



## DEPARTMENT OF HUMAN SERVICES

# Brain Injury (BI) Waiver Program

Helping people with brain injuries live as independently as possible in homes or community settings, not nursing homes or neurobehavioral hospitals

## What is the BI Waiver Program?

In Minnesota, children and adults with a diagnosis of brain injury who require the level of care provided in a specialized nursing home or neurobehavioral hospital may be eligible to receive services in community settings rather than in a nursing facility or a neurobehavioral hospital.

## Who is eligible?

To be eligible for the BI Waiver, people must:

- Be eligible for Medical Assistance (MA)
- Be certified disabled by the Social Security Administration or State Medical Review Team (SMRT) process
- Be under the age of 65 at the time they are opening to the BI waiver for the first time
- Have a documented diagnosis of traumatic or acquired brain injury
- Experience significant or severe behavior and cognitive deficits related to the brain injury
- Be assessed through a screening process and determined to need the level of services provided in a specialized nursing facility or neurobehavioral hospital
- Have an assessed need for supports and services beyond those available through the standard Medical Assistance (MA) benefit set.

## What services are offered?

In addition to the full range of services traditionally covered by Medical Assistance (medically necessary hospital care, physician care, prescription drugs, dental services, therapies, counseling, medical transportation), the BI Waiver offers a variety of services based on need such as:

- Consumer directed community supports (CDCS)
- Employment support
- Environmental accessibility adaptations
- Family training and counseling
- Individualized home supports
- Residential services
- Respite care.

People can receive a variety of services while living in their own home, the home of a relative or friend or another community setting, such as a licensed foster care home.

## Will these services take the place of other funding sources?

No. BI Waiver services supplement, not replace, other funding sources such as insurance, Medical Assistance and Medicare.

## What happens when a person on the BI Waiver reaches age 65?

People who receive BI Waiver services may choose to stay on the waiver when they turn 65 years old or go onto the Elderly Waiver (EW).

## How do people apply?

People who are interested in receiving BI Waiver services should contact their county or tribal social services agency to ask for a screening or additional information.

Visit <https://mn.gov/dhs> and search for “county, tribal and regional offices” or call the Disability Hub MN at 866-333-2466 for a list of county, tribal and regional offices.

# Right to fair treatment

People have the right to fair, non-discriminatory treatment. The Department of Human Services cannot discriminate against anyone because of his or her race, color, national origin, religion, sex, sexual orientation, age, creed, political beliefs or because of physical, mental or emotional disability or status with regard to public assistance. If a person feels discriminated against for any reason, a complaint may be filed with the:

Minnesota Department of Human Services  
Office for Equal Opportunity  
PO Box 64997  
St. Paul, MN 55164-0997  
651-431-3040 (voice) 651-431-3041 (TTY/TDD)  
651-431-7444 (fax) 800-627-3529 (Minnesota Relay Service)

877-627-3848 (Speech-to-Speech Relay)  
or the  
U.S. Department of Health and Human Services  
Office for Civil Rights, Region V  
233 N. Michigan Avenue, Suite 240  
Chicago, IL 60601  
312-886-2356 (voice)  
312-353-5693 (TTY/TDD)

Minnesota Department of Human Services  
Disability Services Division  
PO Box 64967  
St. Paul, MN 55164-0967

## Disability Hub MN 866-333-2466

Attention. If you need free help interpreting this document, call the above number.

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ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اتصل على الرقم أعلاه.

သတိ။ ဤတွဲရက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ အထက်ပါဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။

កំណត់សំគាល់ ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមហៅទូរស័ព្ទតាមលេខខាងលើ ។

請注意，如果您需要免費協助傳譯這份文件，請撥打上面的電話號碼。

Attention. Si vous avez besoin d'une aide gratuite pour interpréter le présent document, veuillez appeler au numéro ci-dessus.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntawv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.

ဟံသူဟံသးဘဉ်တက့ၢ်. ဝဲနမ့ၢ်လိဉ်ဘဉ်တၢ်မၤစၢၤကလိလၢတၢ်ကက့ၢ်ထဲဝဲဒၣ်လၢ် တီလၢ်မိတခါဆၢန့ၣ်.ကိးဘဉ်လိတဲမိနီၣ်ဂံၢ်လၢထးဆၢန့ၣ်တက့ၢ်.

알려드립니다. 이 문서에 대한 이해를 돕기 위해 무료로 제공되는 도움을 받으시려면 위의 전화번호로 연락하십시오.

ໂປຣດຊາບ. ຖ້າຫາກ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ພໍດີ, ຈົ່ງໂທໂປຣໂປທີພາຍເລກຂ້າງເທິງນີ້.

Hubachiisa. Dokumentiin kun tola akka siif hiikamu gargaarsa hoo feete, lakkoobsa gubbatti kenname bilbili.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, позвоните по указанному выше телефону.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'aan ah ee tarjumaadda (afcelinta) qoraalkan, lambarka kore wac.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, llame al número indicado arriba.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi số bên trên.

LB2 (10-20)

ADA1 (2-18)



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