled as ñTransfer of Equipment:ò and contain or have attached an itemized list of the equipment being transferred. The name and case number of the client from whom the items were repossessed should be entered as the payee. List IVRS as the payee if the original client is unknown or if the equipment is from agency surplus.

The authorization is processed through the Financial Section in the normal manner. A copy is filed in the casefile of the client receiving the goods and a copy should be filed in the casefile of the person from whom the material was repossessed, if still in existence. A copy is also forwarded to the State Office Repossessed/Reissued Equipment file, Attn: Bill VanGundy.

DEFINITION OF SERVICE DATE WHICH INDICATES FISCAL YEAR

All daily, weekly, or monthly services must be authorized and claimed separately from June and July (State Fiscal Year) and September and October (Federal Fiscal Year). Below is information to help determine to which fiscal year an authorization should be charged.

Hourly or Daily: A separate authorization is required for services through September 30 than for October 1 and beyond. An authorization can cross June to July, but a separate billing is required for services through the end of June.

Weekly: If the majority of the last week of the last month of the federal fiscal year falls in that month, authorize for it out of the current fiscal year. If the majority of the last week of the last month of the fiscal year falls in the next month, authorize for it out of the next federal fiscal year. Only the claims need to be separated this way when crossing June to July.

Monthly: Authorizations written on a monthly basis must be split between September and October. Claims on monthly authorizations must also be split between June and July.

Tuition: The policy is to determine in which federal fiscal year the majority of the training period falls. It is written for that fiscal year. There may be occasions where it is necessary to split tuition services according to fiscal years.

One time purchase: Authorize a period of time that doesn't cross federal fiscal years.

Outcome based: Authorize for the entire potential period to be no later than September 30. Due to the nature of the outcomes in this type of service, all or part of the authorization may need to be cancelled later in the fiscal year and reauthorized for the following federal fiscal year.

Medical Records and Exams: This service is not considered to have been received until Field staff dates the medical billing upon review of the medical information received. That date will determine the fiscal year from which the money will be taken.