Testimony before the Appropriations and Human Services Committees

Renewal of the Acquired Brain Injury II Waiver and Amendment of the Acquired Brain Injury Waiver

August 13, 2019

Good afternoon Senators Osten, Formica, Moore, and Logan, Representatives Walker, Lavielle, Abercrombie, and Case and honorable members of the Appropriations and Human Services Committees. My name is Deidre Gifford and I am the Commissioner Designee for the Department of Social Services (DSS). I am pleased to be here with Kathy Bruni, who serves as Director in the Community Options Unit at DSS.

Under the provisions of section 17b-8 of the Connecticut General Statutes, we are here today to seek your support to renew DSS’ Acquired Brain Injury II (ABI II) waiver and to amend the Acquired Brain Injury I (ABI I) waiver. As Connecticut’s single state agency for the Medicaid program, DSS has administrative authority over these waivers.

The current Acquired Brain Injury II waiver expires on November 30, 2019. The Centers for Medicare and Medicaid Services (CMS) requires submission of renewal applications no less than 90 days prior to the expiration of the involved waiver.

The Notice of Intent to renew the waiver was published on the Department’s website and in the Connecticut Law Journal on June 18, 2019, requesting comments for a 30-day period. The Department has provided the Committees with the comments that were received.

Under the ABI I and ABI II waivers, DSS provides services to individuals who have experienced a traumatic or acquired brain injury. There are no proposed changes to eligibility requirements or payment rates.

DSS proposes the following changes to both the ABI I and ABI II waivers:

- Adding a Board Certified Behavioral Analyst credential to the list of authorized providers of cognitive behavioral services;
- Adding an annual training requirement of six (6) hours of continuing education for Independent Living Skills Training (ILST) providers;
• Adding Certified Adult Day Health Provider to the list of provider types that may provide ABI Group Day Services – note that Adult Day Health is an existing service in the waiver and is not being modified in this renewal;

• Removing the historical requirement that providers have CARF or JCAHO certifications to become providers of ABI Group Day - this will allow providers without these certifications, who otherwise meet requirements, to provide the service; and

• Updating the service name from “Specialized Medical Equipment and Supplies” to “Assistive Technology” to more accurately describe the service being provided and aligning the service limit with other Medicaid waiver programs. ABI Waiver participants typically receive technology items such as modified computers with specific software to assist with cognitive deficits, smart phones, tablets and medication reminder boxes. The new “Assistive Technology” service will not permit the replacement of smartphones, tablets, or computers at the Department’s expense within a three-year period from delivery to the participant. Further, the $10,400 per person annual limit for this service will be replaced with a $15,000 limit over three years to align with other Medicaid waiver programs, Money Follows the Person and Community First Choice.

Specific to the ABI II waiver, 10 reserve slots are being added for current ABI I waiver participants who are unable to self-direct their Personal Care Services and wish to transition to the ABI II waiver in order to obtain access to the agency-based Personal Care Services that are available under that waiver.

The state assures CMS that these waivers will be cost neutral. This means that the expenditures for home and community-based services under the waivers will be less than the costs of institutional care. The changes that are being proposed to these waivers do not impact the state appropriation for ABI Waiver I or II.

DSS respectfully requests that the Committees approve the request to renew the ABI II waiver for a period of five years and to amend the ABI I waiver. We would be happy to answer any questions that you may have.