

**State of Vermont  
Division of Disability and Aging Services  
TBI Program**

**SERVICE DEFINITIONS**

[All services are provided through State of Vermont approved provider agencies]

**Case Management:**

Service coordination is the primary function of case management and will include securing, developing, implementing, coordinating and monitoring of a comprehensive therapeutic program provided to the individual and as identified in the Individual Service Plan (ISP) and the Financial Plan of Care (FPC).

Case Management required training and experience: A Bachelor of Arts or Science in a relevant discipline, or licensing as a Registered Nurse; a minimum of two years experience working in a relevant community service setting; and demonstrable experience, knowledge and skills specific to working with individuals with traumatic brain injury, and completed the required TBI pre-service training.

On a case-by-case basis, the Department of Disabilities, Aging, and Independent Living / Division of Disability and Aging Services may approve staff to provide services when they have an equivalent combination of education, experience, and skill specific to working with individuals with TBI. The approved TBI provider agency shall maintain documentation of the State's approval of such a variance.

**Rehabilitation Services:**

Rehabilitation services for consumers will promote independent living and re-integration into the community, and will include daily training and support. The Life Skills Aides (LSA) trained to implement Individual Service Plans (ISP) will work with the consumer on a one-to-one basis, providing training in specific activities of daily living in all necessary settings. LSAs, through the supervision of the case manager, will carry out the specific therapeutic program that will be designed in consultation (when appropriate) with licensed speech, physical and occupational therapists, physicians, psychologist, vocational counselors, educators, family members, and others experienced in serving individuals with a traumatic brain injury.

**Community Support:**

Community Support is designed to promote and foster independence by assisting the consumer to achieve his/her optimal level of physical, cognitive, and behavioral functions within the context of the consumer, family, school and community. This service may be provided in a family setting, group home, supervised apartment, or in the consumer's own apartment. Some consumers are unable to return to the home or family setting where they lived before their injury. Under such circumstances, the provider agency will assist the individual in selecting an appropriate residential setting. The caregiver, responsible for 24-hour care and supervision, will receive training

specific to the needs of the consumer. Respite will be provided to the caregiver based on need, as identified in the Individual Service Plan (ISP).

**Environmental and Assistive Technology Services:**

Environmental and Assistive Technology Services improve the functional independence of consumers. These supports which are determined to be necessary may include home modifications, services/supports, equipment and/or devices. These purchases maybe one time in nature or made available on a per month rental basis.

Home modification will be in accordance with state and local building codes. All accessibility renovations will meet the requirements of the Federal and Vermont Fair Housing Act Guidelines and the Americans with Disabilities Accessibility Guidelines.

**Crisis Support:**

Crisis Support is an array of services and supports short-term in nature that assist a consumer to resolve a behavioral or emotional crisis safely in their community. This system includes professional one-on-one support and 24-hour staffing and case management services.

**Respite Services:**

Contracted Community Support Providers that provide 24-hour care and supervision to a consumer are eligible to receive respite services to maximize the effectiveness of the residential placement.

Payment will not be made for services furnished by the consumer's parent, step-parent or adoptive parent; by the consumer's spouse, domestic partner or legal guardian; or by siblings under the age of eighteen (18).

**Psychology & Counseling Supports:**

This support provides intensive one-on-one counseling, evaluation, monitoring, support, and medication review and instruction. This service is provided by a psychiatrist, psychologist, and/or individuals with Masters degree in psychotherapy or counseling. All service providers must be licensed and have experience and an expertise in traumatic brain injury.

**Employment Supports:**

Employment Support consists of services that assist a consumer to obtain and maintain individual employment in regular work settings. Employment Support includes activities needed to access employment including assessment, job development, supervision and training. Employment Support also includes activities to sustain paid work by the consumer, including job coaching, off-site support and consultation with employers. However, work services will not pay for normal supervisory activities expected of all employers as part of a business setting.

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Documentation will be maintained in the file of each individual receiving work supports identifying that the service is not otherwise available under a program funded under the Rehabilitation Act of 1973 or P.L. 94-142 (IDEA)

Claims will not be approved for incentive payments, subsidies, or unrelated vocational training expenses such as the following:

- Incentive payments made to an employer to encourage or subsidize employer's participation in a supported employment program.
- Payments that are passed through to individuals receiving work supports.
- Payments for vocational training that are not directly related to a consumer's work supports.
- Payments for supports provided in sheltered work environments (those group environments requiring a sheltered workshop and/or work activity certificate).
- Payments for supports provided in segregated work crews designed specifically for people with disabilities, even if these crews operate in the community.

