



Federal Legislation and Policies Impacting Brain Injury

1918 -- The **Smith-Sear Veterans Vocational Rehabilitation Act** established a federal Vocational Rehabilitation program for soldiers with disabilities.

1920 -- The **Fess-Smith Civilian Vocational Rehabilitation Act** created a Vocational Rehabilitation program for civilians with disabilities.

1935 -- The **Social Security Act** created a national insurance system for people who are elderly; established a federal-State unemployment insurance program; provided grants aid to States on a matching basis for dependent mothers and children, people with disabilities, and people who are blind; and supported public health services.

1950 -- **Social Security Act Amendments** created a public assistance program for people who are "totally and permanently disabled." Each State determined eligibility standards and assistance levels in accordance with the Act, which provided for federal financial assistance.

1954 -- The **Vocational Rehabilitation Act** established a system of State Vocational Rehabilitation agencies.

1956 -- The **Social Security Amendments of 1956** created the Social Security Disability Insurance (SSDI) program for disabled workers aged 50 to 64.

1963 -- **Facilities and Community Mental Health Centers Construction Act of 1963**, also known as the **Community Mental Health Centers Construction Act**, **Mental Retardation Facilities and Construction Act**, or the **Mental Retardation and Community Mental Health Centers Construction Act of 1963**, (P.L. 88-164) to provide federal funding for community mental health centers and research facilities in the United States.

1965 -- The **Social Security Act of 1965** (P.L. 89-97) established the Medicare and Medicaid programs under Titles XVIII and Title XIX. The initial purpose of Title XIX was to improve access to and the quality of medical care for all low-income people and did not provide services solely based on disability. States were required to provide certain services to individuals who were categorically needy; States could offer optional services and choose to cover individuals who were medically needy.

1968 -- The **Fair Housing Act of 1968**, Title VIII of the Civil Rights Act of 1968, (P.L. 90-284) prohibited discrimination in the sale, rental and financing of dwellings based on race, color, religion, sex or national origin. Title VIII was amended in 1988 to include individuals with disabilities.

1970 -- The **Developmental Disabilities Services and Facilities Construction Amendments of 1970** (P.L. 91-517) gave States responsibility for planning and implementing comprehensive services for people with severe disabilities, creating Developmental Disabilities Councils in each State to plan and coordinate activities.

1972 -- The **Social Security Act of 1972** (P.L. 92-336) authorized the Supplemental Security Income (SSI) program, which is a consolidated, federally administered cash benefits program for needy individuals and couples who are aged, blind, or have a disability. Children with disabilities under the age

of 18, including children who are blind, become eligible for benefits provided their disabilities are comparable in severity to adult recipients.

1972 -- The **Rehabilitation Act** (P.L. 114–95) required Vocational Rehabilitation agencies to develop an “individualized written rehabilitation program” (IWRP) with each individual receiving services. Section 504 of the Act protects individuals with disabilities from discrimination in all federally assisted programs and activities. Sections 501 and 503 protect people with disabilities from employment discrimination by federal agencies or federal contractors.

1972 -- The **Housing and Community Development Act of 1974** (P.L. 93-383) created the Community Development Block Grant (CDBG) program, authorizing funds for removal of architectural barriers and in constructing public facilities. Urban areas are required to prepare a Housing Assistance Plan that reflects the needs of individuals with disabilities.

1972 -- The **Education for Handicapped Children Act** (P.L. 94-142) mandated that public schools provide students with disabilities a “free appropriate public education” (FAPE) in the “least restrictive environment.” The Act requires educators to develop an “individual education plan” (IEP) for each child receiving special education services. Part B of the Act provides federal financial assistance to States and local education agencies to meet the mandates.

1975 -- The **Developmental Disabilities Assistance and Bill of Rights Act** (P.L. 94-103) reauthorized the Developmental Disabilities Services and Facilities Construction Amendments of 1970 and provided formula grants to State-based Developmental Disabilities Councils. The Act also authorized the University Affiliated Facilities and established state Protection and Advocacy Systems to protect the rights of individuals with developmental disabilities.

1981 -- The **Omnibus Budget Reconciliation Act** authorized Medicaid to waive certain federal requirements so that States can provide personal care and other home and community-based services (HCBS) to individuals who would otherwise receive care in an institutional setting.

1982 -- The **Tax Equity and Fiscal Responsibility Act (TEFRA)** allowed States to cover home care services under Medicaid for children with disabilities, even when family income and resources exceeded that of the State’s financial eligibility standards.

1984 -- The **Rehabilitation Act Amendments** established the Client Assistance Program (CAP), a formula grant program for States designed to inform individuals with disabilities who are receiving Vocational Rehabilitation services as to how to access available benefits and ensure protection of individual rights through legal, administrative or other remedies.

