

Quarterly All Vocational Rehabilitation Call

January 12, 2021 • 1:00 – 2:00 p.m. ET

Quarterly All VR Call Agenda

1. Welcome
2. TPM contract
 - Q&A for TPM only
3. Backlog status
4. 301 claims
 - Q&A for 301s only
5. Cost Formula training
6. IPEs
7. 590 denials
8. Reconsiderations
9. VR directory
10. Questions and Answers

Quarterly All Vocational Rehabilitation Call

301 PROCESS- BEGINNING TO END

- The Section 301 process starts with Field Offices (FOs)
- FOs are the point of contact for State Vocational Rehabilitation Agencies (SVRA)
- The FOs identify cases involving Vocational Rehabilitation (VR) or similar programs as part of a Medical Continuing Disability Review (CDR)
- FO puts in remark: “possible 301 – mm/dd/yy” and sends the case to Disability Determination Services (DDS)
- FOs route cases to DDS for medical determination

Quarterly All Vocational Rehabilitation Call 301 continued...

- DDS notifies FO of medical cessation via eDisability Collect System with CDR Cessation Added: “possible 301 beneficiary continuation”
- DDS annotates possible 301 eligibility on a medical cessation case with a “Y” in 301 field of cessation/ continuance of DIB or Blindness Determination and forms SSA-832 & SSA-883 & sometimes SSA-553

Social Security Administration		TITLE XVI	
CESSATION OR CONTINUANCE OF DISABILITY OR BLINDNESS DETERMINATION AND TRANSMITTAL		1. A. SOCIAL SECURITY NUMBER — —	
No further monies or other benefits may be paid out under this program unless this report is completed and filed as required by existing public law 93-233.			
1. B. TYPE CLAIM <input type="checkbox"/> DI <input type="checkbox"/> DS <input type="checkbox"/> DC <input type="checkbox"/> BI <input type="checkbox"/> BS <input type="checkbox"/> BC		1. C. OTHER ENTITLEMENT <input type="checkbox"/> TITLE II	
2. A. NAME OF PAYEE (IF ANY)		B. NAME OF DISABLED OR BLIND INDIVIDUAL	
3. ADDRESS		4. DATE OF BIRTH	5. DATE DISABILITY BEGAN
6. DO ADDRESS		7. DO CODE	DDS CODE
8. A. <input type="checkbox"/> INITIAL B. <input type="checkbox"/> RECON C. <input type="checkbox"/> DHU D. <input type="checkbox"/> HEARING E. <input type="checkbox"/> APPEALS COUNCIL F. <input type="checkbox"/> U.S. DISTRICT COURT G. <input type="checkbox"/> REOPENING			
9. UPON CONSIDERATION OF ALL FACTS, IT IS DETERMINED: <input type="checkbox"/> DISABILITY			

Social Security Administration			TITLE II	
CESSATION OR CONTINUANCE OF DISABILITY OR BLINDNESS DETERMINATION AND TRANSMITTAL			1. A. SOCIAL SECURITY NUMBER — — BIC	
No further monies or other benefits may be paid out under this program unless this report is completed and filed as required by existing public law 93-233.				
1. B. TYPE CLAIM <input type="checkbox"/> DIB <input type="checkbox"/> FZ <input type="checkbox"/> DWB <input type="checkbox"/> CDB <input type="checkbox"/> ESRD <input type="checkbox"/> HIB			1. C. OTHER ENTITLEMENT <input type="checkbox"/> TITLE II <input type="checkbox"/> TITLE XVI	
2. A. NAME OF PAYEE (IF ANY)			3. WE'S NAME (IF CDB OR DWB CLAIM)	
B. NAME OF DISABLED OR BLIND INDIVIDUAL			4. DATE OF BIRTH	5. DATE DISABILITY BEGAN
C. ADDRESS			6. DO ADDRESS	7. DO CODE DDS CODE
8. A. <input type="checkbox"/> INITIAL B. <input type="checkbox"/> RECON C. <input type="checkbox"/> DHU D. <input type="checkbox"/> HEARING E. <input type="checkbox"/> APPEALS COUNCIL F. <input type="checkbox"/> U.S. DISTRICT COURT G. <input type="checkbox"/> REOPENING				
9. UPON CONSIDERATION OF ALL FACTS, IT IS DETERMINED: <input type="checkbox"/> DISABILITY <input type="checkbox"/> IMPAIRMENT SEVERITY (EPE MEDICAL REVIEW ONLY)				
A. CONTINUES		MONTH, DAY, YEAR	I. 301 CASE	
B. CEASED			J. BLINDNESS	

Quarterly All Vocational Rehabilitation Call

301 continued...

- FO uses the **Development of Participation in Vocational or Similar Program Form (SSA-4290-F)** to develop VR participation for potential entitlement to 301 benefits.
- FO 301 development
- FO sends case to the Office of Disability Operations (ODO) by faxing potential section 301 case flag to ODO's Paperless Processing Center System (PPCS)

301 continued...

