



MARCH 2021

**KMAP GENERAL BULLETIN 21021**

## **Brain Injury Rehabilitation Facility (BIRF) Eligibility Processes and Procedures**

Effective March 1, 2021, the following eligibility process and procedures have been established for Brain Injury Rehabilitation Facility (BIRF) providers:

**A. Brain Injury Rehabilitation Facility (BIRF) Eligibility Policy**

1. Brain Injury Rehabilitation Facility (BIRF) services are available to individuals who have experienced a brain injury and meet Kansas Department of Aging and Disability Services (KDADS) Home and Community Based Services (HCBS) Brain Injury (BI) waiver program requirements.
  - (a) Individuals seeking admission to a BIRF must meet the age requirement of age 16 up to and including 64 years of age.
  - (b) Referrals to a BIRF may be from any of the individual's following:
    - i. Treating physician
    - ii. Managed Care Organization (MCO)
    - iii. Licensed social worker
2. The BIRF-qualifying brain injury must have occurred within the six months prior to the requested BIRF admission.
  - (a) Exceptions may be made for individuals that have a BIRF-qualifying brain injury that occurred more than 6 months before the date of application:
    - i. Such individuals must have proof showing the medical necessity for inpatient care for brain injury rehabilitation.
    - ii. The individual's MCO (if one has been selected) must approve of the exception request before submitting to the KDADS BI program manager for approval.
    - iii. Exceptions are subject to approval by the KDADS BI program manager.

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## Brain Injury Rehabilitation Facility (BIRF) Eligibility Processes and Procedures continued

3. BIRF admission and services shall only be available to individuals who have met the following criteria:
  - (a) Current Functional Eligibility for the BI waiver;
  - (b) BIRF Admission Requirement Documentation Packet;
    - i. Documentation showing the medical necessity for inpatient care for brain injury rehabilitation.
    - ii. Financial eligibility and presumptive medical disability determination or have an application for financial eligibility with the Kansas Department of Health and Environment (KDHE); The BIRF shall have sole financial responsibility for services provided to individuals admitted with pending Medicaid eligibility determination who are not subsequently found eligible for Medicaid.
    - iii. Services provided by a BIRF cannot be funded through Medicaid HCBS funding.
  - (c) Documentation showing an individual’s choice for admission to BIRF as opposed to the HCBS program.
4. KDADS, in collaboration with the MCO, shall be the operating agency for the BIRF program in the State of Kansas, and shall provide oversight for the following BIRF processes in compliance with state regulations and procedure requirements:
  - (a) Admission, continued-stay, temporary stay, out-of-state services, discharge and/or transitions
5. BIRFs are not exempt from mandatory reporting requirements in accordance with established statutes and regulations.

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### B. Eligibility Determination Process

1. KDADS HCBS BI program manager shall make BIRF eligibility determination upon receipt of the following documents:

(a) BIRF Referral Packet:

- i. Completed and signed KDADS BIRF referral form; the form may be requested from the HCBS BI program manager.
- ii. Documentation showing the medical necessity for inpatient care for brain injury rehabilitation and that the qualifying BI occurred within 6 months prior to the requested BIRF admission.
- iii. BIRF Intake Screening Form
- iv. Proof of a pending financial eligibility determination with KDHE.
- v. Activated Durable Power of Attorney for Health Care (DPOA for HC) or Legal guardianship documentation (when applicable).

(b) Completed functional eligibility with the following documents submitted in the delegated state management information system of record:

- i. Medical documentation of brain injury signed by a qualified medical professional or brain injury program eligibility attestation form signed by a qualified medical professional.
- ii. Signed Level of Care (LOC) Outcome Form.
- iii. ES-3160 Notification of KanCare HCBS services form (completed sections I and II).
- iv. Signed KDADS Release of Information (ROI) Form.

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2. KDADS HCBS BI program manager shall make BIRF eligibility determination per the following procedure:
  - (a) BIRF Referral Packet shall be sent to KDADS HCBS BI program manager through any of the following methods:
    - i. Designated email address
    - ii. Designated fax number
    - iii. Designated state management information system
3. Within 5 business days of receiving all required documentation, KDADS BI program manager shall complete a review of the documentation, and forward the following using electronic methods:
  - (a) A Notice of Action (NOA) with eligibility determination to the individual, the MCO and the BIRF;
  - (b) Completed BIRF Referral Form to the BIRF;
  - (c) 3160 with eligibility determination to KDHE, the MCO, and individual's designated Aging and Disability Resource Center (ADRC).
4. Upon the KDADS BI program manager determination of eligibility for a BIRF admission, the MCO and the BIRF shall coordinate and facilitate the individual's admission.
5. Within 2 business days of an individual's admission into a BIRF, the BIRF shall send a copy of the Form MS-2126 Notification of Facility Admission/Discharge to the BI program manager and KDHE.

### C. Program/Continued-Stay in a BIRF

1. When an individual is accepted into a BIRF, a person-centered planning team must be formed.
  - (a) The team shall, at a minimum, comprise of the following:
    - i. The individual, their legal representative, or activated DPOA for HC; or anyone designated by the individual.