1984 -- The **Emergency Medical Services for Children (EMSC)** program established grants to States and Territories to support injury prevention, training to EMTs, paramedics and other emergency medical care providers.

1984 -- The **Carl D. Perkins Vocational and Technical Education Act** authorized programs to increase the quality of technical education. The law recognized rights and protections for students who are members of “special populations” and set aside funding to address services for these special populations that included individuals with disabilities; individuals from economically disadvantaged families, including foster children; individuals preparing for nontraditional training and employment; single parents, including single pregnant women; displaced homemakers; and individuals with other barriers to educational achievement, including individuals with limited English proficiency.

1986 -- The **Education for Handicapped Children Act** (P.L. 99-457) was expanded to assist States in developing early intervention services for preschoolers, toddlers and infants with disabilities. The reauthorization extended the guarantee to a Free and Appropriate Public Education (FAPE) to children with disabilities, including ages 3-5 (Part C); and established the Early Intervention Programs (EIP) for

infants and toddlers with disabilities, ages 0-2, (Part H), including an Individualized Family Service Plan (IFSP) for each family with an infant/toddler with disabilities.

1986 -- The Employment Opportunities for Disabled Americans Act made permanent the work incentives provision, Sections 1619 (a) and 1619 (b), of the Social Security Act, authorizing special SSI benefits and continued Medicaid coverage for people with disabilities who are working, but whose income exceeds “substantial gainful activity” levels. Medicaid coverage is extended to people with disabilities who may lose SSI or Section 1619(a) benefits due to excess earnings, but who are unable to afford health care coverage equal to coverage under Medicaid.

1986 – Protection and Advocacy for Individuals with Mental Illness (PAIMI) (P.L. 99-319) established a formula grant program for statewide mental health advocacy services to be operated directly by or through contract with the state Protection and Advocacy agency to protect and advocate for the rights of people with mental illness and to investigate incidents of abuse and neglect.

1987 -- The Omnibus Budget Reconciliation Act of 1987 (P.L. 100-203), known as the **Nursing Home Reform Act**, created a set of national minimum standards of care and rights for people living in certified nursing facilities. The law requires States to conduct Pre-admission Screening and Annual Resident Review (PASARR) of individuals with disabilities (mental illness, mental retardation, developmental disabilities) prior to admission to a nursing facility to determine if they actually need nursing facility level of care, even if the individual is not Medicaid eligible. PASARR requires that individuals with disabilities be provided specialized services while in a nursing facility. If a nursing facility level of care is not required, but an individual requires specialized services, the State must provide for or arrange for the specialized services in an appropriate setting.

1987 -- The U.S. House of Representatives Committee of Appropriations encouraged the establishment of an **Interagency Head Injury Task Force** to identify the gaps in research, training, and service delivery and to recommend solutions in meeting the needs of people in meeting the needs of people with traumatic brain injury (House-Report No. 100-256, page 81). The task force was established in early 1988 by the Secretary of the Department of Health and Human Services. He appointed as in chairman the Director of the National Institute of Neurological Disorders and Stroke (NINDS), National Institutes of Health (NIH).

1988 -- The Technology Related Assistance for Individuals with Disabilities Act (P.L. 100-407) established grant programs to encourage the development and distribution of assistive technology for people with disabilities.

1988 -- Fair Housing Amendments Act expanded the Fair Housing Act of 1968 to prohibit discrimination based on disability or on familial status (presence of child under age of 18, and pregnant women); establishes new administrative enforcement mechanisms; revises and expands Justice Department jurisdiction to bring suit in Federal district courts. In connection with prohibitions on discrimination against individuals with disabilities, the Act contains design and construction accessibility provisions for certain new multifamily dwellings.

1989 -- The Omnibus Budget Reconciliation Act of 1989 (OBRA 89) defines the Medicaid Early and Periodic Screening, Diagnostic and Treatment (EPSDT) program, a comprehensive and preventative child health program for individuals under the age of 21. OBRA requires that any medical necessary health care service be provided to an EPSDT recipient even if the service is not available under the State’s Medicaid plan for the rest of the Medicaid population.

1990 -- The Americans with Disabilities Act (ADA) (P.L. 101-336) affirms the rights of citizens with disabilities and prohibits discrimination in employment, public services, public accommodations and

services that are operated by private entities, and telecommunications. While the employment provisions of the ADA apply to employers of fifteen employees or more, its public accommodations provisions apply to all businesses regardless of the number of employees. State and local governments are covered regardless of size.

