



WEST VIRGINIA DEPARTMENT OF  
**HUMAN SERVICES**  
Traumatic Brain Injury Waiver (TBIW) Program  
Person-Centered Assessment

**6 Month Assessment Review**

REVIEW DATE:
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Last Name:	First Name:	Middle Initial:
Date of Birth	Medicaid Number:	Anchor Date:

- Person-Centered Assessment was reviewed with no changes noted
- Person-Centered Assessment reviewed with changes noted - (List Changes/Revisions Below)

Changes / Revisions Noted During Review		
Assessment Page Number	Changes / Revisions That Were Made	Date Change / Revision Occurred



**Traumatic Brain Injury Waiver (TBIW) Program  
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**6 Month Assessment Review**

**Signature Page**

To be a valid 6 Month Assessment Review **all** involved people are to sign and date this document. If a member is unable or unwilling to sign, please provide justification as to why s/he could not sign and verification that s/he was in attendance

*By signing, I certify that I had complete input into the six-month assessment review, discussed my goals and preferences and was able to choose who I wanted to participate in my assessment and care planning.*

Name	Relationship
	Case Manager
	Member
	Legal Guardian

*I also certify that the reported information is complete and accurate. I understand that payment for the TBIW services certified on this form will be from Federal and State funds, and that any false claims, statements, or documents, or concealment of a material fact, may be prosecuted under Medicaid Fraud.*



**Traumatic Brain Injury Waiver (TBIW) Program  
Person-Centered Assessment**

\_\_\_\_\_  
Member/Legal Guardian Signature Date

\_\_\_\_\_  
Case Manager Signature Date

Agency name/phone \_\_\_\_\_

Copy of this assessment was provided to:	Date copy was provided:
Member / Legal Guardian	

*Copies of this assessment must be provided to the member or court appointed legal guardian. It is the Case Management Agency's responsibility to create and upload the Assessment and Service Planning Documents onto the UMC web portal. Servicing Providers are responsible for retrieving all necessary Assessment, Service Planning documents and authorizations from the UMC web portal.*