

SENATE STAFF ANALYSIS AND ECONOMIC IMPACT STATEMENT

(This document is based only on the provisions contained in the legislation as of the latest date listed below.)

BILL: SB 1096

SPONSOR: Senator Forman

SUBJECT: Traumatic Brain Injury

DATE: March 2, 1999 REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	<u>Barnes</u>	<u>Whiddon</u>	<u>CF</u>	<u>Favorable</u>
2.	_____	_____	<u>FP</u>	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

I. Summary:

Senate Bill 1096 would authorize the Department of Children and Family Services (the department) to establish a program of long-term supports and services, contingent upon specific legislative appropriations, for persons who have sustained brain injuries and whose needs cannot be met through other programs related to brain injury located in the Department of Health, Department of Labor and Employment Security, or the Department of Children and Family Services. The determination of eligibility process for this program must ensure that the person is ineligible for other programs or has needs that cannot be met through other programs of the department or through other agencies for which he or she is eligible.

This bill creates section 402.06, Florida Statutes.

II. Present Situation:

According to the Brain Injury Association of Florida, the most common causes of brain injury include motor vehicle crash, abuse and violence, physical assault, gunshot wound, sport-related accidents, and falls. Brain injuries can result in serious cognitive, physical, and/or psychosocial impairments in: balance and movement; solving problems; organizing thoughts; memory (short and long term); communicating or relating to other persons; controlling emotions; and experiencing the sense of smell, hearing, taste, touch, and sight.

The Department of Children and Family Services reports that no single state agency is responsible for serving persons 18 years of age and older with traumatic brain injuries who need long-term supports and services. The department reports that most of these survivors with unmet long-term care needs are 18 years of age or older. Even though the association estimates that 64 percent of infant brain injuries are caused by child abuse, most children with traumatic brain injury are served by Children's Medical Services (CMS) within the Department of Health. Children under age 18 years who sustain a moderate to severe traumatic brain injury are referred to one of the 10 Children's Medical Services' nurses throughout the state who provide pediatric services for the

Brain and Spinal Cord Injury Program (BSCIP) in the Division of Vocational Rehabilitation, Department of Labor and Employment Security. These CMS nurses provide case management services to the child and family for several months after the child's injury. Children who have long-term needs are referred to the regular Children's Medical Services program. Most children with traumatic brain injury who have long-term needs are served by CMS because they usually meet Medicaid eligibility criteria.

Persons who are 18 years of age or older who have sustained a moderate to severe traumatic brain injury are referred to the BSCIP in Vocational Rehabilitation and evaluated to determine if there is a reasonable expectation that the person will benefit from services based upon the goal of community reintegration. If eligible, the program may facilitate the provision of post acute inpatient and outpatient rehabilitation services, transitional living services, adaptive modifications and equipment, rehabilitation engineering, and other services necessary for community reintegration. Once a person has been determined to no longer meet the criteria for BSCIP, the program provides no more supports or services to the person or the family to sustain the living situation.

According to the Brain Injury Association of Florida, approximately 15,000 Floridians survive a traumatic brain injury each year. During FY 1996-97, BSCIP reports 2,100 persons who sustained a moderate to severe traumatic brain injury were reported to their central registry. Of that total, BSCIP served approximately 500 persons who were medically stable and were reasonably expected to benefit from rehabilitation services based upon the goal of community reintegration. The program provides acute inpatient and outpatient rehabilitation services, transitional living services, adaptive equipment, rehabilitative engineering services, modifications, and other services necessary for a community reintegration outcome.

After a moderate to severe traumatic brain injury, a person will never return fully to his or her former degree of functioning. Once persons have been reintegrated and are living in their own homes or with friends or family, the challenge is to maintain them in the community and keep their living situations stable. Families need varying degrees of long term supports and services. Needs range from intermittent assistance with daily living, structured daily activities, 24-hour supervision, and long-term residential care. Community supports that help a person remain at home or with their family include services such as personal assistance services, companion services, behavioral training, respite care, time and money management training, basic living skills, family counseling, and personal problem-solving.

