

NATIONAL ASSOCIATION OF STATE HEAD INJURY ADMINISTRATORS

PUBLIC TESTIMONY TO THE SENATE SUBCOMMITTEE ON LABOR, HEALTH AND HUMAN SERVICES, EDUCATION, AND RELATED AGENCIES

ADDRESSING FY 2023 APPROPRIATIONS FOR THE DEPARTMENT OF HEALTH AND HUMAN SERVICES, ADMINISTRATION FOR COMMUNITY LIVING AND THE CENTERS FOR DISEASE CONTROL AND PREVENTION

May 10, 2022

On behalf of the National Association of State Head Injury Administrators (NASHIA), thank you for the opportunity to submit testimony regarding fiscal year 2023 appropriations for federal programs that impact approximately 2.87 million Americans who are treated annually in emergency departments and hospitals for a traumatic brain injury (CDC, 2014). We appreciate your support for additional funding for FY 2022 to the U.S. Department of Health and Human Services' (HHS) Administration for Community Living (ACL) TBI State Partnership Program that helps states expand services to address the cognitive, behavioral and physical rehabilitative and long-term needs of Americans living with brain injury in accordance with the Traumatic Brain Injury (TBI) Program Reauthorization Act of 2018.

However, as not all States or territories are currently participating in the grant program, NASHIA is requesting increased funding for the ACL TBI State Partnership Program (TBI SPP) so that individuals living with brain injury and their families have resources and assistance to return to home and community, school and employment regardless of where they live in this country. In addition, we support full funding for the National Concussion Surveillance System administered by the CDC's National Center for Injury Prevention and Control (NCIPC). And, we also support additional funding for the ACL's National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) program authorized by the Workforce Innovation and Opportunity Act (WIOA) of 2014, which authorizes research, including research conducted by the TBI Model Systems. Specifically, NASHIA is requesting:

- **\$19 million additional funding for the ACL TBI State Partnership Program** to provide funding to all states, territories and District of Columbia;
- **\$5 million additional funding for the CDC's NCIPC to establish and oversee a National Concussion Surveillance System** as authorized by the TBI Program Reauthorization Act of 2018.

NASHIA is also requesting a funding increase of **\$6.6 million** to expand the **NIDILRR TBI research** capacity through the TBI Model Systems (TBIMS):

- **To increase the number of TBIMS** from 16 to 18 (\$2.5 million each; and
- **\$1 million to expand TBIMIS collaborative research projects** for additional research on TBI as a chronic condition.

Each year, a substantial number of Americans are injured due to motor vehicle crashes, falls, military-related injuries, violence, industrial injuries, sports-related injuries and other injuries that cause cognitive, emotional, physical, sensory and health-related problems resulting in unemployment and loss income; homelessness; incarceration; and institutional and nursing home placement due to lack of community alternatives. While recent trends have noted the increasing number of Americans with TBI-related disabilities among older adults due to falls, the COVID-19 pandemic is raising alarms regarding those who are infected who may experience hypoxia due to the deprivation of oxygen, resulting in brain damage that may necessitate the need for rehabilitation to regain functioning and ongoing supports should functioning not be restored. In addition, the increased risk of domestic and intimate partner violence during the time of the “stay at home” orders put people at risk for sustaining a brain injury from the abuser hitting the head, slamming the head against the wall or from near strangulation. As we emerge from the pandemic, the impact on both those at risk for a brain injury and for those with a brain injury will certainly become more apparent.

This past year has been especially challenging for individuals with brain injury and their families. States have reported that brain injury program participants have cancelled services due to the fear and anxiety that COVID-19 has caused them. At the same time, providers have experienced loss of income as the result of not being able to perform contractual duties due to the restrictions related to the pandemic. Thus, the federal funding requested is critical to assist states with issues that emanated from the pandemic as programs and services are brought back to pre-pandemic status.