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**CASE MANAGEMENT**

**Description:**

Case managers are responsible for securing and coordinating appropriate services for consumers. Service coordination is the primary function of case management.

1. Case management services will include the following:
  - A. Development, implementation, coordination and monitoring of comprehensive services provided to the individual as identified by the Individual Service Plan (ISP) and the Financial Plan of Care (FPC).
  - B. Coordination of comprehensive services prior to a consumer's discharge from a facility or admission to the program. This will include a review of medical documentation, individual assessments, and attendance to care conferences. Proposed living arrangements and staffing patterns must also be evaluated.
  - C. Secure necessary services which could allow the individual to remain in his/her own home.
  - D. Monitor the quality of care provided. Individualized program outcomes shall be evaluated quarterly utilizing the progress scale to complete the Rehabilitation Quarterly or Long Term Semi-Annual Evaluation.
  - E. Modify services in the ISP as necessary. Maximize the use of natural and generic community and school resources to meet the consumer's needs.
  - F. Supervise Life Skills Aides (LSAs) and the schedule of daily rehabilitation activities.
  - G. Provide supports to the consumer, his/her family, the caregivers, and other agency staff providing services.
  - H. Collaborate with schools to coordinate a comprehensive program and provide the schools with the consultation required to deliver appropriate services when applicable.
  - I. Monitor level of all services provided and billed by the agency to ensure optimal use of approved level of services. If level of services provided is significantly less than the amount approved by the TBI Program

Supervisor, the Program Supervisor should be contacted for discussion and/or revision of the Financial Plan of Care.

- J. Develop a Care Conference Team. The team will be comprised of the consumer, guardian, case manager, appropriate consultants, and caregivers. This may also include LSAs, educational personnel, TBI Program Supervisor, a Vocational Rehabilitation Counselor, primary care physician, psychiatrist, therapist, and other professionals with expertise in traumatic brain injury. This team shall meet once a month or more often if deemed necessary.

**Standards:**

1. Case Management.

- A. Required training and experience: A Bachelor of Arts or Science in a relevant discipline, or licensing as a Registered Nurse; a minimum of two years experience working in a relevant community service setting; and demonstrable experience, knowledge and skills specific to working with individuals with traumatic brain injury, and completed the required TBI pre-service training.

On a case-by-case basis, the Department of Disabilities, Aging and Independent Living / Division of Disability and Aging Services may approve staff to provide services when they have an equivalent combination of education, experience, and skill specific to working with individuals with TBI. The approved TBI provider agency shall maintain documentation of the State's approval of such a variance.

- B. Case managers will be employed, trained, and supervised by the TBI Program approved provider agency. The agency is responsible for assuring the availability of case managers to effectively manage the Individual Service Plan (See Case Manager Job Description for details).
- C. Case managers will complete and/or monitor the following documentation:
  - (1) Independent Living Assessment (ILA)
  - (2) Home Evaluation in accordance with DDAS Housing Standards
  - (3) Rehabilitation Quarterly or Long Term Semi-Annual Evaluation
  - (4) Financial Plan of Care (FPC)
  - (5) Individual Service Plan (ISP)
  - (6) Life Skills Aide Report (daily or weekly)
  - (7) Case Management Log
  - (8) Caregiver Log
  - (9) Care Conference Minutes
  - (10) A weekly activities schedule

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**REHABILITATION SERVICES**

**Description:**

Rehabilitation services for consumers will promote independent living and re-integration into the community, and will include daily training and support. The Life Skills Aides (LSA) trained to implement Individual Service Plans (ISP) will work with the consumer on a one-to-one basis, providing training in specific activities of daily living in all necessary settings. LSAs, through the supervision of the case manager, will carry out the specific therapeutic programs that will be designed in consultation (when appropriate) with licensed speech, physical and occupational therapists, physicians, psychologist, vocational counselors, educators, family members, and others experienced in serving individuals with a traumatic brain injury.

The work of the LSA will be a unique component to the program as it emphasizes continuous integration of daily skills and routines within the consumer's residential and community setting. LSAs will focus on the comprehensive physical, emotional, cognitive and social needs of the consumer through a holistic approach.

**Standards:**

1. LSAs shall be 18 years or older; with a minimum of a high school diploma or GED and, have completed mandatory training in traumatic brain injury. (See LSA Job Description)
2. LSAs will receive training specific to the consumer's needs from the provider agency.
3. LSAs will be hired, trained, supervised, and paid by the Provider Agency.

