

**Traumatic Brain Injury Services Coordinating Council
Meeting Minutes
September 26, 2019; 10:35 am – 2:50 pm
One Commerce Plaza, 99 Washington Avenue, Albany, NY
16th Floor, Conference Room 1613**

Topic	Discussion	Action/Next Steps/Who/When
Attendance	<p>Council Members Present: Nina Baumbach, Megan Clothier, Crystal Collins, Michael Davison (Vice Chair), Brent Feuz, Michael Kaplen (Chair), Maxine Smalling, Cliff Hymowitz, Paul Novak, Earl Schmidt, Dr. Jeffrey Bazarian, Lana Earle</p> <p>Council Members Absent: Kenneth Ingenito, Jennifer Semonite</p> <p>DOH Staff: Maribeth Gnozzio, Teri Schmidt, Anna Ko, Stephen Casscles (Legal Affairs), Carla Nazaire</p>	
Welcome and Introductions	<p>The meeting was called to order at 10:35am; Michael Kaplen, Chair, presided over the meeting. M. Kaplen indicated that he would leave the meeting mid-day for another appointment.</p> <p>M. Kaplen: Confirmed there was sufficient membership to meet the quorum (9 Council members present in the room).</p>	
Review and Approval of 6/26/19 TBISCC Meeting Minutes	<p>M. Kaplen introduced the minutes for the June 26, 2019 meeting for comment. C. Hymowitz requested an invitation for Emily Childs from Fort Drum be added to an upcoming meeting agenda. He stated she has a lot of valuable information for the Council. He also proposed that discussion about “life outside TBI waiver services” be added to the next agenda.</p> <p>M. Davison made a motion to vote on the minutes for the June 26, 2019 meeting. C. Hymowitz seconded the motion. The motion to approve the June 26, 2019 minutes was approved by a vote of all present members in favor.</p>	
Out of State Placements and Reparation	<p>Anne Kelsey, PADD Program, presented an Introduction to Disability Rights New York and their work on Out-of-State Placement of Individuals with TBI.</p> <p>PowerPoint presentation was circulated to the TBISCC membership and public attendees.</p> <p>A. Kelsey established that New Yorkers with Traumatic Brain Injury residing in out-of-state facilities are mostly residing in facilities in Massachusetts. M. Kaplen asked if there are sites outside of Massachusetts and A. Kelsey posited that there are some individuals also residing in New Jersey, Pennsylvania, but the majority are in Massachusetts. P. Novak inquired about how the monitoring visits were conducted. A. Kelsey presented that DRNY representatives meet with social workers and discharge planners to identify facility resources and services. They examine the access to community resources, get a tour of the wing accompanied by staff, and meet with any residents who would like to speak with them privately. They find that most residents are happy and willing to discuss the status of their living arrangements. M. Davison asked if the facilities assume guardianship of residents, A. Kelsey said that most of the time the facilities are not the guardian of the individual but often serve as the representative payee. M. Smalling requested</p>	

**Traumatic Brain Injury Services Coordinating Council
Meeting Minutes
September 26, 2019; 10:35 am – 2:50 pm
One Commerce Plaza, 99 Washington Avenue, Albany, NY
16th Floor, Conference Room 1613**