Persons with impulsive or destructive behavior as a result of a brain injury are particularly difficult to serve. It is estimated by BSCIP that approximately 50 persons per year have serious neurobehavioral problems and require frequent and intensely supervised services in a structured environment. These persons typically exhibit inappropriate and disruptive behaviors (combative, physically and verbally aggressive, occasionally violent, subject to impulsive and possibly illegal behaviors without understanding or even considering the consequences of their actions.) Without some assistance, these persons are at risk of being court ordered to the Department of Children and Family Services for placement in a more expensive residential mental health or developmental services facility. Staff in mental health and developmental services facilities usually do not have the necessary skill and expertise to effectively meet the needs of clients with serious brain injury.

The General Appropriations Act for FY 1998-99 appropriated \$1,253,331 from the Brain and Spinal Cord Injury Rehabilitation Trust Fund to be used by the Vocational Rehabilitation program to establish a Medicaid home and community based waiver program for persons with traumatic brain injuries and persons with spinal cord injuries. The Agency for Health Care Administration and the Division of Vocational Rehabilitation, Department of Labor and Employment Security, were notified on January 19, 1999, that the federal Health Care Financing Administration has approved the Medicaid home and community based waiver for persons with traumatic brain injuries and persons with spinal cord injuries. The waiver program will provide long term supports and services to approximately 200 persons who meet nursing home level of care for an average annual cost of \$14,000 per person. The department anticipates that most of these funds will serve persons with spinal cord injuries. Even with the Medicaid waiver program, many persons with traumatic brain injuries will not be served.

III. Effect of Proposed Changes:

SB 1096 creates s. 402.09, F.S., authorizing the Department of Children and Family Services to establish a program of long-term supports and services for persons who have sustained brain injuries and whose needs cannot be met through other programs related to brain injury located in the Department of Health, Department of Labor and Employment Security, or the Department of Children and Family Services. This program would be the program of last resort for persons who have sustained traumatic brain injuries. The bill specifies that this program is contingent upon specific legislative appropriations and that the determination of eligibility process for this program must ensure that the person is ineligible for other programs or has needs that cannot be met through other programs of the department or through other agencies for which he or she is eligible.

The bill does not define or describe the long-term supports and services that would be delivered to this population. According to the department, some of the long-term services needed by persons with traumatic brain injury include: family respite, behavior management, supported employment, and personal assistance. The bill does not specify whether the department would operate programs or facilities or would purchase these long-term supports and services. The bill states, however, that these supports and services may be purchased by the department and states that the program is intended to prevent inappropriate residential and institutional placements.

The bill directs the department to adopt rules for implementing and administering the program and establishing eligibility criteria for persons applying for and receiving services from the program.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

V. Economic Impact and Fiscal Note:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

SB 1096 could offset certain costs for care and supports that are now being paid by the family.

C. Government Sector Impact:

The department estimates that SB 1096 would cost approximately \$6,766,158 annually. The following table displays by service component resources needed for those persons whose needs cannot be met through the Brain and Spinal Cord Injury Program or the Medicaid Home and Community Based Waiver:

Service Component	Cost
Provide specialized behavioral residential supports to 50 adult clients at an average annual cost of \$60,000 per client who are inappropriate for the BSCIP because the severity of their injury prohibits obtaining employment.	\$ 3,000,000
Eight Family Support Centers (\$60,000 per center annually to provide information, advocacy, training, supports and services).	\$480,000
Provide community supports for 400 persons and families statewide at an average cost of \$8,000 per person (50 persons served by each Family Support Office).	\$3,200,000
Department Administration (2 FTE)	\$86,158
TOTAL	\$6,766,158

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Amendments:

None.

This Senate staff analysis does not reflect the intent or official position of the bill's sponsor or the Florida Senate.