1990 -- The Individuals with Disabilities Education Act (IDEA) (P.L. 101-476) reauthorized "The Education for Handicapped Children Act." The Act includes traumatic brain injury as a disability and requires public schools to report the number of students with TBI receiving special education and related services. IDEA also requires schools to prepare students for transition to adulthood by incorporating a Statement of needed services into the student's individualized education program (IEP) no later than age 16. Transition services are defined as "a coordinated set of activities for a student, designed within an outcome-oriented process, which promotes movement from school to post-school activities." Post-school activities include "post-secondary education, vocational training, integrated employment (including supported employment), continuing and adult education, adult services, independent living or community participation."

1992 -- The Rehabilitation Act Amendments of 1992 (P.L. 102-569) made several fundamental changes to the Rehabilitation Act of 1973 and the way in which rehabilitation services are provided to Americans with disabilities through the State Vocational rehabilitation program. Services must be carried out in a manner consistent with the principles of presumed ability, integration and inclusion, full participation, meaningful and informed choice, and involvement of families and natural supports. Title I contains a presumption that individuals with disabilities, including those with severe disabilities, are capable of engaging in gainful employment. Title VII establishes standards and assurances for Centers for Independent Living and includes a Statement of the independent living philosophy.

1993 -- Rehabilitation Act Amendments of 1993 (P.L. 103-73) mandates Centers for Independent Living to provide four "independent living core services" along with any of the other optional independent living services specified in the amendments. The four core services are: information and referral, independent living skills training, peer support, and individual and systems advocacy. The Act also establishes the PAIR Program, Protection and Advocacy Services for Individual Rights, to protect and advocate for legal and human rights of persons with disabilities.

1994 -- The Technology-Related Assistance for Individuals with Disabilities Act (P.L. 103-218) is expanded and includes funding to the National Institute on Disability and Rehabilitation Research (NIDRR); establishes the Protection & Advocacy Assistive Technology (PAAT) Program to assist individuals with disabilities and their family members, guardians, advocates and authorized representatives in accessing technology devices and assistive technology services through case management, legal representation and self-advocacy training.

1996 -- The Traumatic Brain Injury Act (P.L. 104-166) authorizes funding to the Health Resources and Services Administration (HRSA) for grants to States for the purpose of carrying out demonstration projects to improve access to health and other services regarding traumatic brain injury; to the Centers for Disease Control and Prevention (CDC) to carry out projects to reduce the incidence of TBI; to the National Institutes of Health (NIH) to conduct basic and applied research regarding TBI; and to the National Center for Medical Rehabilitation Research, within the National Institute for Child Health and Human Development, to conduct a national consensus conference on managing traumatic brain injury and related rehabilitation concerns.

1997 -- The Amendments to Individuals with Disabilities Education Act (IDEA) (P.L. 105-17) shifted the focus from providing children with disabilities access to an education to one of improving results for all children in the education system. Prior to 1997, the law did not include a regular education teacher as a required member of the Individualized Education Program (IEP) team. The new law mandates that a regular education teacher, to the extent appropriate, participate in the development, review and revision of the IEP of the child. The law also strengthens the role of parents in educational planning and decision

making on behalf of their children and that a statement of transition service be prepared and included in the IEP by age 14.

1997 -- The **Balanced Budget of 1997** (P.L. 105-33) created the **State Children's Health Insurance Program (SCHIP)**, now known as the Children's Health Insurance Program (CHIP), under title XXI of the Social Security Act to provide health coverage to eligible children, through both Medicaid and separate CHIP programs.

1998 -- The **Workforce Investment Act of 1998 (Title III)** amends the Wagner-Peyser Act to require that Employment Service/Job Service activities become part of the "One-Stop" system and establishes a national employment statistics initiative. It establishes a temporary "Twenty-First Century Workforce Commission" to study issues relating to the information technology workforce in the United States. The "One-Stop" concept is where information about and access to a wide array of job training, education, and employment services is available for customers at a single neighborhood location. Provisions of the Act promote individual responsibility and personal decision-making through the use of "Individual Training Accounts," allowing customers to "purchase" the training they determine best for them. Title IV reauthorizes Rehabilitation Act programs through FY 2003 and links these programs to State and local workforce development systems. Title V contains general provisions that include authority for State unified plans relating to several workforce development programs; incentive grants for States exceeding negotiated performance levels under the Workforce Investment Act; Adult Education Act; Perkins Vocational Education Act; and transition provisions.

1998 -- **Assistive Technology Act of 1998** (P.L. 105-394) reauthorized AT programs established in 1994.

1999 -- The **Ticket to Work and Work Incentives Improvement Act** creates options for States and individuals with disabilities to obtain jobs and keep their health insurance. The goal is to also reduce individuals with disabilities' dependence on cash benefits, such as SSI and SSDI. Title II expands availability of health care services. States are given the option of providing Medicaid coverage for people with disabilities who would qualify for SSI, if not for income, or who are working and have a "medically determinable impairment", or allow individuals to "buy in" to Medicaid coverage.