	<p>information about the tool used when doing the visits. A. Kelsey responded that she will ask if she is able to share that information. M. Clothier asked if they monitor that individuals get the services that were identified as needs upon admission to the facility. A. Kelsey responded that the facility has an assessment process upon admission of a new resident. DRNY requests those records upon their arrival at the facility. Dr. Bazarian inquired about the factors driving the discussion about repatriation. M. Kaplen asked if the Health Department ever looked at the cost of out-of-state placement vs. the cost of a group home with 24-hour overnight supervision. L. Earle responded that she was not aware of such a comparative study. She offered to investigate discussing costs with Massachusetts and compare that information to in-state data; however, resources to address a project of this scope are always a challenge. A. Kelsey indicated that she is familiar with the Massachusetts system and that she is aware that the state has two waivers. One waiver is similar to the TBI waiver, but the other is for more complex needs and serves a smaller population. S. Casscles called attention to a housekeeping matter stating that N. Baumbach and M. Clothier joined the meeting, making member attendance 11. M. Kaplen announced that he must leave early and handed over the chair to Vice Chair M. Davison. M. Kaplen motioned to officially appoint Dr. Bazarian as the chair of the Concussion Management workgroup. M. Davison seconded the motion. 11 members voted in favor of appointing Dr. Bazarian the Chair of the Concussion Management Workgroup.</p>	
<p>Access to Group Homes for Individuals with TBI</p>	<p>Joseph Abdulla distributed a handout to use during his presentation. He presented information about the model of a four (4) person group home. Mr. Abdulla indicated that his research established that the average cost per person in this model is estimated to be \$92,400 with additional startup costs funded by OPWDD. Generally, the plan to develop such a home is to purchase a home in a neighborhood and match individuals with similar interests to live together. J. Abdulla's data presented that it is estimated to cost \$341 per day per person to provide residential care. However, people with higher needs or transitioning out of an institution are estimated to cost approximately \$564 per person per day. B. Gnozzio indicated that 1915(c) waiver criteria require that the aggregate statewide cost of waiver services cannot exceed the cost of comparable institutional care. P. Novak asked if a demonstration project could be recommended by the TBISCC. B. Gnozzio indicated that there are other service models that could be considered and presented. In the past, a group home model of co-located OPWDD and TBI waiver participants has not yielded the best results. J. Abdulla presented that the need is apparent and it is time to take action regarding developing residential services. C. Hymowitz asserted that Head Injury Association in Long Island has condos known as Blue Ridge Condos where multiple people with disabilities in the complex have independent apartments. This type of model could also be considered. B. Gnozzio presented that HCBS Settings Rule must also be considered when discussing and developing group homes. She also indicated that transitional living arrangements in nursing homes also need to be explored. She recommended that the Council explore having representatives from Northeast and Richmond Center present at a future Council meeting. B. Gnozzio also suggested that a presentation about the Department of Health's HCBS settings transition plan would also be beneficial to the group. That project is assigned to Mark Kissinger in the Commissioner's Office.</p>	

**Traumatic Brain Injury Services Coordinating Council
Meeting Minutes
September 26, 2019; 10:35 am – 2:50 pm
One Commerce Plaza, 99 Washington Avenue, Albany, NY
16th Floor, Conference Room 1613**

<p>Expansion of Independent Living Skills Training (ILST) Services Discussion/ Committee Recommendation</p>	<p>M. Clothier presented a letter she wrote to M. Kaplen. Additionally, C. Hymowitz reviewed the service guidelines for Independent Living Skills Training (ILST) and discussed changes that were approved in the most recent waiver application. B. Gnozzio presented that there are amendments to the service definition that must be made. There is also confusion about the service limits for Community Integration Counseling (CIC) and ILST. A. Ko from DOH presented the definition of ILST in the 1915(c) waiver application to clarify. Language was added that the provider must use the UAS-NY as part of the assessment because it was taking too long to get initial assessments completed and service delivery was delayed. NYSDOH recognizes that revisions to staff qualifications in the application need to be made in order to increase the number of qualified applicants. B. Gnozzio noted that there may be service coordinators within the state plan that will be available to waiver participants. B. Gnozzio also stated that there may be duplication in the duties completed by an ILST vs. the HCSS staff and this issue needs to be reviewed. M. Clothier expressed that additional training for staff is also needed. Tracey Clothier asked when the amended staff qualifications will go into effect and acknowledged that these workers do not get paid enough. B. Gnozzio presented that rates are not set by the Waiver Unit and establishing individual staff salaries is at the discretion of the employer. The provider bills for a specific service rate (hourly or by unit) established by DOH. B. Gnozzio shared that NYSDOH did not set service limits but that they were dictated by CMS. The rate structure for waiver services is submitted in the waiver application and approved by CMS. Additionally, CMS imposed specific service limits within the service definition. This process will be discussed at a future meeting. M. Clothier and C. Hymowitz will collaborate on this issue.</p>	
<p>Break for lunch 12:50 pm – 1:41 pm</p>		
<p>Concussion Management Discussion/ Formation of Committee</p>	<p>J. Bazarian, MD announced the creation of the Concussion Management Advisory Committee within the TBISCC. S. Casscles presented the legislative language establishing the criteria for the committee and shared that members from the Council may be appointed to the committee but that the legislation also establishes that representatives outside the Council may be included in the workgroup. The membership of the committee cannot exceed twelve (12). Dr. Bazarian asked if any members of the Council wanted to be included in the workgroup or have recommendations for membership. C. Hymowitz recommended Emily Child from the Department of Defense. L. Earle suggested that raising public awareness about concussion management should be a goal for the workgroup and the efforts of the group should be shared with the public. L. Earle presented that the Department has available resources to assist with this endeavor. B. Gnozzio asked if issues related to children would be included in the scope of the workgroup. B. Feuz responded that the State Department of Education has several initiatives for children. P. Novak presented that he believes children's issues should be included. Dr. Bazarian agreed the focus on public awareness is important. B. Gnozzio recommended that BIANYS play an active role in the group. S. Casscles advised that he believes the statute only covers sports injuries, but he will complete a review of the Bill Jacket to get more information about the intent of the legislation. He then suggested that the Council begin establishing the committee membership. L. Earle advised that any appointment outside of the Council requires the Commissioner's review and approval and she will facilitate that</p>	

