

Department of Planning and Budget 2005 Fiscal Impact Statement

1. Bill Number: HB2826

House of Origin ☐ Introduced ☐ Substitute ☒ Engrossed
Second House ☐ In Committee ☐ Substitute ☐ Enrolled

2. Patron: Orrock

3. Committee: Appropriations

4. Title: Brain Injury Waiver; licensing authority

5. Summary/Purpose: This bill authorizes the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS) to license providers of services under the Medicaid Brain Injury Waiver and providers of residential services for persons with brain injury. The bill defines "brain injury" for waiver purposes and requires the Department of Rehabilitative Services (DRS) to collaborate with DMHMRSAS in activities related to the licensing of Brain Injury Waiver service providers. The bill requires the State Board of Mental Health, Mental Retardation and Substance Abuse Services to promulgate necessary regulations within 280 days of enactment.

6. Fiscal Impact Estimates are:

6a. Expenditure Impact:

<i>Fiscal Year</i>	<i>Dollars</i>	<i>Positions</i>	<i>Fund</i>
2004-05	\$0	0.0	
2005-06	\$84,575	1.0	GF
2006-07	\$79,875	1.0	GF
2007-08	\$79,875	1.0	GF
2008-09	\$79,875	1.0	GF
2009-10	\$79,875	1.0	GF

7. Budget amendment necessary: Yes. Item 333 (Regulation of Public Facilities and Services), Subprogram 561-03 (Regulation of Health Care Service Providers)

8. Fiscal implications: This bill was developed in cooperation with a Medicaid task force convened in response to a request from the Disability Commission to develop a brain injury waiver. There was broad involvement including advocates, providers, Department of Medical Assistance Services staff, and families. The brain injury waiver requires licensing for Medicaid funding. Although DMHMRSAS currently licenses services for individuals whose brain injury occurred prior to age 22 (through the Individuals and Families Developmental Disabilities Services (IFDDS) Waiver), no agency is currently designated to license the services for the extended age cohort. The Department of Social Services licenses some residential brain injury services but this would no longer be appropriate under this legislation.

Additional licensing staff in DMHMRSAS will be needed to promulgate the regulations and implement licensing of Brain Injury Waiver services and residential brain injury services. Current staff cannot absorb additional workload associated with this bill's requirements. It is unknown the current number of providers that will need to be licensed under the Brain Injury Waiver. However, it is expected that this new waiver program will be an area of growth in new providers based on potential service proposals submitted to the Disability Commission during the task force studies. To initially develop and promulgate the regulations and subsequently license providers for brain injury services, it is estimated that 1.0 FTE (Pay band 5) will be needed. Licensing caseloads for other services continue to grow and there are no staff resources available for the additional workload requirements of this bill.

FY2006 includes salary and fringes at \$76,875; equipment at \$4,700; and, travel at \$3,000. Costs for subsequent years include salary and fringes and travel costs.

9. Specific agency or political subdivisions affected: Department of Mental Health, Mental Retardation and Substance Abuse Services, Department of Rehabilitative Services

10. Technical amendment necessary: No

11. Other comments: The Commonwealth currently does not have a brain injury waiver. However, in order for DMAS to get the brain injury waiver request approved by the federal government, there must be a licensing mechanism in place. This legislation is a companion to Senate Bill 1237.

Date: 02/24/05 /eee

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cc: Secretary of Health and Human Resources