1999 -- **Families of Children with Disabilities Support Act of 1999** authorizes grants to States on a competitive basis to support systems change activities to assist States in developing or enhancing statewide systems of family support services for families of children with disabilities, including individuals who are not younger than age 18 who have certain significant impairments and reside with and receive assistance from a family member. Limits the Federal share of such assistance to 75 percent of the cost of activities and the award period to three years.

2000 -- The **TBI Amendments of 2000** reauthorized the TBI Act of 1996 as part of the Title XIII of the Children's Health Act of 2000 (P.L. 106-310). The Act reauthorized funding to the Centers for Disease Control and Prevention (CDC) to expand State surveillance and national education and prevention; to the National Institutes of Health to carry out applied research related to cognitive disorders and neurobehavioral consequences; and to the Health Resources and Services Administration for State capacity building grants. The Amendments of 2000 also authorized funding for State Protection and Advocacy services. The Act changes the definition of TBI by replacing the phrase "anoxia due to near drowning" with "anoxia due to trauma" with regard to the HRSA State grant and P&A grant sections.

2000 -- Congress expanded the **Protection and Advocacy for Individuals with Mental Illness Act (PAIMI Act)** to give federally-funded protection and advocacy systems (P&As) authority to investigate

possible abuse or neglect occurring in the community, including in facilities, such as schools, that provide services to people with mental illness.

2000 – Developmental Disabilities Assistance and Bill of Rights Act of 2000 (P.L. 106-402) further clarified the application of the “developmental disability” definition for children from birth through age 9. A child may still be considered to have a developmental disability without meeting 3 or more of the above criteria (items (i) through (v)) if the individual, without services and supports, has a high probability of meeting these criteria later in life.

2001 -- The No Child Left Behind Act of 2001 redefines the federal role in K-12 education and to close the achievement gap between disadvantaged and minority students and their peers. It is based on four basic principles: stronger accountability for results, increased flexibility and local control, expanded options for parents, and an emphasis on teaching methods that have been proven to work.

2004 -- Individuals with Disabilities Education Improvement Act of 2004 (P.L. 108-446), changed the name of the Individuals with Disabilities Education Act (IDEA); reauthorized IDEA; and made changes with regard to: the definition of “highly qualified” teachers, calculation of maximum State grants, funding for high need children with disabilities, revised State performance goals and requirements for children’s participation in State and local assessments, changes in the private school provisions, exceptions to certain financial requirements, changes in procedural safeguards, and changes in compliance monitoring to focus on student performance.

2004 -- Assistive Technology Act of 2004 changed purpose of previous Acts that focused on helping States build “systems for improving access to assistive technology devices for individuals with disabilities.” The reauthorization required States to provide direct aid to individuals with disabilities to ensure they have access to the technology they need. As a result, the majority of State efforts are required to be conducted in the following areas: assistive technology reutilization programs, assistive technology demonstration programs, alternative financing programs and device loan programs.

2006 -- The Deficit Reduction Act of 2005, affected many aspects of domestic entitlement programs, including both Medicare and Medicaid. The law required citizenship documentation requirements on applicants and recipients, including children. It gives States broad powers and flexibility to restructure coverage through the use of a “benchmark” option, but also retains Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services as the coverage standard for children under age 19. States are provided greater authority to impose cost-sharing for Medicaid-covered benefits and services. The bill also redefines the federal role in financing targeted case management services.

2006 -- The Carl D. Perkins Career and Technical Education Improvement Act of 2006 (P.L. 109-270), amends the Act of 1998, to increase focus on the academic achievement of career and technical education students, strengthen the connections between secondary and postsecondary education, and to improve State and local accountability. The law includes three major areas of revision: (1) using the term “career and technical education” instead of “vocational education”; (2) maintaining the Tech Prep program as a separate federal funding stream within the legislation; and (3) maintaining State administrative funding at 5 percent of the State’s allocation.

2006 -- The “Post-Katrina Emergency Management Reform Act of 2006” passed as a part of the FY 2007 Homeland Security appropriations bill. The Act contained amendments to the Stafford Act to better address the needs of people with disabilities in emergencies and outlines responsibilities between the Department of Health and Human Services, FEMA (Department of Homeland Security) and other federal agencies to assist them in better addressing the needs of the disability community.

2006 -- Older Americans Act Reauthorization (P.L. 109-365) reauthorized the Older Americans Act (OAA). The bill authorized funding for various programs and services, and created the National Family Caregiver Support Program to help aging caregivers with a child with a disability.

2006 – Child and Family Services Improvement Act (P.L. 109-288) replaced the permanent funding authority for the Child Welfare Services program with a five-year authority that coincided with the funding authority for the Promoting Safe and Stable Families program, and required States to establish standards that ensure children in foster care have a well-planned visit with their caseworker at least once a month; have procedures to maintain child welfare services in the wake of a disaster; and describe in their State plan how they consult with medical professionals to assess the health of and provide medical treatment to children in foster care.

