

April 9, 2010

The Honorable David Obey
Chairman
Subcommittee on Labor,
Health and Human Services
Education and Related Agencies
Committee on Appropriations
2358 Rayburn House Office Building
Washington, DC 20515

The Honorable Todd Tiahrt
Ranking Member
Subcommittee on Labor,
Health and Human Services
Education and Related Agencies
Committee on Appropriations
1016 Longworth House Office Building
Washington, DC 20515

Dear Chairman Obey and Ranking Member Tiahrt:

The undersigned organizations respectfully request your support for \$22 million for FY 2011 to fund programs authorized by the Traumatic Brain Injury (TBI) Act Amendments of 2008 in the Department of Health and Human Services (HHS). We also request \$11 million for the National Institute on Disability and Rehabilitation Research (NIDRR) TBI Model Systems administered by the Department of Education.

TBI is a leading cause of death and disability among young Americans. Just recently, the Centers for Disease Control and Prevention (CDC) reported that the incidence of TBI has increased to 1.7 million TBIs each year, 52,000 deaths, 275,000 hospitalizations and 1.365 million visits to the emergency department.

TBI continues to be one of the signature injuries of the wars in Iraq and Afghanistan, and returning veterans often turn to civilian health care and state resources for assistance. From the battlefield to the football field, American adults and youth continue to sustain TBIs at an alarming rate and funding is desperately needed for better diagnostics and evaluation, treatment guidelines, improved quality of care, education and awareness, referral services, state program services, and protection and advocacy for those less able to advocate for themselves. Primary funding to address this growing population is provided through these programs.

Therefore, we request additional funding for TBI Act programs in the amount of:

- **\$10 million** for the Centers for Disease Control and Prevention TBI Registries and Surveillance, Brain Injury Acute Care Guidelines, Prevention and National Public Education/Awareness
- **\$8 million** for the Health Resources and Services Administration (HRSA) Federal TBI State Grant Program
- **\$4 million** for the HRSA Federal TBI Protection & Advocacy (P&A) Systems Grant Program

The TBI Act Amendments of 2008, authorizes the HHS, HRSA to award grants to (1) states, American Indian Consortia and territories to improve access to service delivery and to (2) state

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Protection and Advocacy (P&A) Systems to expand advocacy services to include individuals with traumatic brain injury. For the past twelve years the HRSA Federal TBI State Grant Program has supported state efforts to address the needs of persons with TBI and their families and to expand and improve services to underserved and unserved populations including children and youth; veterans and returning military service members; and individuals with co-occurring conditions.

In FY 2009, HRSA reduced significantly the number of state grant awards, in order to increase each monetary award from \$118,000 to \$250,000. This means that many states that had participated in the program in past years have now been forced to close down their operations, leaving many individuals unable to access TBI care.

Increasing the program funding to \$8 million will provide the support necessary to sustain the grants for those states currently receiving funding and to ensure funding for four additional states. While this is a modest increase that is requested for FY 2011, we are hoping that if there are steady increases over the next five years each state, including the District of Columbia and the American Indian Consortium and territories, will eventually be able to sustain state service delivery; and will be able to use grant funds to pay for such services as information & referral (I&R), service coordination and other necessary services and supports identified by the state.

Similarly, the HRSA TBI P&A Program currently provides funding to all state P&A systems for purposes of protecting the legal and human rights of individuals with TBI. State P&As provide a wide range of activities including training in self-advocacy, outreach, information & referral and legal assistance to people residing in nursing homes, to returning military service members benefits, and students who need educational services.

Effective protection and advocacy services for people with traumatic brain injury leads to reduced government expenditures and increased productivity, independence and community integration. However, advocates must possess specialized skills, and their work is often time-intensive. A \$4 million appropriation would trigger a formula that would ensure that each P&A can provide a significant PATBI program with appropriate staff time and expertise.

Funding for the TBI Model Systems is urgently needed to ensure that the nation's valuable TBI research capacity is not diminished, and to maintain and build upon the 16 TBI Model Systems research centers around the country.

The TBI Model Systems of Care program represents an already existing vital national network of expertise and research in the field of TBI, and weakening this program would have resounding effects on both military and civilian populations. The TBI Model Systems are the only source of non-proprietary longitudinal data on what happens to people with brain injury. They are a key source of evidence-based medicine, and serve as a "proving ground" for future researchers.

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In order to make this program more comprehensive, Congress should provide **\$11 million** in FY 2011 for NIDRR's TBI Model Systems of Care program, adding one new Collaborative Research Project. In addition, given the national importance of this research program, the TBI Model Systems of Care should receive "line-item" status within the broader NIDRR budget.

We ask that you consider favorably these requests for the HRSA Federal TBI Program to improve access to critical resources; for CDC to gather needed data, shepherd public awareness, education, and prevention programs; and to sustain and bolster the NIDRR TBI Model Systems Program that conduct vital research.

Sincerely,

American Congress of Rehabilitation Medicine
American Physical Therapy Association
American Psychological Association
Association of Rehabilitation Nurses
Brain Injury Association of America
Carepath, Inc.
Corporation for Supportive Housing
Council for Learning Disabilities
Easter Seals
Epilepsy Foundation
Family Voices, Inc.
Friends of TBI Model Systems
National Association of Private Special Education Centers
National Association of State Directors of Developmental Disabilities Services
National Association of State Head Injury Administrators
National Disability Rights Network
National Rehabilitation Association
National Respite Coalition
National Spinal Cord Injury Association
North American Brain Injury Society
Paralyzed Veterans of America
Safe States Alliance (formerly the State and Territorial Injury Prevention Directors Association)
The Arc of the US
United Cerebral Palsy
United Spinal Association
VetsFirst
Western University's Center for Disability

Brain Injury Association of Arkansas
California Brain Injury Association
Brain Injury Association of Colorado
Brain Injury Association of Connecticut
Brain Injury Association of Delaware
Brain Injury Association of Florida
Brain Injury Association of Georgia
Brain Injury Association of Hawaii
Brain Injury Association of Illinois
Brain Injury Association of Indiana
Brain Injury Association of Iowa
Brain Injury Association of Kansas and Greater Kansas City
Brain Injury Association of Maryland
Brain Injury Association of Massachusetts
Brain Injury Association of Michigan
Brain Injury Association of Minnesota
Brain Injury Association of Mississippi
Brain Injury Association of Missouri
Brain Injury Association of Montana
Brain Injury Association of Nebraska
Brain Injury Association of New Hampshire
Brain Injury Association of New Jersey
Brain Injury Association of New Mexico
Brain Injury Association of North Carolina
Brain Injury Association of Ohio
Brain Injury Association of Oklahoma
Brain Injury Association of Oregon
Brain Injury Association of Pennsylvania, Inc.
Brain Injury Association of Rhode Island
Brain Injury Alliance of South Carolina
Brain Injury Association of Tennessee
Brain Injury Association of Texas
Brain Injury Association of Utah
Brain Injury Association of Vermont
Brain Injury Association of Virginia
Brain Injury Association of Washington
Brain Injury Association of Washington DC
Brain Injury Association of West Virginia
Brain Injury Association of Wisconsin
Brain Injury Association of Wyoming