

Dear :

You have been certified by the Wisconsin Worker's Compensation Division to provide vocational rehabilitation services to injured workers in accordance with Wis Stats 102.61(1m) and DWD 80.49(6).

You have been certified by the Wisconsin Worker's Compensation Division to provide vocational rehabilitation services to injured workers in accordance with s. 102.61(1m) Wis. Stats. and DWD 80.49(6) Wis. Admin. Code. Please review the enclosed copy of the applicable statutes and administrative code, which define the vocational rehabilitation process for injured workers.

Your certification number is . Please include this number in future communications to the Worker's Compensation Division. Your certification is effective for three (3) years beginning .

When an injured worker selects you to provide rehabilitation services you must file a Notification of Service Form (WKC-10146) advising the worker's compensation insurance carrier or self-insured employer and the Worker's Compensation Division. A copy of the form is enclosed for your use.

As a certified private vocational rehabilitation counselor, you are required to file quarterly reports outlining services provided to worker's compensation claimants. Submit a completed quarterly report form for all claimants regardless of the length of time of your involvement. A copy of the Private Vocational Rehabilitation Services Quarterly Report (WKC-10369) form is enclosed.

Please note that while there is a service cost limit of \$1,820.00 per injury, requests can be made to the insurance carrier or self-insured employer to exceed this limit.

Please read these documents carefully. If you have any questions, contact a worker's compensation vocational rehabilitation specialist at (608) 261-8472 (press 4).

Sincerely,

Division of Worker's Compensation
Rehabilitation Specialist

Enclosures:

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