



**NATIONAL ASSOCIATION  
OF STATE HEAD INJURY  
ADMINISTRATORS**



# Capitol News!

March 15, 2022

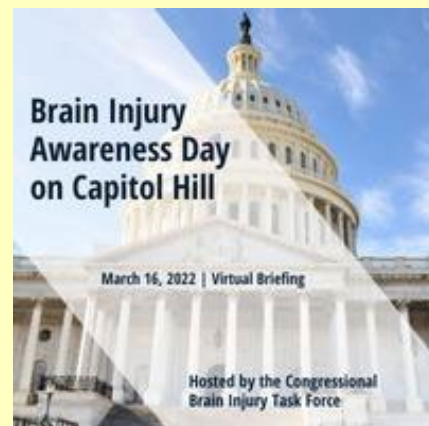
Dear NASHIA Member,

Greetings and welcome to *Capitol News!*, Vol. 19, Issue 1. After a long wait, Congress finally passed a bi-partisan spending bill last week to fund government for the remainder of this fiscal year. The President signed the bill Friday. (Since October 1, 2021, most of federal government had been funded by a series of continuing resolutions (CR) at the same funding level as the previous year.) The FY 2022 omnibus spending bill contains increased funding for the Department of Health and Human Services' Administration for Community Living (ACL) TBI program and for the Centers for Disease Control and Prevention's Injury Center to establish the National Concussion Surveillance System. Read further in this issue to learn more about funding amounts.

This week, NASHIA members are engaging in virtual Hill visits to urge support for increased funding for the next fiscal year, FY 2023, that begins October 1. Tomorrow, the Congressional Brain Injury Task Force will hold its annual Brain Injury Awareness Briefing starting at 2:30pm (ET). As a reminder, NASHIA's public policy materials are located on the [website](#). Should you have any questions or comments, please feel free to send to [publicpolicy@nashia.org](mailto:publicpolicy@nashia.org).

## Have you Registered for CBITF Briefing Scheduled for *Tomorrow?*

Tomorrow, March 16, the Congressional Brain Injury Task Force (CBITF) will hold its Awareness Day Briefing virtually from 1:30pm - 3:30pm (CDT)/2:30-4:30pm (EDT). The theme is, "The Importance and Value of Advocacy: Engaging with Policy Makers," featuring a panel comprised of members of Congress and staff, including: CBITF Co-chairs, **Reps. Bill Pascrell, Jr. (D-NJ)** and **Don Bacon (R-NE)**; **Rep. Earl Blumenauer (D-OR)**, **Rep. Markwayne Mullin (R-OK)**; and **Michael Gamel-McCormick, Disability Policy Director for Senate Special Committee on Aging**, which is Chaired by Senator Sen. Robert (Bob) Casey, Jr. **Matt Breiding PhD**, TBI Team Lead, National Injury Center, is also scheduled to talk. You do not want to miss this opportunity! **Register [here!](#)**



## Fiscal Year (FY) 2022 Appropriations

### **President Signs FY 2022 Spending Bill: Increases TBI Funding and Reauthorizes VAWA**

President Biden signed the Consolidated Appropriations Act 2022, H.R. 2471, Friday after the Senate passed the measure on Thursday night. The \$1.5 trillion bill includes emergency funding for Ukraine; funding for emergency supplemental funding for response to COVID-19; and increases for many domestic programs, including programs impacting brain injury. The bill includes \$730 billion in non-defense funding, which is a \$46 billion increase over Fiscal Year 2021. This 6.7 percent increase is the largest in four years for non-defense programs.

The bill also **reauthorized the Violence Against Women Act (VAWA) through 2027**. The program expired three years ago, although Congress continued to fund VAWA programs. Among the provisions, the reauthorization provides for services, protection and justice for young victims of violence and enhances judicial and law enforcement tools to better support survivors who are 50 years of age or older and survivors with disabilities.

Funding for **National Institutes of Health** is increased by 5.3%, to \$45 billion, with language requiring each of its 27 institutes and centers to grow by at least 3.4%. Included in the budget is \$1 billion to create the Advanced Research Projects for Health Agency (ARPA-H), a new initiative pushed by the President and modeled after the Defense Advanced Research Projects Agency (DARPA) tasked with advancing research and development of science and technology programs. Overall the bill provides \$620,000,000 for the BRAIN Initiatives, including \$152,000,000 authorized by the Cures Act.

The spending bill extends existing telehealth flexibilities for 151 days beyond the end of the public health emergency (PHE), approximately five months. These flexibilities include:

- Waiving geographic and originating site restrictions;
- Expanding the list of eligible practitioners;
- Allowing audio-only telecommunications; and
- Permitting telehealth as a face-to-face encounter prior to recertification of a patient's eligibility for hospice care.