Administration for Community Living – TBI Act Programs

The ACL TBI State Partnership Grant Program is the *only* program that assists states in building and expanding service capacity to address the complex needs associated with brain injury that generally require the coordination of multiple systems (e.g., medical, rehabilitation, education, vocational, behavioral health, and Medicaid/Medicare) and payers (e.g., insurance, Workers’ Comp, state and federal programs). Twenty-eight states are currently funded by the ACL TBI SPP for five years. We are requesting additional funding so that all states, territories and District of Columbia may receive funding to address gaps in services within their states.

These grants also help to carry out the ACL priorities to increase direct services, including home and community-based services; accelerating COVID-19 recovery; supporting caregivers; and advancing equity.

**Centers for Disease Control and Prevention – National Center on Injury
Prevention and Control**

CDC's National Injury Center initiated a pilot study as a first step in implementing a national surveillance system to determine the extent of mild brain injury or concussions in this country. Most individuals with a concussion are treated in an emergency department or physician's office and may not be reported in other data systems that capture the number of Americans who are hospitalized with moderate to severe TBI. Subsequently, Congress included \$5 million authorization to implement the National Concussion Surveillance System within the TBI Program Reauthorization Act of 2018.

Last year, the Government Accountability Office (GAO) issued a Report to Congress that found that data on the overall prevalence of brain injuries resulting from intimate partner violence are limited and that such data is needed to better understand the problem to ensure that resources are targeted appropriately to address these issues. In 2013, the Institute of Medicine (IOM) and the National Research Council released an extensive report on sports-related concussions in children and teens and also examined sports-related concussions among military dependents, as well as concussions in military personnel ages 18 to 21 that result from sports and physical training at military service academies or during recruit training. The report noted that limited data is available and recommended that CDC oversee a national surveillance system to accurately determine the incidence of sports-related concussions.

We strongly support funding to implement a national surveillance system to help states, federal and national partners with needed data to address prevention, identification, and treatment for concussions. We are joined in this support by:

AANS/CNS Joint Section on Neurotrauma & Critical Care; ADvancing States; Alzheimer's Association; American Academy of Physical Medicine and Rehabilitation (AAPMR); American Association of Neurological Surgeons; American Physical Therapy Association; Brain Injury Association of America; Concussion Legacy Foundation; Congress of Neurological Surgeons; Friends of TBI Model Systems; Injury Prevention Research Center at Emory; Matthew Gfeller Center, University of North Carolina at Chapel Hill; National Association of State Directors of Developmental Disabilities Services; National Association of State Mental Health Program Directors; National Athletic Trainers' Association; National Disability Rights Network; North American Brain Injury Society; Safe Kids Worldwide; SCORE Program, Children's National Hospital; The Center on Brain Injury Research & Training at the University of Oregon; The National Concussion Management Center; United States Brain Injury Alliance (USBIA); USA Field Hockey; USA Lacrosse; and USA Football.

**ACL's National Institute on Disability, Independent Living, and Rehabilitation
Research (NIDILRR)**

NIDILRR supports innovative projects and research in the delivery, demonstration, and evaluation of medical, rehabilitation, vocational, and other services designed to meet the needs of individuals with TBI through TBI Model Systems grants. Each TBI Model System contributes to the TBI Model Systems National Data and Statistical Center (TBINDSC), participates in independent and collaborative research, and provides valuable information and resources. This research is critical to help TBI providers to better deliver services that result in good outcomes.

In closing, NASHIA is a nonprofit organization that works on behalf of states to promote partnerships and build systems to meet the needs of individuals with TBI with the goal of all states having resources to assist individuals with TBI to return to home, community, work and school after sustaining a brain injury. Federal funding is critical to help states in that endeavor, including data and research to support an effective delivery system. We urge you to consider increasing funding to the ACL TBI State Partnership Program; the ACL NIDILRR program to expand TBI research; and to CDC to establish a National Concussion Surveillance System.

Thank you for your continued support. Should you wish additional information, please do not hesitate to contact:

Susan L. Vaughn, Director of Public Policy

E-mail: svaughn@nashia.org

or

Zaida Ricker, NASHIA Government Relations

Email zricker@ridgepolicygroup.com