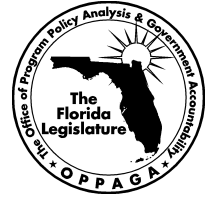




Office of Program Policy Analysis And Government Accountability



John W. Turcotte, Director

January 1998

Follow-Up Report on the Review of the Brain and Spinal Cord Injury Program Administered by the Department of Labor and Employment Security

Abstract

The Department of Labor and Employment Security has taken steps to implement some of our recommendations and has worked to:

- identify and return third party reimbursements to the Program;
- pursue short-term grants; and
- seek budget authority to fund a Medicaid waiver.

However, to fully maximize program funding and client outcomes, further action will be needed to implement our recommendations to:

- work with County Clerks to ensure the receipt of program revenues;
- adopt a seamless approach for delivering services; and
- assess services that could be provided and clients that could be served under current funding limitations.

Review

In accordance with s. 11.45(7)(f), F.S., this follow-up report informs the Legislature of actions taken by the Department of Labor and Employment Security in response to Report No. 95-23, issued January 2, 1996. This report presents our assessment of the extent to which the Department has addressed our findings and recommendations.

Background

The Legislature established the Brain and Spinal Cord Injury Program to provide all eligible injured individuals with the opportunity to obtain the necessary services to enable them to be referred to a vocational rehabilitation program or to an appropriate level of functioning in their community. To ensure the referral of eligible persons with brain or spinal cord injuries to the Program, the identification or diagnosis of any person with a moderate to severe brain or spinal cord injury must be reported to a Central Registry within five days of occurrence. The cost of care for individuals with brain or spinal cord injuries and the Program's administrative costs are covered by the Brain and Spinal Cord Injury Rehabilitation Trust Fund, which receives revenues from 8.2% of all civil penalties levied by county courts pursuant to s. 318, F.S. (after a \$2 deduction per levy), \$60 from each driving or boating under the influence fine received by a county court, and \$1 from each temporary license plate issued by the Department of Highway Safety and Motor Vehicles.

Prior Findings

At the time of our report, we noted that although the number of individuals eligible for the Brain and Spinal Cord Injury Program had almost doubled, program revenues were at the same level in 1994-95 as they were in 1989-90. In Fiscal Year 1996-97, the condition still existed. We identified four methods to increase revenues

that are available to the Program that we recommended the Department pursue:

- ensuring that third party reimbursements were identified and returned to the Program;
- pursuing short-term grants to finance Program costs and pilot projects;
- seeking Medicaid waivers to secure federal funds to pay for client services; and
- working with County Clerks to ensure their cooperation in collecting and remitting fees.

We also determined that the transition between the Brain and Spinal Cord Injury Program and the Vocational Rehabilitation Program was cumbersome; this could discourage clients from applying for and obtaining vocational rehabilitation services. We recommended that the Department adopt a seamless approach for delivering services that provides clients with access to services through a coordinated system of delivery with one point of entry.

At the time of our report, only approximately one-third of the people reported to the Central Registry entered the Program and even fewer were reintegrated in the community or referred to a vocational rehabilitation program. We found that this was attributable, in part, to the Program being designed to meet the short-term medical rehabilitation needs of clients, rather than clients' long-term needs, particularly those of brain injured clients that might need Program services over a longer period to maintain an appropriate level of functioning or to benefit from vocational rehabilitation services. To maximize brain injured client outcomes, we recommended that the Department assess the type and level of services and number of clients that could be served under existing funding limitations.

Current Status

The Department of Labor and Employment Security has taken steps to implement some of our recommendations. However, further action will be needed to fully implement all of our recommendations to maximize program funding and client outcomes.

Actions Taken

Identify And Return Third Party Reimbursements.

The Department has increased its efforts to recover third-party reimbursements. Third-party payments recovered for the Brain and Spinal Cord Injury Program increased from \$473,874 in 1995-96 to \$747,150 in 1996-97.

Pursue Short-Term Grants. The Department applied for and was awarded a Federal Demonstration Grant for Traumatic Brain Injury in the amount of \$200,000. This grant will allow the Department to pilot Interagency Councils in three locations to improve access to long-term community supports. The Department will provide an additional \$100,040 in matching funds. The grant and matching funds will fund the pilots for three years.

Seek Medicaid Waivers. Due to the lack of appropriate outpatient and community reintegration programs, the severely disabled are sometimes cared for in more costly institutions. In response, the federal government has made the Medicaid home- and community-based services waiver available to states. To receive the waiver, states must match Medicaid expenditures for non-medical home- and community-based support services. As a result, funding for client services is increased without increasing state taxes or fees.

The 1997-98 Legislative Budget Request for the Agency for Health Care Administration requests an appropriation of \$2.8 million to fund a home- and community-based services waiver. This appropriation would require that \$1.2 million be transferred from the Brain and Spinal Cord Injury Program to meet the state matching requirement. We recommend the Legislature approve this transfer to fund a home- and community-based services waiver, which will provide access to additional federal funding.

Further Action Needed

Work with County Clerks. In an effort to improve collections and remittances of program revenues from County Clerks, the Department sent a brochure describing the program and a letter of thanks to each Clerk. However, the Department did not take steps to ensure fees are being properly collected and remitted.