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**COMMUNITY SUPPORT**

**Program Description:**

Community Support is designed to promote and foster independence by assisting the consumer to achieve his/her optimal level of physical, cognitive, and behavioral functions within the context of the consumer, family, school and community. This service may be provided in a family setting, group home, supervised apartment, or in the consumer's own apartment. Some consumers are unable to return to the home or family setting where they lived before their injury. Under such circumstances, the provider agency will assist the individual in selecting an appropriate residential setting. The caregiver, responsible for 24-hour care and supervision, will receive training specific to the needs of the consumer. Respite will be provided to the caregiver based on need, as identified in the Individual Service Plan (ISP).

**Standards:**

1. The caregiver will own their home; or, will have the approval of the landlord if the living space is leased or rented.
  - A. A home serving three or more individuals with traumatic brain injury will require licensing by the state of Vermont as a community care home.
  - B. If a home is not licensed and Community Support is to be provided, it is required that the provider agency will be in compliance with the DDAS Housing Standards procedure.
2. A private room, which is accessible to meet the needs of the consumer, should be available unless the consumer agrees otherwise.
3. The caregiver must complete the TBI pre-service training.
4. The caregiver will provide 24-hour care and supervision including active participation in the consumer's daily rehabilitation program. The caregiver will assure that a phone is available, all necessary appointments are kept; and, will be available to attend and participate in monthly care conferences  
(See Caregiver Functions and Standards for additional requirements)
5. The caregiver must have the capacity to transport individuals to appointments and community settings as indicated by the Individual Service Plan.

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**ENVIRONMENTAL AND ASSISTIVE TECHNOLOGY SERVICES**

**Description:**

Environmental and Assistive Technology Services can improve the functional independence of consumers. These supports which are determined to be necessary may include home modifications, services/supports, equipment and/or devices. These purchases maybe one time in nature or made available on a per month rental basis.

Reimbursement for this service will be made only for modification and equipment, which are not currently available under the Vermont State Medicaid Plan. Eligible items may include, but are not limited to, the following:

- Durable Medical Equipment (e.g., Touch Talkers, shower commode chairs)
- Safety devices (e.g., grab bars, intercom systems, motion detectors)
- Physical endurance equipment as prescribed by physician under supervision of an appropriate therapeutic discipline (e.g., weights, stair-stepper, small exercise equipment), tape recorder and tape, alarm clock.
- Accessibility and memory devices and equipment (e.g., ramps, grab bars, tape recorders, alarm clocks, other home modifications)

**Standards:**

1. Home modification will be in accordance with state and local building codes. All accessibility renovations will meet the requirements of the Federal and Vermont Fair Housing Act Guidelines and the Americans with Disabilities Accessibility Guidelines.
2. Prior authorization is required from the TBI Program Supervisor or their designee.
3. A prior authorization request must originate from the TBI Provider Agency, and should include but not limited to:
  - Consumer name
  - Description of modification / equipment / service requested, e.g.; brochure
  - Purpose
  - Cost
  - Length of service/support

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**CRISIS SUPPORT**

**Program Description:**

Crisis Support is an array of services and supports short-term in nature that assist a consumer to resolve a severe behavioral or emotional crisis safely in their community. This system includes 24-hour professional one-on-one support staffing and case management services.

**Standards:**

1. Professional one-on-one-support and 24-hour staffing and case management services is provided by trained Life Skills Aides and Case Managers (see TBI Program Job Descriptions), or other professionals trained in TBI, and behavioral management issues. Crisis Support is developed and managed by case managers and oversight and consultation by a physician or a psychiatrist.
2. Provider Agencies may contract with other appropriate agencies to provide Crisis Support such as mental health providers.
3. Crisis Support is not provided in hospital or institutional settings such as skilled nursing facilities.
4. Prior authorization is required for utilization of this service. If the TBI Program Supervisor or their designee is unavailable, up to 2 days of support will be approved if ordered by a physician. All preceding days will require authorization from the TBI Program Supervisor or their designee. The TBI Program Supervisor or their designee must be notified as soon as possible of the use of this service.
5. Prior authorization request must originate from the TBI provider agency and should include but is not limited to:
  - Provider of Crisis Support
  - Consumer
  - General description of the crisis
  - Management plan
  - Place of support
  - Number of days requested

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**RESPIRE**

**Description:**

Contracted Community Support Providers that provide 24-hour care and supervision to a consumer are eligible to receive respite services to maximize the effectiveness of the residential placement.

