## VA Brain Injury Services (BIS) Program Focused Design Group Sub-Team: *Working Meeting with DMAS*

Meeting Information	
Meeting Name & Topic	Focused Program Design Sub-Team: Working Meeting with DMAS
Date & Time	March 1, 2023, 2:00 pm EST
Dial-In Information	Click here to join the meeting

Goals & Attachments	Meeting Participants (attendees marked *)			
Meeting Purpose/Objective:	Collaboration Team	State Agency	Consultants	
	Kara Beatty*	Ann Beven*	David Garbarino*	
1. Review feedback and ask questions for additional input on waiver	David DeBiasi*	Sara Benoit	Sharon Hicks*	
services definitions.	Kathleen Hardesty	Brian Campbell*	Roya Lackey	
2. Europein and a fer neutral of recommendations for neuropehological	Victoria (Tori) Harding*	Kay Karmarkar	Grant Lindman*	
2. Explain process for next set of recommendations for neurobehavioral unit scheduled to be sent to participants Thursday 3/2/2023 morning.	Dana Larson*	Christiane (Chris) Miller*	Marybeth McCaffrey*	
	Linsey Mangilit*	Rhonda Thissen*	Lisa McDowell*	
Pre-meeting Preparation Required: Submit comments	Bernice Marcopulos	Angie Vardell	Poorna Suresh*	
	Anne McDonnell*	John Morgan		
Attachments/Handouts: Synthesis of Waiver Services Comments; March 1	Colleen McKay	Courtney Richter		
Meeting presentation, March 1 agenda	Cara Meixner*			
Next Meeting: Merch 15, 2 pm	Jamie Swann*			
Next Meeting: March 15, 3 pm	Ivan Velickovic*			
	Monique Wilson*			
	Michelle Witt			
	Tammy Whitlock			
	Jason Young*			
	-			

Slides	Time	Lead	Торіс	Recommendations
1-5	5″	Marybeth	Welcome; meeting purpose	Information shared via slides
6-9	5″	Marybeth	Introductions & Roles	Information shared on the slides; meeting attendees are listed above
10-12	5″	Marybeth	Timelines	Information shared via slides
13-14	10"	Marybeth	Overview of input received	Information shared via slides
16-17	30"	Lisa	Review 3 questions for discussion	Information shared via slides; responses below and in comment synthesis document
			1. <u>Cognitive Rehabilitation</u> : Please provide	PARTICIPANT: I'm looking for clarification on whether this is intended to be a
			more details on these "standalone"	HCBS 1:1 service in the home or intended to be an add-on community-based



program models and how they differ from the proposed service definition	service. I will send the NJ and PA materials for consideration. It's offered in 15- minute increments and up to a day. DMAS: Ideally, we would like to offer this in all settings. We reviewed the waiver documents for NJ and PA but they lacked the detail you're providing. We would like to review any material you can share so we can understand the NJ and PA
2. <u>Cognitive Rehabilitation</u> : For what reasons should someone be considered "at risk"? Cog Rehab is available for everyone with the potential to improve their cognitive functioning, not just those at risk. DMAS will review and determine whether revisions are needed for clarity.	approach better. PARTICIPANT: I am happy it will be available to those at risk and not at risk; two states have passed bills (TX and MA) which require insurers to pay for cognitive rehabilitation. They may have helpful language for consideration.
3. <u>General Recommendation:</u> DMAS would like input on whether other community engagement is recommended (e.g., Adult Day). Consider overlap with independent living supports.	<ul> <li>DMAS: for DD waiver we try to think about community engagement at all times of day (1:3 ratio) to go out into the community. Not confined to hours of 9-3 every day but include evenings and weekends too.</li> <li>PARTICIPANTS: <ul> <li>As people age, clubhouse and day programs are not meeting their needs; we're not really sure what's needed.</li> <li>Both community engagement and day programs are needed. People need a safe place to build confidence and skills (day program) as well as community when they're ready.</li> <li>The BI Provider Alliance has a lot of issues with clubhouse being in the waiver, as it's currently structured. I just wanted to affirm it's a conversation we've been having about broadening to other day options.</li> </ul> </li> <li>DMAS: we started from the surveys; and we'll think of things more broadly; it can be tweaked to meet the needs of this population, doesn't have to match DD exactly. These are all things we can consider.</li> </ul> PARTICIPANTS: <ul> <li>This may be an important area to query with the focus groups for family and lived experience.</li> </ul>

				• We need clarity on what "day services" means, and how this is inclusive of cognitive rehabilitation; both day supports, and cognitive rehabilitation can be delivered in the community
18-30	45"	Marybeth	Walk through DMAS decisions in response to workgroup input	Club House (slide 20) PARTICIPANTS:• Consensus in BI community is that clubhouses should not be part of the waiver.• In defining the clubhouse services, we need to be mindful to look at the issues 
				<ul> <li><u>Consultation Services</u> (slide 21)</li> <li>PARTICIPANT: Comes back to what we know and what we don't. Even though state plan we have trouble accessing those benefits</li> <li>DMAS: The comprehensive addictions benefit is what would be used.</li> <li>PARTICIPANT: That is good</li> </ul>
				Employment Services (slide 22) PARTICIPANT: These are services that already exist with providers and funding etc. Our thought is why are we duplicating services that are already available

				and not focusing on those services that we don't have. This goes to clubhouse as well. Family Counseling and Training Services (slide 23)
				PARTICIPANTS:
				• Could DMAS provide the group with more description and details on "aligning with other Medicaid services"?
				• There are married people both of which are on the waivers.
				DMAS: we define families relatively broadly, and it also depends on how you are applying the term family
				PARTICIPANT: Why is the term family being used and not more broadly like "caregiver"?
30-31	10"	Lisa	Next steps	<ul> <li>DMAS will make decisions about waiver service revisions based on input</li> <li>DMAS will share revised waiver services definitions with you and other stakeholders</li> </ul>
				• Later this week, you will receive draft neurobehavioral unit definition for review and comment by middle of next week.
				• We hope to use the same approach as today at the March 15 meeting
				• Share comments synthesis and slides in advance, discuss remaining issues at the meeting

	Action Items					
#	Action Item	Due Date	Status	Responsible		
1	Send revised eligibility decisions to workgroup	TBD	In progress	Consultants		
2	Send draft service definitions to workgroup	Thursday, Feb 16 5 pm	Complete	Consultants		
3	Workgroup send responses to Grant Lindman	Wednesday, Feb 22 5pm	Complete	Workgroup		
4	Share March 1 meeting prep materials	Tuesday, Feb 28, a.m.	Complete	DMAS		
5	Send revised waiver service definitions to workgroup	TBD		Consultants		
6	Send draft Neurobehavioral unit definition to workgroup	Friday, March 3 noon		Consultants		
7	Workgroup send responses to Grant Lindman	Wednesday, March 8 5pm		Workgroup		
8	Share March 15 meeting prep materials	Tuesday, March 14, a.m.		DMAS		