Civil penalties, and boating and driving fines are collected by County Clerks and remitted to the Department of Highway Safety and Motor Vehicles. A report is provided with each remittance indicating the fund to which the remittances are to be distributed and the amount to be distributed. The Department of Highway Safety and Motor Vehicles depends on the recipient programs to check the reasonableness of these amounts.

The Program depends on the County Clerks to assess, collect and remit fines properly. However, without reviewing reported remittances for unusual patterns and requesting an explanation from the corresponding county clerk there is no alternative to identifying errors.

Because the Department did not prepare an analysis, we prepared a simple analysis of county remittances between January and September 1997. Our analysis identified remittances from several counties that could be in error and ten counties that reported no remittances for driving under the influence (DUI). We provided a copy of our analysis to the Department.

The Department used our analysis to initiate a review of reported remittances. To date, Department personnel have determined:

- Four counties remitted DUI collections directly to the Department of Labor and Employment Security rather than to the Department of Highway Safety and Motor Vehicles, sometimes to an old address.
- Orange County appears to be collecting Brain and Spinal Cord Injury fines under outdated statutes.
- Holmes and Jackson counties reported that they combined DUI fines with reported speeding fines.
- Desoto and Lafayette counties stated that fines for DUI were remitted, but no collections have been identified.
- St. Johns and Union counties reported that they do not assess the DUI fine for the Brain and Spinal Cord Injury Program.

We recommend the Department periodically review remittances to the Brain and Spinal Cord Injury Fund. In addition, the Department should work with the County Clerks' offices to ensure that assessments are correctly determined and collections correctly remitted.

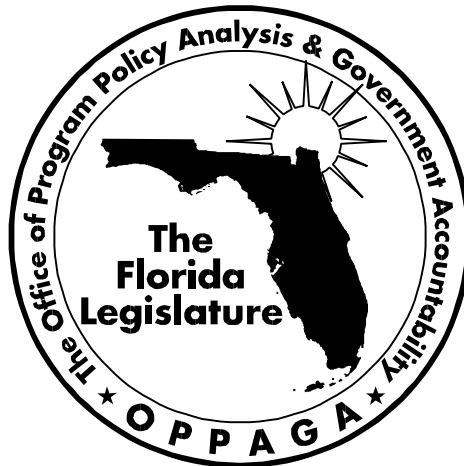
Seamless Provision of Services. The Department has initiated several actions to make the transition between the Brain and Spinal Cord Injury Program and the Vocational Rehabilitation Program less cumbersome. These include identifying and training specific Vocational Rehabilitation counselors to serve Brain and Spinal Cord Injury Program clients referred to the Vocational Rehabilitation Program and drafting a procedure to ease the transition between the Brain and Spinal Cord Injury Program and Vocational Rehabilitation. While these actions should assist in the transition between programs, clients must still adapt to a new case manager upon entering the Vocational Rehabilitation Program and the new case manager must learn the client's history. We recommend that the Department consider revising the system of service to eliminate the need for the client to be served by separate case managers in the Brain and Spinal Cord Injury and Vocational Rehabilitation programs.

Assessing Services Provided and Clients Served. We recommended the Department use "Marketing Strategies, Program Initiatives and Recommended Policy Changes for Long Term Supports for Persons with Traumatic Brain Injury," a study by Marcia Hill dated April 1996, to assess the type and level of services and number of clients that could be served under existing funding limitations.¹ The Department has used this study to develop and implement long-term, community-based supports and services and to conduct pilot projects. However, to improve client outcomes, the Department should perform an assessment of the type and level of services and number of clients that could be served under existing funding limitations.

¹ Marcia Hill was a project consultant with the Developmental Services Program in the Department of Health and Rehabilitative Services.

The Florida Legislature

Office of Program Policy Analysis and Government Accountability



ANNOUNCEMENT

The Office of Program Policy Analysis and Government Accountability announces the availability of its newest reporting service. The **Florida Government Accountability Report (FGAR)**, an electronic publication specifically designed for the World Wide Web, is now up and operating for your use.

FGAR provides Florida legislators, their staff, and other concerned citizens with approximately 400 reports on all programs provided by the state of Florida. Reports include a description of the program and who is served, funding and personnel authorized for the program, evaluative comments by OPPAGA analysts, and other sources of information about the program.

Please visit **FGAR** at <http://www.oppaga.state.fl.us/government>. Your comments and suggestions about improving our services are always welcome.

Gena Wade, FGAR Coordinator (850) 487-9245

OPPAGA provides objective, independent, professional analyses of state policies and services to assist the Florida Legislature in decision-making, to ensure government accountability, and to recommend the best use of public resources. Copies of this report may be obtained by telephone (850/488-0021 or 800/531-2477), by FAX (850/487-3804), in person (Claude Pepper Building, Room 312, 111 W. Madison St.), or by mail (OPPAGA Report Production, P.O. Box 1735, Tallahassee, FL 32302).

Web site: <http://www.oppaga.state.fl.us>

Project Supervised by: Debbie Gilreath 487-9278

Project Conducted by: Janice Foley 487-9266