**Standards:**

1. Payment will not be made for services furnished by the consumer's parent, step-parent or adoptive parent; by the consumer's spouse, domestic partner or legal guardian; or by siblings under the age of eighteen (18).
2. Respite is provided through the provider agency. Individuals providing respite services must complete the TBI pre-service training, have prior experience working with individuals with traumatic brain injury, or experience working with individuals with other cognitive, physical and behavioral difficulties.
3. Primary caregivers are expected to utilize two days of respite per month.
4. Respite maybe provided in the individual's home or place of residence, private home of a respite caregiver, a foster home, or other non-institutional location. Provider agency should ensure the safety and accessibility of the respite home.

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**PSYCHOLOGY & COUNSELING SUPPORTS**

**Program Description:**

This support specifically provides intensive one-on-one counseling, evaluation, monitoring, support, and medication review and instruction. This service is provided by individuals licensed as a psychiatrist, psychologist, and/or with a Masters degree in psychotherapy or counseling. All service providers must have experience and an expertise in traumatic brain injury.

**Standard:**

1. This service is provided by individuals licensed in Vermont as a psychiatrist, psychologist, and/or with a masters in psychotherapy or counseling.
2. All providers of Psychology & Counseling Supports must have documented experience and expertise in traumatic brain injury.
3. Prior authorization is required for utilization of this service from the TBI Program Supervisor or their designee.
4. Prior authorization request must originate from the TBI Provider Agency and should include but not limited to:
  - Consumers name,
  - Purpose of support,
  - Frequency,
  - Documentation that other funding sources are unavailable,
  - Primary physician recommendation,
  - Qualifications of therapist to include:
    - Therapist name
    - Vermont license number/certification documentation
    - A summary of TBI experience & expertise

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**EMPLOYMENT SUPPORT**

**Description:**

Employment Support will assist the consumer to obtain and maintain employer paid competitive employment\* in integrated work settings in his/her own community. Employment supports will be provided primarily by Life Skills Aides (LSAs) who have received Supported Employment training. Employment activities will include job coaching, on- and off-site support, and consultation with employers.

**Standards:**

1. In order to receive payment for Employment Support, the provider agency must receive prior approval from the TBI Program Supervisor or their designee.

The request will include:

- Consumer name
- Vocational Rehabilitation (VR) Counselor's contact information
- A written vocational plan or Vocational Rehabilitation Individualized Plan for Employment (IPE) developed in conjunction with rehabilitation team members, the consumer, his/her family, and a VR Counselor.

The plan will include:

- ◆ Job preferences
- ◆ Job site / situational assessments
- ◆ Medically related documentation / evaluations e.g.; neuropsychological, seating, mobility, augmentative communication, etc.
- ◆ Strategies for job development
- ◆ On- and off-site counseling and support needs
- ◆ Training needs (plans for incorporating natural supports and or long-term supports)
- ◆ Plans for fading paid support
- ◆ Long-term support plan (if applicable)

**\*\*Note\*\*** Social Security consultation and training must be provided to the consumer and his/her family, as appropriate, during the development of the plan.

2. Persons who provide employment support must meet the LSA criteria and receive Supported Employment training. Additionally, agencies will ensure staff providing employment support will receive appropriate vocational and supported employment training.

3. The LSA will be hired, trained, supervised, and paid by the provider agency.
4. The provider agency must provide or coordinate transportation to all necessary appointments and employment activities as identified in the vocational plan.
5. Employment Support funds will not be approved for incentive payments, subsidies or unrelated vocational training expenses such as:
  - Incentive payments made to an employer to encourage or subsidize employer's participation in a supported employment program.
  - Payments that are passed through to individuals receiving work supports.
  - Payments for vocational training that are not directly related to an individual's work supports.
  - Payments for supports provided in sheltered workshop work environments (those group activities requiring a sheltered workshop and/or work activity certificate).
  - Payments for supports provided in segregated work crews designed specifically for people with disabilities, even if these crews operate in the community.

**Key Definitions in the amended Federal Regulations:**

**\*Competitive Employment:** Employment must provide full-time or part-time work. Hourly goals for weekly employment are determined on an individual basis. The person with a disability in supported employment must be paid wages on a basis consistent with wages paid to non-disabled workers with similar job functions and must be made in accordance with the Fair Labor Standards Act.

Individualized goals for hours of weekly employment must be established and gradually increased as a component of the Individualized Plan for Employment (IPE).