

## About Traumatic Brain Injury

In 2014, 2.8 million Americans sought treatment for or died from a traumatic brain injury (TBI) as the result of a car crash, fall, sporting or recreational injury, an assault or other contributing factors, according to the Centers for Disease Control and Prevention (CDC). As such, TBI is a leading cause of death and disability in the United States and can lead to a lifetime of physical, cognitive, emotional and behavioral changes.

TBI is a complex disability that challenges States' ability to respond in a timely and coordinated manner to individual and family needs, including access to post-acute rehabilitation, therapies, in-home support, education, employment, and short-term and long-term community and family supports. States provide these services through State and federal funding.

## About NASHIA

In 1994, State government employees formed the National Association of State Head Injury Administrators (NASHIA) to help States plan, implement and administer an array of public pro-grams and services for individuals with brain injury and their families. Members include private and public professionals, providers, family members and individuals with brain injury.

NASHIA collaborates with federal and national agencies and organizations and is a member of the American Brain Coalition (ABC), Coalition to Preserve Rehabilitation (CPR), Consortium for Citizens with Disabilities (CCD), Disability and Rehabilitation Research Coalition (DRRC), and the Injury and Violence Prevention Network (IVPN).

## Mission

NASHIA's mission is to assist State government in promoting partnerships and building systems to meet the needs of individuals with brain injury and their families.



# NASHIA

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**The NASHIA Public Policy Platform for  
the 117th Congress is available  
on the website.**

[www.nashia.org](http://www.nashia.org)



**NATIONAL ASSOCIATION  
OF STATE HEAD INJURY  
ADMINISTRATORS**

## Public Policy Priorities



## 117<sup>th</sup> Congress Second Session

February 2022

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

**NASHIA supports** federal policies which lead to coordinated systems of care and supports to enable people with brain injury of all ages to return to home, school and work in order to live independent and productive lives.

### Enhance and expand State capacity to provide services and supports.

- **\$19M** to fully fund the HHS' Administration for Community Living (ACL) Federal TBI State Partnership Program to increase the number of State grant awards from 28 to 51.
- **\$6M** for the ACL P&A TBI Grant Program to increase the minimal amount of \$50,000 per P&A program.
- **\$5M** to establish the Centers for Disease Control and Prevention's (CDC) national concussion surveillance project.
- Expand home and community-based services and supports:
  - ◆ HCBS Access Act
  - ◆ Build Back Better Act
  - ◆ Incentives to recruit and maintain direct care workers, private duty nurses.



### Improve services for underserved populations.

- SAMHSA funding to provide treatment and support for individuals with mental health and/or substance use issues.
- Funding to support screening older adults for TBI after a fall and for TBI health promotion and awareness in keeping with the Supporting Older Americans Act..
- Violence Against Women Reauthorization to include brain injury screening, training, accommodations, strategies, and resources.

### Improve outcomes for individuals in juvenile and criminal justice systems.

- Juvenile justice and corrections reauthorizing legislation to support TBI screening, training, accommodations, strategies, and resources for community re-entry.
- Traumatic Brain Injury and Post-Traumatic Stress Disorder Law Enforcement Training Act .



### Ensure availability of public assistance and safety net programs.

- NASHIA opposes work requirements with regard to such programs as housing assistance, Medicaid, and SNAP.
- Preserve and strengthen Social Security, Medicare, and Medicaid programs.
- Increase the age of onset of disability to allow individuals injured after the age of 26 to participation in ABLE accounts.



### Improved services for children and youth.

- Full funding for IDEA .
- Improved reporting of TBI in IDEA's Child Find.
- Increased funding for Emergency Medical Services for Children (EMSC).



### Maintain and expand access to health, trauma, and rehabilitation services.

- Health care insurance plans that provide necessary rehabilitation and therapies.
- Medicare and Medicaid reimbursement methods to support comprehensive post-acute rehabilitation, cognitive and behavioral therapies.

- Initiatives to address treatment for pain, yet avoid dependence.
- "Mission Zero Act" legislation that would partner civilian trauma centers with military trauma professionals to provide patients with the highest quality of trauma care in times of peace and war.
- Ensure the rights of individuals with brain injury access to COVID-19 vaccine and hospitalization for COVID-19 treatment.



### Expand research for promising practices for treatment, rehabilitation, and community services and supports.

- Funding to continue and expand the National Institute of Health (NIH) led Project BRAIN Initiative.
- Funding to increase the number of ACL's National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) TBI Model Centers, currently 16 TBI model centers.
- Targeted research on the impact of COVID-19 on people with disabilities.



### Expand primary, secondary and tertiary prevention to reduce the number of TBIs and to minimize the affects and optimize outcomes.

- Funding for older adults falls prevention programs administered by CDC and ACL.
- Funding for research related to preventing firearm injuries and deaths.
- Increased funding for the CDC TBI Program to prevent and minimize the effects of TBI.