**Traumatic Brain Injury Services Coordinating Council
Meeting Minutes
September 26, 2019; 10:35 am – 2:50 pm
One Commerce Plaza, 99 Washington Avenue, Albany, NY
16th Floor, Conference Room 1613**

	<p>process. C. Hymowitz, P. Novak and B. Feuz asked to be considered. Ann Marie Todd also asked to participate as a member of the public. A motion to nominate Council members: C. Hymowitz, P. Novak and B. Feuz was made. Dr. Bazarian seconded the motion. A vote of nine (9) in favor of the nominees affirmed the committee members. S. Casscles presented that the committee can request information and consult with anyone, but only appointed members of the TBISCC can make recommendations to the Department. Dr. Bazarian requested that any interested individuals present their names to the Council and L. Earle will work to facilitate their membership on the committee to the Commissioner’s Office. Committee meetings will be held outside of TBISCC meetings and Dr. Bazarian will schedule the meetings. It can be either in person or over conference calls. L. Earle indicated that DOH will help in scheduling conference calls and utilizing the Department resources. Dr. Bazarian indicated that a first step would be to confirm the purpose of the committee to fully understand the goals and outcomes of the workgroup. S. Casscles reiterated he will obtain the Bill Jacket in an effort to clarify the mission of the group.</p>	
Member Updates	<p>L. Earle did not have any updates. B. Gnozzio asked Dr. Bazarian to update the group about his blood testing research. He indicated that there will soon be a way to replace diagnosing brain injuries using blood testing as an alternative to traditional CT scans. B. Feuz proposed reinstating the little blue cards in EDs again for post-concussion management and resources.</p> <p>B. Gnozzio drafted a letter of introduction for B. Feuz to go to the Regional Emergency Medical Centers advising he is a representative of the TBISCC. M. Smalling from the Office of Mental Health discussed working closely with the Richmond Center. They have beds and are taking patients. She presented that due to a collaborative effort of professionals, a very difficult to serve individual with significant medical needs will now be receiving needed services and supports.</p>	
Public Comment	<p>L. Earle commented that this was an extremely productive and effective meeting and that she believes the committee is moving forward. M. Eisenhauer suggested that the discussion regarding group homes should continue by inviting service providers to a meeting to further discuss group home development and educate the Council about the process and associated issues.</p> <p>L. Earle stated that she can try to find someone specifically at OPWDD to come talk to the group. M. Davison presented that looking at other group home models is important, but a lot of ‘homework’ and education must be done first.</p>	
Adjournment	<p>M. Davison introduced a motion to adjourn which was seconded by B. Feuz. The meeting was adjourned at 2:50PM.</p>	