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## Brain Injury Rehabilitation Facility (BIRF) Eligibility Processes and Procedures continued

- ii. The BIRF
- iii. The MCO
- 2. A minimum of 4 hours per day of treatment in a BIRF must be devoted to the active treatment of an individual in the BIRF.
  - (a) Active treatment shall include, but not be limited to, the following:
    - i. Physical therapy, occupational therapy, speech therapy, behavioral and cognitive therapy, independent/transitional living skills, Activities of Daily Living (ADLs), Instrumental Activities of Daily Living (IADLs), social skills, etc.
    - ii. These services must be listed in the individual’s person-centered plan.
- 3. Every individual in a BIRF must maintain a current HCBS BI functional eligibility assessment.
  - (a) An assessment shall be completed at least every 365 days by the designated ADRC.
- 4. At least every 90 days, every individual in a BIRF must have a review of their BIRF continued-stay, services received, and options/choices with their person-centered planning team.
  - (a) A review report must be generated and sent to the KDADS HCBS BI program manager, and the KDADS HCBS Institution Transition specialist using the designated means for reporting.
    - i. The MCO shall be responsible for generating and sending this report.
  - (b) The individual’s plans must be reviewed sooner if/when there is a significant change in an individual’s BIRF services.

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## Brain Injury Rehabilitation Facility (BIRF) Eligibility Processes and Procedures continued

5. Community integration opportunities:
  - (a) The BIRF, alongside the person-centered planning team, shall collaborate in identifying opportunities for individuals in the BIRF to engage in community activities that may include, but shall not be limited to:
    - i. Increased time out of the BIRF;
    - ii. Opportunities to practice transitional living skills or to seek opportunities within the community; and
    - iii. Activities that support the individual’s choice, habilitative and rehabilitation goals, in the least restrictive environment.
  - (b) Person-centered collaboration for the individual’s integration into their community must be documented in the individual’s person-centered plan.

### D. Temporary Stay

1. An individual currently receiving HCBS-BI waiver services may be approved for admission to a BIRF for a temporary stay by KDADS, upon a request by the individual’s MCO.
  - (a) A request for admission to a BIRF for a temporary stay must meet the admission requirement in this defined in sections A-D of this bulletin.
  - (b) A temporary stay shall only be authorized if the individual has experienced a significant decline/impairment in functional ability.
    - i. A qualified medical professional must document such decline/impairment in functional ability.
  - (c) A temporary stay may only be granted if an individual’s restorative and rehabilitative needs cannot be provided or are not available in the individual’s home and community.
  - (d) The maximum temporary stay in a BIRF is the month of admission and the following two months.

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- i. KDADS BI program manager may grant an exception to the maximum temporary stay duration upon request.
    - ii. The individual’s person-centered planning team must authorize such a request.
    - iii. KDADS may request additional documentation from a qualified medical professional indicating rehabilitative and restorative progress and medically necessary inpatient care.
  - (e) If KDADS declines a request for exception to the maximum duration for temporary stay,
    - i. the individual alongside the person-centered planning team shall facilitate the individual’s transition to the HCBS BI waiver to continue to receive services.
  - (f) At the end of the temporary stay,
    - i. the individual alongside the person-centered planning team shall facilitate the individual’s transition to the HCBS BI waiver to continue to receive services.

### E. Out-of-State Services

- 1. BIRF services may be authorized for out-of-state institutions if all in-state options have been explored and exhausted.
  - (a) The out-of-state placement must be requested by the individual’s MCO.
    - i. Kansas Medical Assistance Program (KMAP) enrollment of an out-of-state institution is required for MCOs to pay for BIRF services provided.

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- (b) Requests for out-of-state placement shall be submitted and vetted by the KDADS HCBS BI program manager; and
  - (c) The BI program manager shall present out-of-state placement requests to the state HCBS director who shall review, approve or deny such application.
    - i. Upon approval or denial of the request, the BI program manager shall send an NOA to the individual.
    - ii. The NOA shall contain an appeal process in the event of a denied out-of-state placement request.
  - (d) Out-of-state placements processes shall be completed per policy and procedural requirements for BIRF admissions, as defined in sections A-D of this bulletin.
2. If an individual wants to return from an out-of-state BIRF to the State of Kansas, the MCO shall work with the individual, guardian (if applicable), the BIRF, and KDADS Institutional Transition specialist to develop a plan to transition to services provided in the state.
  3. Placement in a state hospital, skilled nursing, or assisted living shall not be used as an alternative to out-of-state placement.
  4. Out-of-state placements shall follow processes and requirements for the BIRF program and continued-stay as defined in sections A-D of this bulletin.
- F. Discharge and/or Transition to HCBS Waiver Services**
1. Every individual, upon admission into a BIRF, shall immediately have a transition plan in progress.
    - (a) Upon admission, the person-centered planning team shall collaborate in developing a transition plan.

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- i. The transition plan shall be person-centered.
  - ii. Transition Planning shall be documented in the quarterly report required in this defined in sections A-D of this bulletin.
- (b) The person-centered planning team, through the individual's MCO, shall coordinate with KDADS HCBS Institutional Transition specialist and the BI Waiver program manager with the individual's transition plan at least 30 days before the planned date of discharge.
  - i. KDADS HCBS Institutional Transition specialist and the BI program manager shall be notified at the onset of and updated throughout, the transition planning process.
  - ii. During transition, the MCO shall send a completed Form 3160, and the provisional plan of care to the BI program manager.

**G. The transition from BIRF to the HCBS BI, or any other HCBS waiver program, shall be completed per current/approved HCBS Institution Transition process.**

- 1. For additional details regarding the HCBS institutional transition policies, refer to the applicable waiver program under the **Final Policies** heading on the [Policies](#) page of the KDADS website.

*Note:* The effective date of the policy is March 1, 2021. The implementation of State policy by the KanCare Managed Care Organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The KanCare Open Claims Resolution Log on the KMAP [Bulletins](#) page documents the MCO system status for policy implementation and any associated reprocessing completion dates, once the policy is implemented.

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