Other highlights include more than \$3 billion – a 6.6 percent increase – for **Homeless Assistance Grants** to provide shelter, resources, and assistance to the homeless community and additional funding for the following programs:

### **Department of Health and Human Services (HHS)**

Overall, HHS will receive a total of \$108.3 billion. Appropriations to the **Substance Abuse and Mental Health Services Administration (SAMHSA)** is \$6.5 billion, an increase of \$530 million, to address the mental health crisis. The **Health Resources and Services Administration (HRSA)** received \$8.9 billion, an increase of \$1.4 billion, that includes \$1 billion for programs to improve maternal and child health.

### **Administration for Community Living (ACL)**

- \$15.321 million for the Administration on Community Living **TBI State Grant Program which is an increase of \$4 million** from FY21.
- Increased funding to the National Institute on Disability, Independent Living, and Rehabilitation Research (NDILIRR) to increase annual grant funding to competitively funded model systems centers, and a \$100,000 increase for the Traumatic Brain Injury Model Systems National Data and Statistical Center within the National Institute on Disability, Independent Living, and Rehabilitation Research.
- \$1 million increase for the Lifespan Respite Care Program, \$8.1 million total.

- \$5.5 million increase for the National and Native American Family Caregiver Support Programs, \$205 million total.
- \$400,00 for the RAISE Act Family Caregiving Advisory Council to continue working on the National Family Caregiver Strategy.
- Language to encourage ACL to coordinate with the Department of Labor to identify and reduce barriers to entry for a diverse and high-quality direct care workforce, and to explore new strategies for the recruitment, retention, and advancement opportunities needed to attract or retain direct care workers.
- \$399 million for Home and Community-based Supportive Services, an increase of \$6 million above the FY 2021 enacted level.
- University Centers for Excellence in Developmental Disabilities were level funded.

#### **Centers for Disease Control and Prevention (CDC)**

The CDC was appropriated \$8.5 billion, an increase of \$582 million, with an emphasis on the public health infrastructure.

- \$8.75 million was appropriated for Traumatic Brain Injury within the Centers for Disease Control and Prevention, **including a \$2 million set-aside for concussion surveillance**. This is an increase of \$2 million from FY21.
- \$491 million, an increase of \$15 million above the FY 2021 enacted level, for opioid overdose prevention and surveillance.

#### **Health Resources and Services Administration**

- The bill included HRSA Strategy to Address Intimate Partner Violence and Project Catalyst. The agreement includes no less than \$2,000,000 for the HRSA Strategy to Address Intimate Partner.

#### **Department of Defense**

- \$60 million for peer-reviewed brain injury and neurological disease prevention research within the Defense Health Program.
- \$170 million for peer-reviewed traumatic brain injury and psychological health research within the Defense Health Program.

#### **Department of Education**

The bill appropriated \$42.6 billion, an increase of \$2 billion over the fiscal year 2021 enacted level for K-12 Education, including Individuals with Disabilities Education Act programs.

- \$14.5 billion for Special Education, an increase of \$48 million above the FY 2021 enacted level.

#### **Department of Justice (DOJ)**

Funding is also included for programs that support training for officers to properly handle interactions with individuals who have mental illness or a disability (\$10 million), officer mental health and wellness (\$8 million), the purchase of body cameras (\$35 million) and bulletproof vests (\$30 million), and rural law enforcement needs (\$8 million).

#### **Military Construction-VA**

**Long-Term Care for Veterans with Severe Traumatic Brain Injury (TBI)** — The Committee continues to note the increasing prevalence of deployment-related traumatic brain injuries. This increase continues to demonstrate the longstanding need for providing adequate long-term specialty care for Veterans suffering from severe TBIs. The Committee appreciates the VA's

progress on this issue and directs VA to (1) ensure an adequate number of long-term residential care facilities tailored to care for Veterans with severe TBIs are available and (2) consider entering into agreements to provide long-term specialty care for Veterans suffering from severe TBIs where VA-provided direct care is not available.

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## Other Legislation

### Senators Introduce Bill to Help People Living with Long-COVID

On March 2, Senator Tim Kaine (D-VA), a member of the Senate Health, Education, Labor, & Pensions (HELP) Committee, led the introduction of the Comprehensive Access to Resources and Education (CARE) for Long COVID Act, to help people living with long-term COVID-19 symptoms. This bill would improve research on long COVID as well as provide resources for people with long COVID. Senators Ed Markey (D-MA) and Tammy Duckworth (D-IL) are also helping to introduce this legislation. Specifically, the CARE for Long COVID Act would:

- Accelerate research by centralizing data regarding long COVID patient experiences;
  - Increase understanding of treatment efficacy and disparities by expanding research to provide recommendations to improve the health care system's responses to long COVID;
  - Educate long COVID patients and medical providers by working with the CDC to develop and provide the public with information on common symptoms, treatment, and other related illnesses;
  - Facilitate interagency coordination to educate employers and schools on the impact of long COVID and employment, disability, and education rights for people with long COVID; and
  - Develop partnerships between community-based organizations, social service providers, and legal assistance providers to help people with long COVID access needed services.
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The National Association of State Head Injury Administrators assists  
State government  
in promoting partnerships and building systems to meet the needs of  
individuals with brain injuries and their families.

**Support States. Grow Leaders. Connect Partners.**