2006 -- The Lifespan Respite Care Act of 2006 (P.L. 109-442) authorizes funding for programs offering coordinated systems of accessible, community-based respite care services for family caregivers of children or adults of all ages with special needs.

2007 -- The Trauma Care Systems Planning and Development Act reauthorized funding for improved trauma systems of care for a five-year period from FY 2008-2012. The legislation reauthorizes the program in the amount of \$12 million in FY 2008 for grant programs to assist States, and sub-regions of States, in their trauma system development. The grant program is dual-track with a little more than one-half of the funds that are appropriated committed to a competitive grant program and the rest for a formula program where funding goes to all eligible States that apply.

2008 -- The Defense Authorization Act of 2008 (P.L. 110-181) authorized appropriations for FY 2008 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy and for other purposes. The bill included many provisions to improve treatment and health care for injured military and veterans, including the Wounded Warriors bill.

2008 -- The Traumatic Brain Injury Reauthorization Act of 2008 (P.L. 110-206) reauthorized appropriations for the Department of Health and Human Services Health Resources and Services Administration (HRSA) Federal TBI Program, which provided grant funding to States and to State Protection & Advocacy Systems; and to the Centers for Disease Control and Prevention for public education, data surveillance and linkage to services and prevention programs through 2011. The American Native Consortium was added as an entity eligible to receive grant funding. A new provision was added to address war-related injuries as related to overall incidence and prevalence of traumatic brain injury.

2008 – Americans with Disabilities Act (ADA) Amendments Act of 2008 (ADAAA) (P.L. 110–325) amended the ADA of 1990 and other disability discrimination laws at the federal level. The Act retained the ADA’s basic definition of “disability” as an impairment that substantially limits one or more major life activities.

2009 – The Children’s Health Insurance Program Reauthorization Act of 2009 (CHIPRA), (P. L. 111-3) extends and expands the State Children’s Health Insurance Program (referred to as CHIP) that was enacted as part of the Balanced Budget Act of 1997.

2009 -- American Recovery and Reinvestment Act (ARRA, P.L. 111-5), which among many funding provisions, appropriated significant new funding for programs under Parts B and C of the Individuals with Disabilities Education Act (IDEA), funding for Vocational Rehabilitation, Independent Living, Assistance for Needy Families (TANF) Emergency Contingency Fund (ECF), Medicaid, and other federal programs.

2010 -- Patient Protection Affordable Care Act (P.L. 111-148) to reform private insurance and public health programs, expanding coverage to 30 million Americans who are uninsured. Among its provisions, included prohibition for denying coverage based on pre-existing conditions; allowed families to include

their children up to age 26 on their policies; and defined “essential” health benefits that insurance policies must cover.

2010 -- Education Jobs and Medicaid Assistance Act (P.L. 111-226) provided \$16.1 billion to extend enhanced federal Medicaid funding for States through June 30, 2011. The law was an extension of the \$87 billion in emergency Medicaid funding, which was set to end December 31, 2010, as provided for under the American Recovery and Reinvestment Act signed into law February 17, 2009. The bill also included \$10 billion in education funding to prevent layoffs of educators.

2010 -- Caregivers and Veterans Omnibus Health Services Act of 2010 (P.L. 111-162) authorizes the Department of Veterans Affairs to establish a wide range of new services to support certain caregivers of eligible Post 9/11 Veterans.

2010-- Work Incentives Planning and Assistance (WIPA) Program and the Protection and Advocacy for Beneficiaries of Social Security (PABSS) Program Act of 2010 (P.L. 111-280) extended authorization for funding of the WIPA and PABSS programs through FY 2011 to help beneficiaries, including those with disabilities, return to the workforce.

2010 -- Child Abuse Prevention and Treatment Reauthorization Act (CAPTA) (P.L. 111-320) authorized funding to the Department of Health and Human Services (HHS) to study and report to Congress on shaken baby syndrome; reauthorized community-based grants for prevention of child abuse and neglect and other funding through FY 2015; and revised requirements for community-based grants for the prevention of child abuse or neglect, including local program requirements.

2010 – Rosa’s Law (P.L.111-256) changed references in many federal statutes that referred to “mental retardation” to “intellectual disability”.

2010 -- The Budget Control Act of 2011, (P.L.112-25) extended the debt ceiling and set the course for reducing the federal debt through spending cuts and increased revenues. The law called for a Joint Select Committee on Deficit Reduction (“Super Committee) to develop a bill to reduce spending by \$1.5 trillion over ten years, and in absence of Congress passing a deficit reduction bill, a trigger would result in across the board cuts to federal programs, referred to as sequestration, in order to reduce federal spending by that amount.

