**Cost Reimbursement Update**

Social Security provided three important reminders:

* SSA has received the monthly earnings information for the third quarter of 2015 and is now processing claims based on that information.
* State VR agencies must “mail” original claims for reimbursement to SSA. Mailing claims keeps all related information in one place and helps SSA process claims based on receipt dates. The VR Help Desk and Help Line should only be used to submit questions.
* ORDES is hosting two staff from Nebraska VR for an on-site training on cost reimbursement later this week. VR agencies interested in having staff receive similar training should contact Linda Custis ([Linda.Custis@ssa.gov](mailto:Linda.Custis@ssa.gov)).

**Ticket Portal**

Katie Striebinger announced that the most recent Portal release added the beneficiary’s resident state to the lists of “Beneficiaries Assigned/Formerly Assigned” to each agency. She noted that these lists can be downloaded and used to check for any potential discrepancies in the information the VR agency has on file and what is contained in the Ticket Portal. The Portal contains SSA’s master record for Ticket program transactions. She also noted that the “Check Ticket Assignment” function now provides more options under “More Actions” (e.g., Timely Progress Review information can now be accessed here). Portal functions have also been simplified to allow searches using SSNs.

**Q.** When will TPRs be available again? Currently there is a moratorium on TPRs. Not sure when they will restart.

**Q.** Is there any additional information on plans to allow electronic submissions of requests for reimbursements? Not at this time.

**Q.** What is the earliest age that a VR agency can submit a CR claim? For SSI recipients, age 16. For individuals receiving SSDI, age 18.

**Effective Practice Presentation**

Amy Porter, Commissioner of the Connecticut Department of Rehabilitation Services, and Cindy Gruman of the Lewin Group’s leadership team provided information on Connecticut's "evidence-based practice" results from a study on whether benefits counseling (BC) and vocational rehabilitation services (VR), alone, or in combination, have the most positive effect on employment outcomes and earnings. This topic was chosen due to the limited research on this topic and the assumption that VR and BC services are critical supports that produce the best results if coupled together. Using data from the CT general agency only, the study looked at individuals receiving BC only, VR only, and both BC and VR interventions from January 2002 to June 2008. It was limited to cases with pre-service data, intervention services in these three categories, and eight quarters of earnings data after case closure. This included a total of 5,675 individuals (1,169 BC-only; 3,292 VR-only; 1,214 both BC and VR). The finds of the study were mixed and included the following:

* Combination of BC and VR interventions produced most positive outcomes in terms of employment and earnings. The likelihood of employment increased and earnings rose for at least five quarters. There was no evidence that the order of the interventions made any difference in the outcomes.
* Those employed per-intervention were more likely to be employed post-intervention, making prior employment experience the strongest predictor of employment after the intervention.
* For those unemployed pre-intervention, half of the BC and VR both group gained employment vs. 37% of the BC-only group and 30% of the VR-only group.
* Results from BC-only and VR-only interventions declined as time passed after the intervention.
* Consumers under the age of 25 had the most significant increase in earnings after the intervention with less of a drop as time passed as compared to older consumers.

The presenters provided a cautionary note regarding the sustainability of gains over time regardless of the type of intervention. The drop in positive outcomes over time for all groups may necessitate a shift in focus on how to maintain the early positive results noted immediately after the intervention, regardless of the type of intervention. This note supports TPM’s efforts to encourage VR agencies to make Partnership Plus handoffs to ENs after VR case closure and during/after BC interventions.

Amy Porter noted that the results of BC and VR interventions ties back to the CR program. She reminded everyone that the CSAVR Spring conference (April 18-20, 2016 in Bethesda, MD) will include an updated training on the VR CR program (Tuesday, April 19th). Anyone interested in attending should contact David Leon at [David.Leon@DARS.virginia.gov](mailto:David.Leon@DARS.virginia.gov).

Access the complete report for this study at: <http://www.ct.gov/connect-ability/lib/connect-ability/research/Benefits_Counseling_Final_Report_Spring_2010.pdf>. Access the power point presentation by visiting: <https://yourtickettowork.com/web/ttw/events-archive#2015-National_Calls>

The full transcript and audio from the All VR Call are available at <https://yourtickettowork.com/web/ttw/events-archive>.

The next All VR Call will be held **Tuesday, February 9, at 3 pm ET**.