

WHAT IS THE TRAUMATIC BRAIN AND SPINAL CORD INJURY MEDICAID WAIVER PROGRAM?

The Traumatic Brain and Spinal Cord Injury Medicaid Waiver Program (Waiver Program) provides home-and community-based health care services for individuals age 18 - 64 with traumatic brain injuries or spinal cord injuries.

These services allow people with such injuries to remain living in their homes rather than in a nursing home or a similar institution. The Waiver Program is administered by the State of Florida.

WHO IS ELIGIBLE FOR THE WAIVER PROGRAM?

To be enrolled in the Waiver Program you must:

- have a traumatic brain or spinal cord injury
- and
- be enrolled in Medicaid OR be determined eligible for Medicaid by the Department of Children and Families, and be at risk of possible placement in a nursing home or

HOW DO YOU APPLY FOR THESE SERVICES?

You or someone you know must call the Brain and Spinal Cord Injury Central Registry at 1-800-342-0778. Within ten days, someone should contact you to set up an appointment for an assessment of your needs. The caseworker should also develop a Plan of Care that outlines the needed services and a budget for the cost of these services.

You must be eligible for Medicaid to get services through the Waiver Program.



If you are not already enrolled in Medicaid

You must apply at the Department of Children and Families (DCF). Make sure that you check the box for Home-and Community-Based Services (HCBS) in the upper left corner of the application.

This application is also called a DCF Request for Assistance form. Request that a date be stamped on your copy of the application.



If you are already enrolled in Medicaid

You must fill out a new application and specifically request HCBS in order to receive services through the Waiver Program. Request that a date be stamped on your copy of the application.

Your brain and spinal cord injury case-worker may be able to assist you with your Medicaid application.



WHAT CAN YOU DO IF YOU HAVE A PROBLEM GETTING SERVICES?

If you are placed on a waiting list, denied services, or if you do not receive a written decision within 90 days of submitting your application, you may have certain legal rights to challenge the decision. In general, you have a right to:

- apply for services
- have a correct and timely decision made about your eligibility
- receive services within a reasonable amount of time



You also have a right to request a fair hearing if your request for services is denied or not acted upon with reasonable promptness, or if your services are suspended, reduced or terminated.

WAIVER PROGRAM SERVICES

Personal Care Assistance: assistance with daily living activities such as personal hygiene, dressing, meal preparation, housekeeping.

Attendant Care: skilled nursing, health-related supports.

Companion Care: non-medical care, supervision and socialization, light housekeeping and meal preparation.

Life Skills Training: teaching skills necessary to resume life after injury.

Behavioral Programming: developing strategies to decrease maladaptive behaviors.

Personal Adjustment Counseling: therapeutic services aimed at sustaining the individual in the community.

Community Support Coordination: monitoring the client's care plan and case management.

Rehab Engineering Evaluation: assessment of person's need for technology.

Assistive Technology and Adaptive Equipment: products used to increase, maintain or improve function of the individual's functional capabilities.

Environmental Accessibility Adaptation: basic essential modifications to client's home/environment.

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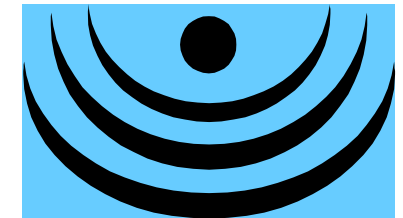
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The Traumatic Brain and Spinal Cord Injury Medicaid Waiver Program



Legal Rights to Home-and Community Based Healthcare Services for Adults with Brain or Spinal Cord Injuries