2011 – The Surface and Air Transportation Programs Extension Act of 2011 (P.L. 112-30) amended SAFETEA-LU to authorization of appropriations for Department of Transportation, including the National Highway Traffic Safety Administration (NHTSA) safety programs: (1) highway safety research and development, (2) the occupant protection incentive grant program, (3) the safety belt performance grant program, (4) State traffic safety information system improvements, (5) the alcohol-impaired driving countermeasures incentive grant program, (6) the National Driver Register, (7) the high visibility enforcement program, (8) motorcyclist safety grant program, (9) the child safety and child booster seat safety incentive grant program, and (10) NHTSA administrative expenses. The law authorized appropriations through FY2012 for: (1) drug-impaired driving enforcement; and (2) older driver safety and law enforcement training.

2011 -- On March 15, 2011, new federal rules regarding the Americans with Disabilities Act came into effect. These rules expanded accessibility requirements for recreational facilities such as swimming pools, golf courses, exercise clubs, and boating facilities. They also set standards for the use of wheelchairs and other mobility devices like Segways in public spaces, and changed the standards for things such as selling tickets to events and reserving accessible hotel rooms. The new rules also clearly defined “service animal” as “...any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability.” This portion of the law also states that the services the service animal provides must be “directly related to the handler’s disability” and dogs that provide only emotional support or crime deterrence cannot be defined as service animals.

2011 -- The U.S. Department of Health and Human Services created the **Administration for Community Living** to continue the President's Community Living Initiative to assist States in rebalancing long term services and supports. The reorganization brought the Administration of Aging (AoA), Administration on Intellectual and Developmental Disabilities (AIDD), Office of Disability, Center for Aging and Disability Policy, and Office of the Administrator together to address the community living service and support needs of both the aging and disability populations.

2012 -- The **American Taxpayer Relief Act of 2012**, (P.L. 112- 240) made substantial changes to the tax code, addressing the so called "fiscal cliff". The bill also repealed the CLASS Act (Community Living Assistance Services and Supports) long-term insurance program contained in the health care reform legislation.

2012 -- **MAP-21 - Moving Ahead for Progress in the 21st Century** (P.L. 112-141), expanded on and refined many of the highway, transit, bike, and pedestrian programs and policies established in 1991. The law restructured several programs, including highway safety.

2013 -- **Violence Against Women Reauthorization Act** (P.L. 113-4) – reauthorized and improved upon lifesaving services for all victims of domestic violence, sexual assault, dating violence and stalking – including Native women, immigrants, LGBT victims, college students and youth, and public housing residents.

2014 -- **Workforce Innovation and Opportunity Act (WIOA)** (P.L. 113-128) reauthorized the workforce development activities (WIOA); adult education and literacy; amendments to the Wagner-Peyser Act to integrate the U.S. Employment Service (ES) into the One-Stop system authorized by WIOA; reauthorizes and amends the Rehabilitation Act of 1973 to integrate vocational rehabilitation into the One-Stop system; and specifies transition provisions from WIA to WIOA. The legislation transferred three programs from the Department of Education to the Administration for Community Living: Independent Living Services programs; the Assistive Technology Act program; and the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR), formerly known as the National Institute on Disability and Rehabilitation Research (NIDRR). (The legislation renamed NIDRR.)

2014 -- **Achieving a Better Life Experience Act of 2014**, known as the ABLE Act, (P.L. 113-295) amended Section 529 of the Internal Revenue Service Code of 1986 to allow individuals with disabilities to establish tax advantaged savings accounts, but does not supplant, benefits provided through private insurances, the Medicaid program, the supplemental security income program, the beneficiary's employment and other sources. Individuals whose disability occurred prior to the age of 26 are eligible.

2014 -- **Traumatic Brain Injury Reauthorization Act of 2014** (P.L. 113-196) reauthorized appropriations for the Department of Health and Human Services (HHS) Federal TBI Program, which provided grant funding to States and to State Protection & Advocacy Systems; and to the Centers for Disease Control and Prevention for public education, data surveillance and linkage to services and prevention programs through 2019. The legislation removed Health Resources and Service Administration as the administering agency for the State grant and State Protection & Advocacy Systems grant programs, leaving the administering agency to the discretion of the HHS Secretary. Language was also included directing the Secretary of Health and Human Services to develop a plan for improved coordination of Federal activities with respect to traumatic brain injury.

2014 -- **Every Student Succeeds Act (ESSA)** (P.L. 114-95) reauthorized the Elementary and Secondary Education Act (ESEA) and replacing No Child Left Behind Act, the primary law for K-12 public education. ESSA continues to include students with disabilities in State accountability systems and ensures students with disabilities will continue to have access to the general curriculum and be taught curriculum that is

aligned with challenging academic content standards. ESSA affects all kids, including those with IEPs and 504 plans.