- SSA continues to pay benefits for a specific time period even when disability is no longer present and medical recovery is apparent but VR program participation is applicable
- ODO makes 301 determination as to claimant completion of VR program or continuation in program for a specific period of time, will increase the likelihood that the individual will not return to disability or blindness rolls –so we can have Savings to the Trust.

Quarterly All Vocational Rehabilitation Call **301 continued...**

- ODO receives 301 from FO
- T2 cases:
 - ODO checks the Master Beneficiary Record (MBR) for special message field about 301
 - Or MBR has remark: “301 determination pending- do not take action on medical cessation – mm/dd/yy”

Quarterly All Vocational Rehabilitation Call **301 continued...**

- T16 cases:
 - ODO checks the SSR for 301 remarks and vocational rehabilitation Plan (VP) diary
 - If there are no remarks or a diary is not present, ODO faxes servicing FO and input diary and updates remarks on SSR

Quarterly All Vocational Rehabilitation Call 301 continued...

- ODO reviews the SSA-4290-F and development obtained by the FO to verify that the beneficiary is in VR or similar program and meets the requirement of appropriate program of VR services

Social Security Administration				Form Approved OMB No. 0960-0282	
VOCATIONAL REHABILITATION "301" PROGRAM DEVELOPMENT					
PART I (To be completed by the State DDS)					
1. Beneficiary's Name (Last Name—First Name—Middle Initial)			2. Type of Claim <input type="checkbox"/> DI <input type="checkbox"/> SSI <input type="checkbox"/> CONCURRENT		
3. Beneficiary's SS No.:	4. Beneficiary's Date of Birth:	5. Wage Earner's SS No.: (If different from Beneficiary)			
		CDB: ___/___/___	DWB: ___/___/___		
6. Beneficiary's Address (Number and Street—City—State—Zip Code)				Telephone Number (include area code)	
7. Signature	Title	DDS	Code	Date	
				Telephone No. (include area code)	
PART II (To Be Completed By the State VR Agency)					

Quarterly All Vocational Rehabilitation Call 301 continued...

- ODO makes 301 determination
- Disability Examiner (DE) puts determination on SSA-553
- DE prepares and sends notice of allowance or denial of the 301 payment continuation to beneficiary

SOCIAL SECURITY ADMINISTRATION

SPECIAL DETERMINATION

OFFICE

NAME OF WAGE EARNER OR SELF EMPLOYED PERSON

SOCIAL SECURITY NUMBER

NAME OF CLAIMANT (if other than wage-earner)

RELATIONSHIP OF CLAIMANT

Quarterly All Vocational Rehabilitation Call **301 continued...**

- Title XVI 301 cases – Modernized Development Worksheet (MDW) is sent to FO with instructions
- Annotate 301 determination to the SSR remarks
- Create/update the vocational rehabilitation plan (VP) diary on SSR

Quarterly All Vocational Rehabilitation Call 301 continued...

- T2 301 cases, ODO:
 - Posts 301 determination to Disability Control File (DCF)
 - Creates 1-year diary from the current month to review 301 allowances case

Note: If beneficiary completes the VR or similar program before the one year diary matures, the VR or similar program will contact the FO, who will notify ODO by completing a Report of Contact Form (SSA-5002).

Form **SSA-5002** (07-2020) UF
Discontinue Prior Editions
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Report of Contact

Account Number and Symbol						
To:	<input type="checkbox"/> NE	<input type="checkbox"/> MAT	<input type="checkbox"/> SE	<input type="checkbox"/> GL	<input type="checkbox"/> WN	Name of Wager Earner or SE Person
	<input type="checkbox"/> MAM	<input type="checkbox"/> ODO	<input type="checkbox"/> OIO	<input type="checkbox"/> DDS		
Person(s) Contacted	<input type="checkbox"/> WE or SE Person	<input type="checkbox"/> Other (specify)				
Addresses						
Contact Made:						Date of Contact

Quarterly All Vocational Rehabilitation Call **301 continued...**

- If the beneficiary is participating in a VR program, the SVRA may be eligible for VR reimbursement
- ODO will email a copy of 4290-F5, SSA 553, SSA-833 or SSA-832 to:
 - ORDES OES mailbox- VR.301.claims@ssa.gov
- Note: ODO does not send 301 determination notices to SVRA

Quarterly All Vocational Rehabilitation Call **Acronyms**

- ODO- Office of Disability Operations
- FO- Field Office
- SVR- State Vocational Rehabilitation
- CDR- Continuing Disability Review
- DDS- Disability Determination Services
- DIB- Disability
- PPS- Paperless Processing System
- STF- Savings to the Trust Fund
- VP- Vocational Plan
- DE- Disability Examiner
- MDW- Modernized Development Worksheet
- DCF- Disability Control File

A group of five diverse people (three men and two women) are standing in a line, smiling and holding up large, colorful speech bubbles. From left to right: a man with a beard holding a purple cloud-shaped bubble, a woman holding a blue speech bubble, a man holding an orange rounded rectangular bubble, a woman holding a grey speech bubble, and a woman with glasses holding a teal speech bubble. The background is a plain, light-colored wall.

Questions?

Dial ***1** to add yourself to the queue for questions

Dial ***2** to remove yourself from the queue if your question has already been answered