

Congress of the United States
Washington, DC 20515

May 20, 2011

The Honorable Denny Rehberg
Chairman
Appropriations Subcommittee on Labor,
Health & Human Services, and Education
H-307, The Capitol
Washington, DC 20515

The Honorable Rosa DeLauro
Ranking Member
Appropriations Subcommittee on Labor,
Health & Human Services, and Education
1016 Longworth House Office Building
Washington, DC 20515

Dear Chairman Rehberg and Ranking Member DeLauro:

As Co-Chairs of the Congressional Brain Injury Task Force and long-time advocates of efforts to address traumatic brain injury (TBI), we respectfully request the inclusion of report language in the fiscal year (FY) 2012 Labor, Health & Human Services, and Education Appropriations committee report that supports the TBI Model Systems (TBIMS) program. As you know, the TBIMS program is funded by the National Institute on Disability and Rehabilitation Research (NIDRR) at the Office of Special Education and Rehabilitative Services (OSERS) within the U.S. Department of Education (ED). All TBIMS funds are distributed via peer-reviewed, competitive grant processes conducted by NIDRR.

The TBIMS program creates and disseminates new knowledge that improves the lives of people with TBI and their families through the conduct of innovative research and the development and validation of treatment interventions. Since the TBIMS program began in 1987, it has proven to be among the most successful, cost-effective, and impactful programs funded by the Federal government. The importance of the program has been further magnified in recent years as thousands of veterans return from Iraq and Afghanistan with TBI and as TBI has been recognized as the signature wound of these wars.

With limited resources, the TBIMS program has improved the acute care and rehabilitation received by the millions of Americans that sustain a TBI each year. These efforts have brought dramatic improvements to the treatment of TBI that permit individuals with TBI to better adapt and integrate back into their everyday social networks, remain meaningfully employed, and address the multitude of social and behavioral problems common following TBI, including substance abuse, depression, and familial disintegration.

The TBIMS program currently funds 16 regionally-distributed Centers, two multi-center collaborative research projects, and a centralized data repository. All of the programs are competitively funded through 5-year funding cycles. The TBIMS Centers program's most recent cycle runs through FY 2012, meaning that the program will be competed in FY 2012 for the next 5-year cycle (FY 2012 – FY 2017). We strongly urge the Subcommittee to include the following report language under NIDRR to ensure that this critically important program has the resources necessary to carry out its important mission that benefits civilian and military populations alike:

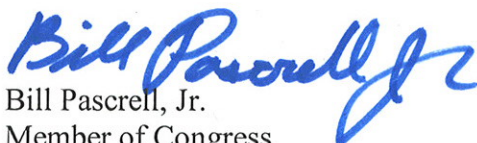
The Committee strongly supports the Traumatic Brain Injury Model Systems (TBIMS) program funded by NIDRR. Almost 500 peer-reviewed publications have resulted from TBIMS research since 1987, bringing dramatic improvements to the treatment of TBI for both civilian and military populations. The Committee is aware that the TBIMS Centers will compete for new 5-year awards in fiscal year 2012. The Committee bill includes sufficient funds to support no fewer than 16 competitively-awarded Centers with adequate resources to meet the research objectives of the TBIMS program. The Committee intends that funds provided will enhance the capability of Centers to conduct critical multi-center investigations, expand the Centers' scope of intervention studies, maintain the ongoing high quality of the Centers' longitudinal research while keeping pace with the increased number of participants followed, and promote continued collaboration to improve outcomes for civilians and service members with traumatic brain injury. The Committee also commends NIDRR for establishing collaboration between the TBIMS program and the Department of Veterans Affairs and encourages continuation of these efforts.

This report language is important because it is critical that the number of competitively awarded Centers remain at least at the current level of 16 and that each funded Center receive the resources necessary to carry out this important work. There are a finite number of studies in which an individual Center can participate and in the current funding cycle, important research projects could not be pursued because there were not enough Centers available to collaborate. Additionally, funding for the longitudinal research conducted by the Centers has not kept pace with the increase in the number of participants followed and the number of interviews conducted. As a result, Centers have been forced to propose smaller, less costly local intervention studies.

We note that this request does not request additional funding nor is it an earmark as entities must compete to participate in the TBIMS Centers program. In the most recent funding cycle, significantly more than 16 organizations from around the country applied to NIDRR to participate in this program and only the 16 most qualified and meritorious entities were selected. It is expected that the same will hold true for the upcoming funding cycle. This language simply will ensure that NIDRR will fund at least 16 Centers in the next 5-year cycle so that the important work of addressing TBI can continue.

Thank you for your attention to this important matter. If you have any questions, please do not hesitate to contact Rose Hacking in the office of Congressman Bill Pascrell, Jr., at Rose.Hacking@mail.house.gov or Marianne Myers in the office of Congressman Todd Russell Platts at Marianne.Myers@mail.house.gov.

Sincerely,



Bill Pascrell, Jr.
Member of Congress
Co-Chair, Brain Injury Task Force



Todd Russell Platts
Member of Congress
Co-Chair, Brain Injury Task Force