alternative bases for such need per section 1720G(a)(2)(C)(i).

We believe that the seven activities listed in the definition sufficiently identify the activities that would be impaired for an extended period of 6 months or more as a result of a serious injury, as that term is defined in this rulemaking; however, we welcome suggestions from the public as to additional activities that should be included in this list.

We define an eligible veteran as "a veteran, or a servicemember, who is found eligible for a caregiver under § 71.20." This term is established for ease of reference throughout the part 71 regulations. The term is also used in section 1720G(a).

We define "General Caregiver," "Primary Family Caregiver," and "Secondary Family Caregiver" by referencing the sections that set forth the eligibility requirements for, and describe how to establish eligibility for, benefits as such a caregiver.

We define "in the best interest" to mean, "for the purpose of determining whether it is in the best interest of the eligible veteran to participate in the Family Caregiver program under 38 U.S.C. 1720G(a), a clinical determination that participation in such program is likely to be beneficial to the eligible veteran. Such determination will include consideration, by a clinician, of whether participation in the program significantly enhances the eligible veteran's ability to live safely in a home setting, supports the eligible veteran's potential progress in rehabilitation, if such potential exists, and creates an environment that supports the health and well-being of

residuals of neurological or other impairment or injury" as requiring supervision or assistance based on any one of seven listed impairments. We based these impairments on the *UK Functional Independence Measure and Functional Assessment Measure, and the Neuropsychiatric Inventory*. Like the definition of activity of daily living (ADL), we believe that this definition targets the population that section 1720G(a) is clearly intended to benefit. The need for supervision or protection based on symptoms or residuals of neurological or other impairment or injury is the second alternative basis for a determination that an individual is in need of personal care services under § 71.20(c)(2), and is one of the alternative bases for such need per section 1720G(a)(2)(C)(ii). As with the definition of ADL, we welcome suggestions from the public as to additional impairments that should be included in this list.

This regulation provides elaboration upon the statutory definition of "personal care services" set out in 38 U.S.C. 1720G(d)(4). There, personal care services is said to mean "[a]ssistance with one or more independent activities of daily living [and] [a]ny other non-institutional extended care (as such term is used in section 1701(6)(E) of [title 38])." The term "independent activity of daily living" does not have a commonly understood usage or meaning. Consistent with the purpose of the statute, we interpret "independent activity of daily living" to mean personal functions required in everyday living to sustain health and well-being and keep oneself safe from hazards or

health care, and noninstitutional respite care." 38 CFR 17.38(a)(1)(xi)(B).

Based on the types of non-institutional care services provided under title 38 and our interpretation of the term "independent activities of daily living" within the context of the statute, we read these terms together to mean "care or assistance of another person necessary in order to support the eligible veteran's health and well-being, and perform personal functions required in everyday living ensuring the eligible veteran remains safe from hazards or dangers incident to his or her daily environment." We welcome public comments on our interpretation of this term.

We define a "primary care team" as "a group of medical professionals who care for a patient and who are selected based on the clinical needs of the patient. The team must include a primary care provider who coordinates the care, and may include clinical specialists (e.g., a neurologist, psychiatrist, etc.), resident physicians, nurses, physicians' assistants, nurse practitioners, occupational or rehabilitation therapists, social workers, etc., as indicated by the needs of the particular veteran." The term is used throughout the regulations to refer to the medical professionals who approve and/or monitor caregiver benefits. A team, rather than a single individual, is generally necessary due to the complex nature of a serious injury or injuries and their impact on the veteran and their caregivers that are prerequisites to eligibility and to the ongoing obligation on the part of VA to monitor and provide support for the veteran's home-based care.