Rehabilitation Services: Restoration Services
Chapter 12

12.00 **Definition:** Physical and mental restoration services are provided to correct or substantially modify a physical or mental condition that is stable or slowly progressive. Examples include:

1. Surgery or treatment necessary to correct or substantially modify a physical or mental condition that constitutes a substantial impediment to employment,

2. Necessary hospitalization in connection with surgery or treatment,

3. Special services (including transplantation and dialysis), artificial kidneys, and supplies necessary for the treatment of individuals with end-stage renal disease,

4. Prosthetic and orthotic devices,

5. Eyeglasses and visual services.

6. Prescription drugs necessary to correct or treat a physical or mental condition that constitutes a substantial impediment to employment.

   a. The counselor should obtain a written report from the prescribing physician that details the purpose of the medication, length of projected use and any side effects. Questions regarding these reports may be discussed with the medical or psychological consultant. [Reference Section 12.01(4)]

   b. The counselor must determine whether comparable services and benefits are available under any program other than DVR to cover the costs of services. [Reference Chapter 9, Section 9.03]

12.01 **Medical, Dental, and Psychological Consultation**

1. Consultants are available in each area to assist the counselor in interpreting records and to provide advice regarding appropriate treatment.

2. Prior to treatment, medical, psychological, or dental consultation is required for extraordinary or experimental procedures or when required by the supervisor. [Reference Chapter 15] Consultation is available for all case questions and may be utilized by counselors, except as required above.

3. Eligibility for DVR, the nature and scope of services to be provided, and closure of the case are decisions that rest with the counselor. Consultants are available to assist the counselor in making these decisions but in no case will the consultant make the decision for the counselor.

4. Consultants may assist the counselor in:
a. interpreting medical, dental, or psychological reports.
b. determining the need for further diagnostics or for confirming the suitability of restorations as recommended by a qualified physician, dentist, or psychologist.
c. determining whether a physical or mental condition is chronic and stable or slowly progressive.
d. determining the implication of the applicant's physical or mental condition for rehabilitation potential.
e. determining the appropriate fees for medical, dental, or psychological procedures.
f. determining the best option for various medical procedures.
g. determining the most appropriate hospital and the most cost-efficient fee.
h. monitoring the average hospital per diem cost to assure that individuals are admitted and discharged as early as medically appropriate.
i. developing and maintaining relationships with the medical/psychological community large.
j. training staff in the medical/psychological aspects of disabilities.

5. In order to avoid even the appearance of a conflict of interest, consultation shall not occur with the actual provider of either a diagnostic or a treatment service unless no other provider is available.

6. The consultant will sign and date the consultation response. The minimal acceptable documentation is the completed consultation form. In some instances, a more thorough explanation in a narrative case entry may be required.

12.02 Treatment Provider

1. A provider, who provides physical and mental restoration services, must meet the DVR’s Standards for Vendor Qualifications prior to providing services to an individual.

12.03 Mental Health Services

1. DVR may pay for psychotherapy from the implementation of an IPE to receive services.

2. The counselor should consider the local community mental health center as a comparable service for long-term psychotherapy or when the individual no longer requires services from DVR to effect an employment outcome. [Reference DVR’s Guideline for the Use of Psychological Services]

12.04 Dental Services

1. Dental services may be provided to an individual if the individual’s dental condition is a substantial impediment to employment; is slowly progressive; is contributing significantly to the complication of another physical condition; and that condition constitutes a substantial vocational impediment.

2. Dental services are primarily provided to prevent the exacerbation or deterioration of a primary disability. Impairments that have the potential for being markedly affected by severe dental
conditions include, but are not limited to cardiac conditions, arthritis, diabetes, tuberculosis, and cleft palate.

3. The use of a dental condition as a primary disability is not prohibited but would be unusual and limited to the following instances:

   a. When the dental condition creates toxicity and causes physical symptoms in other systems of the body. This determination must be made by a physician and treatment approved by the medical consultant.

   b. When the dental condition results in a cosmetic problem that is severe enough to prevent an individual from obtaining or retaining a job in which the individual would be serving the public.