2015 -- The **Fixing America's Surface Transportation, known as FAST Act** (P.L. 114-94) reauthorized funds for Federal-aid highways as well as highway safety and transition programs. The FAST Act provided needed funding stability to help States plan strategic responses to highway safety challenges, including drunk and drug-impaired driving, lack of seat belt use, and excessive speed. The law also increased attention and resources to the problem of drug impaired driving, a growing concern across the country. The FAST Act also continues funding for the Elderly Persons and Persons with Disabilities grant program, which supports demonstration projects for individuals with disabilities.

2016 -- The **21st Century Cures Act (Cures Act)** (P.L. 114-255) to help accelerate medical product development and bring new innovations and advances to patients who need them faster and more efficiently. Included a provision that mandates that States implement electronic visit verification (EVV) for all Medicaid personal care services (PCS) and home health services (HHCS) that require an in-home visit by a provider. This applies to PCS provided under sections 1905(a)(24), 1915(c), 1915(i), 1915(j), 1915(k), and Section 1115; and HHCS provided under 1905(a)(7) of the Social Security Act or a waiver.

2016 – **Older Americans Act Reauthorization Act (OAA) of 2016** (P.L. 114-144) reauthorized programs impacting older Americans and Americans with disabilities through the end of 2018.

2017 – Congress passed a six-year extension, through FY 2023, of Children's Health Insurance Program (CHIP) funding as part of a broader continuing resolution to fund the federal government, as the CHIP had expired on Sept. 30, 2017.

2017 -- The Recognize, Assist, Include, Support and Engage (RAISE) Family Caregivers Act (P.L. 115-119) directed the U.S. Department of Health and Human Services (HHS) to develop and make publicly available a National Family Caregiving Strategy that identifies recommended actions for recognizing and supporting family caregivers in a manner that reflects their diverse needs.

2018 -- **Traumatic Brain Injury Program Reauthorization Act of 2018** (P.L. 115-377) reauthorized TBI programs administered by the Centers for Disease Control and Prevention; and State grant and state Protection & Advocacy grant programs which had been transferred to the Administration for Community Living (ACL). The legislation specified the ACL as the administering agency.

2019 – **Medicaid Extenders Act of 2019**, allocated \$112 million for Money Follows the Person (MFP), the estimated cost of a three-month extension, and extended the Medicaid Spousal Impoverishment protection policy until March 31, 2019. The costs are offset by a provision that imposes penalties on state Medicaid programs without an asset verification system in place by 2021.

2019 – The final FY 2020 appropriations package extended both the Money Follows the Person and spousal impoverishment protections with regard to home and community-based services through May 22, 2020.

2019 -- The FY2020 appropriations package included protections for manual complex rehabilitation technology (CRT) wheelchairs from competitive bidding, which will permanently exempt manual CRT wheelchair *bases* from competitive bidding, and suspends the competitive bidding rates for manual CRT wheelchair *accessories* for an 18-month period, beginning January 1, 2020 and lasting until June 31, 2021.

2019 -- The FY2020 appropriations package also reauthorized the Patient-Centered Outcomes Research Institute (PCORI) for ten years. PCORI was created through the 2010 Patient Protection and Affordable Care Act to conduct studies that can help patients and those who care for them to help make better-informed healthcare choice.

2020 – The **Supporting Older Americans Act** passed, reauthorizing the Older Americans Act of 1965, and included provisions for TBI screening, coordination of treatment, rehabilitation and related services, and referral services due to fall-related injuries.

2020 – As part of the **Coronavirus Aid, Relief, and Economic Security (CARES) Act**, which became law on March 27, 2020, Congress reauthorized the Money Follows the Person program and spousal protections provisions with regard to home and community-based services (HCBS) through November 30, 2020. The law also allowed State Medicaid programs to pay for direct support professionals to assist individuals with disabilities in the hospital. Addition funding was appropriated to the Centers for Independent Living (\$85 million) and Aging and Disability Resource Centers (\$50 million).

2021 -- Surface Transportation Extension Act of 2021 (P.L. 117--44) extended funding for federal-aid highway, transit, and safety programs. Revised and extended authority through FY2022 for the National Highway Traffic Safety Administration to carry out collaborative research on in-vehicle technology to prevent alcohol-impaired driving.

2021 -- Helping American Victims Afflicted by Neurological Attacks Act of 2021 or the HAVANA Act of 2021 (P.L. 117-46) authorized the Central Intelligence Agency, the Department of State, and other agencies to provide payments to agency personnel who incur brain injuries from hostilities while on assignment.

