

## 2013 Legislative and Public Policy Agenda

### BACKGROUND

- More than 95,000 Iowans live with long term disability from brain injury.
- Brain Injury is the “signature injury” of our recent and current military operations.
- **A “concussion” IS a brain injury.**
- Treatment and services for Iowans with brain injury are grossly unfunded and uncoordinated resulting in significant poverty, joblessness, mental health treatment, incarceration, and homelessness for Iowans with brain injury.
- An explosion of recent research medical research and evidence indicate that rehabilitation and support services in the months immediately following a brain injury result in significantly better long-term outcomes, increased independence, and decreased impact on families and communities.
- Individuals with disability from with brain injury require specialized support in a number of ways but deserve, and can benefit from, the same level of services and supports as Iowans with mental health or intellectual disability needs.
- Prevention of brain injury is the ONLY cure.

With a mission that guides response to these issues, BIA-IA proposes the following Legislative and Public Policy Agenda:

## Services and Support

- **BIA of Iowa recommends an increase of \$410,000 in the Iowa Department of Public Health Budget for the Brain Injury Services Program to accommodate the increased demand for brain injury resource facilitation, information, and training and coordination.**

*EXPLANATION:* The Alliance supports the Department of Public Health as the designated **Lead Agency** for Brain Injury in the State of Iowa. This allocation to the Department of Public Health’s Brain Injury Services Program is currently the only statewide services system of its kind. This system serves Regional MH/DS systems, Mental Health Systems, Substance Abuse Systems, the Correctional System, the Intellectual Disability Service System, as well as thousands of individuals with brain injury and their families across the state providing essential access to vital health care and lifelong living services. The Brain Injury Services Program needs funding for:

1. Neuro-Resource Facilitation to serve 1,000 additional Iowans experiencing brain injury – an increase of \$250,000
2. Enhanced brain injury training and the recruitment of service providers statewide – an increase of \$65,000
3. Funding for one FTE at the Iowa Department of Public Health to serve as the State Brain Injury Service Program Manager - \$95,000

- **The Alliance supports funding for the existing core services and prioritized expanded core services as recommended to the Department of Human Services by the legislatively mandated MH/DS Redesign, Expert Brain Injury Workgroup. These “best practices in brain injury services and education” are critical to the State of Iowa.**

*EXPLANATION:* Brain injury is not a “mandated” treatment group in Iowa. Consequently neither the State, Counties nor Regions provide essential community-based services to Iowans with brain injuries. As a result the vast majority of Iowans with long term disability from brain injury are unable to access appropriate, accessible, available, affordable, and acceptable services and supports. This results in poorer outcomes, impoverishment, homelessness, incarceration and institutional placement for many individuals often at significant public cost. More funding for brain injury services and provider education is essential.

The 2011 – 2012 Brain Injury Redesign Workgroup, as part of the legislatively mandated Redesign of Iowa’s Mental Health / Disability services system, developed and released a thorough and prioritized list of service recommendations to the legislature (via DHS) in January of 2012 (see attached). At least 24 other states fund brain injury community-based services. For example Minnesota generates revenue with a surcharge on drivers license reinstatement fees. It is time the Iowa legislature accept and fully implement funding of brain injury services in Iowa.

- **BIA of Iowa recommends eliminating the waiting list for Medicaid brain injury services by *fully* funding the Home and Community-Based Brain Injury Waiver at the projected level of growth.**

*EXPLANATION:* At this time last year more than 400 Iowans (August, 2012) were on the HCBS BI Waiver waiting list. Iowans with brain injury were waiting over **8 months** for vital services that prevent costly institutionalization. Not only such a delay a cost to taxpayers, but it is devastating to the continuum of care so necessary for steady progress in rehabilitation following acute care.

- **BIA of Iowa recommends that all new state healthcare reform legislation and policy include the need for adequate acute care, post-acute rehabilitation, and home and community-based services for Iowans with brain injury.**

*EXPLANATION:* As the State of Iowa prepares to develop and implement programs and services around national health care reform, it is essential that those with brain injury, one of Iowa’s most vulnerable populations, be included.

- **BIA of Iowa supports revision of regulations that restrict services and supports for care for Iowans with brain injury in intermediate care facilities.**

*EXPLANATION:* Currently brain injury services and supports at the ICF level are restricted by rates developed for use with non-brain injured populations, resulting in inadequate funding for ICF levels of care for Iowans with brain injury.

# Prevention

- **BIA of Iowa supports the expansion of the 2011 Iowa Youth Sports and Brain Injury to extend coverage to youth athletes of all ages in all organized venues across the state.**

*EXPLANATION: Current medical research is glaringly clear. The cumulative effect of sports related brain injury (every impact adds up) puts our youth at risk of premature disability and death. In July of 2011 SF 367 became law. This was the “An Act Concerning the Protection of Student Athletes From Concussion and Other Brain Injuries”. This law has dramatically increased protection of student athletes by requiring training for the recognition of the signs, symptoms and behaviors of brain injury in youth athletes. However it is time to extend this protection to ALL youth athletes beyond high school setting alone. Younger athletes and athletes that participate in Parks and Recreation or other Municipally organized sporting events deserve and demand the same protections. Also essential is establishment of consistent standards for the education for officials and coaches who are required to recognize concussion symptoms and make appropriate judgments.*

- **BIA of Iowa supports a Universal Helmet Law in Iowa.**

## **EXPLANATION:**

- **Motorcycle helmets clearly work to reduce injuries and fatalities among motorcyclists.** Helmet laws increase helmet usage, which in turn saves lives and reduces brain injury. This has been proven numerous times through state fatality data.
- **A universal motorcycle helmet law is an effective and efficient traffic safety law.** When a state passes a helmet law covering all riders, helmet use rates rise nearly to 100 percent. One reason is that law enforcement officers can easily determine if a motorcyclist is wearing a helmet. But states need the right law – a law requiring everyone who rides to wear a helmet. Age-specific laws that require only minors to wear helmets have little or no impact and are virtually impossible to enforce. Likewise, helmet laws for all riders that are tied to licensing or rider education requirements are equally difficult to enforce and create burdens on law enforcement.
- **Helmet prevent brain injury.** Motorcycle helmets save lives and prevent devastating and debilitating brain injuries. Motorcyclists who ride without helmets run a significantly greater risk of death or permanent injury.
- **Motorcycle helmets are 67 percent effective in preventing brain injuries.** Unhelmeted motorcyclists are over three times as likely to suffer a brain injury as those who are helmeted.
- **Helmet laws reduce public payout.** Helmet laws significantly reduce the strain on public resources. Unhelmeted riders cost more to treat at the hospital, spend a longer time in rehabilitation, and are more likely to require some form of public assistance to for pay medical bills and rehabilitation.
- **Helmet laws make good economic sense.** Every state legislature struggles with answering voters’ requests for better educational systems and lower crime rates, yet significant state dollars are spent on citizens who incur avoidable brain injuries while riding a motorcycle without a helmet.

## **BIA of Iowa also recommends legislation to address the following:**

- **Implement a Graduated Drivers License system in Iowa.**
- **Require the use of “hands-free” devices while using cell phones.**
- **Require helmet use for children when riding bicycles.**