4. A dental condition may be classified as a secondary disability but only when it constitutes a substantial vocational impediment.

5. Preventive dental services may be provided only as an adjunct to dental treatment. A preventive dental service in and of itself is prohibited.

12.05 **Hearing Aids:** The choice of hearing aids shall be based on the recommendation of a licensed audiologist and the individual’s current hearing and speech capabilities. The selected hearing aid(s) must enable the individual to successfully complete the services in the IPE that are needed to secure, retain or regain employment.

1. If the individual prefers a more expensive hearing aid(s), the individual must pay the difference in cost between the required hearing aid(s) and the chosen one. (Reference [VR Guide On Serving Individuals Who Are Deaf, Late-Deafened, Hard-of-Hearing or Deaf-Blind](#) and [Guidelines on Hearing Loss, the Purchase of Hearing Aids, and Cochlear Implants](#))

2. The purchase of hearing aid(s) shall be based on the “Manufacturers' Single Unit Price”. The itemized invoice from the audiologist or hearing aid specialist must list the price of the hearing aid based on the “Manufacturer’s Single Unit Price Sheet” plus a DVR established professional fee. The DVR professional fee shall cover programming, fitting, dispensing, up to 2 follow-up visits after the initial 30-day trial period, earmold(s), and a 1 year warranty. The counselor must verify the hearing aid price with the “Manufacturer’s Single Unit Price” posted on DVR’s Intranet.

3. An Individual may purchase an additional warranty for the hearing aid(s).

12.06 **Bariatric Surgery**

1. DVR may consider providing bariatric surgery only if an individual’s weight constitutes a substantial impediment to employment. DVR may consider providing surgery to those individuals for whom it is medically necessary, because their medical condition will not allow them the time to lose weight by conservative approaches, (a balanced eating program and therapy for one year), or for whom more conservative approaches have failed to result in weight loss. The medical risks involved in the surgery and risk of surgery failure justify the imposition of the following conditions.
a. DVR recognizes that there are individuals for whom this surgery is not an option, but is necessary because of their medical condition and their need to lose weight very quickly. DVR encourages therapeutic counseling before and after the bariatric procedure to ensure the individual is thoroughly educated about the risks and the realities of living after the surgery.

i. The individual must provide documented evidence of vocational impairments that exist at the time of request. (anticipated impairments do not meet eligibility requirements);

ii. An individual requesting bariatric surgery as an elective procedure must provide records of nutritional counseling and attempted weight loss with a balanced diet (may be through a weight loss program or in consultation with a nutritionist or doctor) for at least one year prior to DVR considering sponsoring bariatric surgery. DVR may assist with the costs of counseling and weekly fees for weight loss programs;

iii. The individual must submit to psychological evaluation and therapeutic counseling, if recommended, regarding the individual’s current psychological status, expectations about the surgery and ability to maintain the extreme dietary discipline required after surgery. DVR may assist with these expenses if there are no comparable services and benefits available to the individual;

iv. The individual must present documented denial, reason for denial and appeals from insurance companies and/or other sources of comparable services and benefits available to the individual;

v. The individual must provide documentation from a doctor that the individual can safely undergo the surgery and be expected to return to employment; and

vi. The individual must agree to work with a nutritionist after surgery for six months. DVR may assist with these expenses if there are no comparable services and benefits available to the individual.

**Stevens Amendment**

The Florida Department of Education, Division of Vocational Rehabilitation (VR) is an equal opportunity employer. It is against the law for VR as a recipient of Federal financial assistance to discriminate against any individual in the United States on the basis of race, color, religion, sex, national origin, age, disability, political affiliation or belief. The application process used by VR to determine eligibility for services, any subsequent services and the entire VR process are subject to these non-discrimination requirements. Auxiliary aids and services are available upon request to individuals with disabilities. VR program receives 78.7 percent of its funding through a grant from the U.S. Department of Education. For the 2021 Federal fiscal year, the total amount of grant funds awarded were $176,836,896. The remaining 21.3 percent of the costs ($47,860,557) were funded by Florida State Appropriations. Revised October 2021.