2021 -- The American Rescue Plan Act (ARP) of 2021 (P.L. 117-2) provided \$1.9 trillion funding to States, local government, non-profits and others to assist with the recovery from the economic and health effects of the COVID-19 pandemic. The legislation contained a number of provisions that impacted individuals with disabilities and in-home care, personal care aides and other direct service professionals who were restricted from these settings due to stay at home orders or from residential facilities who restricted outside staff to minimize risk of exposure of COVID-19 to other staff and their clients.

The legislation provided States with a 10% boost in federal Medicaid matching funds for HCBS through March 31, 2025. To receive the additional funds, States were required to reinvest the added federal funding to supplement their annual expenditures on supports and services for people with disabilities. States could reduce or eliminate HCBS waiting lists, add new services, increase providers rates or increase availability of resources to ensure adequate networks.

The legislation broadened HCBS to include service categories that are often used to cover community-based behavioral health services, such as counseling, community support services, and treatment. Another provision provided an enhanced 85% federal matching rate for three years to fund mobile crisis team services trained in trauma-informed care and de-escalation strategies in order to reduce harm to people undergoing acute episodes by avoiding potentially dangerous encounters with undertrained law enforcement, and can free the police to prioritize other activities.

2022 -- \$150 million from the ARP was directed to ACL to increase the public health workforce's disability and aging expertise to support the health and safety of people with disabilities and older adults who were disproportionately affected during emergencies and disasters, such as the COVID-19 pandemic. The funding was available to ACL TBI State Partnership Program grantees at the beginning of 2022.

2022 – The FY 2022 omnibus appropriations bill appropriated \$500,000 to the Centers for Disease Control and Prevention for the National Concussion Surveillance System authorized by the Traumatic Brain Injury Program Reauthorization Act of 2018.

2022 – The FY 2022 omnibus spending bill reauthorized the *Violence Against Women Act* (VAWA) through 2027.

2022 – Bipartisan Safer Communities Act (P.L. 117-159) implemented several changes to the mental health system, school safety programs, and gun safety laws. It extended background checks for persons under age 21. It included provisions to assist schools with safety and crisis intervention programs; funding for community-based violence prevention initiatives; and added convicted domestic violence abusers in dating relationships to the National Instant Criminal Background Check System (NICS).

2022 -- The Inflation Reduction Act of 2022 (P.L. 117-169) addressed climate change, health care, taxation, and the Federal deficit. The legislation expanded Medicare benefits: free vaccines (2023), \$35/month insulin (2023) and capped out-of-pocket drug costs to an estimated \$4,000 or less in 2024 and settling at \$2,000 in 2025. The legislation for the first time allows Medicare to negotiate 100 drugs over the next decade, and requires drug companies to rebate back price increases higher than inflation.

2022 – The Traumatic Brain Injury (TBI) and Post-Traumatic Stress Disorder (PTSD) Law Enforcement Training Act (P.L. 117-170) authorized funds for a new police training program to help law enforcement and first responders better recognize and respond to people suffering from TBI and PTSD.

2022 -- The Consolidated Appropriations Act, 2023, which extended funding through the federal year ending September 30, 2023, **increased the Administration for Community Living (ACL) TBI Program by \$1.3 million for a total of \$13.118 million.** (The FY 2022 spending bill increased the program by \$400,000.)

2022 -- The Consolidated Appropriations Act, 2023 added \$1 million for the CDC National Concussion Surveillance Systems for a total of \$8.25 million for CDC's TBI prevention program. The additional funding provided \$1.5 million for the surveillance system overall, with the FY 2022 appropriations.

2022 -- The Medicaid Money Follows the Person Program was extended for five-years at \$450 million per year through September 30, 2027.

2022 -- The Medicaid HCBS spousal impoverishment protections were extended through September 30, 2027.

2022 -- The FY 2023 omnibus spending bill required all States to cover children continuously for 12 months in Medicaid and CHIP.

2022 -- The ABLE Age Adjustment Act was included in the FY 2023 omnibus spending bill, which changed ABLE eligibility requirement to include individuals whose disability began before age 46 (up from 26 in previous law).

2022 -- The 21st Century Assistive Technology Act was included in the National Defense Authorization Act (NDAA) for FY 2023, reauthorizing and updating the Assistive Technology Act program and Protection and Advocacy Systems related to assistive technology.

2022 -- The FY 2023 NDAA bill established the Warfighter Brain Health (WBH) initiative to standardize and align blast and TBI and programs across the Department of Defense to better address the brain health needs of service members, their families, line leaders, commanders, and their communities at large.

This summary was prepared by Susan L. Vaughn, Director of Public Policy for NASHIA, and was updated December 30, 2022.



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NASHIA assists State government in promoting partnerships and building systems to meet the needs of individuals with traumatic brain injury and their families.

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