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BRAIN INJURY ADVOCATES DEMAND GREATER ACCESS, FEWER BARRIERS TO COGNITIVE REHABILITATION

Brain Injury Association of America issues call for immediate action in support of 5.3 million brain injury survivors and their families to bridge treatment gap

McLean, Va., January 8, 2007 – The Brain Injury Association of America (BIAA) today released a position statement that calls on lawmakers and private sector payers to eliminate barriers to access and delivery of cognitive rehabilitation treatment for patients with acquired brain injuries.

Cognitive Rehabilitation: The Evidence, Funding and Case for Advocacy, addresses the fact that an overwhelming majority of brain injury survivors have cognitive impairments, or thinking problems and that they often have challenges accessing the treatment modality that has been shown through research to benefit them the most: cognitive rehabilitation. Cognitive impairments interfere with the brain-injured patient's ability to function effectively in school and at work and also have an impact on their personal relationships. Access to cognitive rehabilitation is a way of helping brain-injured patients regain function in areas that are essential for a return to independence and a reasonable quality of life.

“Cognitive rehabilitation can help people regain their independence, but many insurance companies deny coverage claims and public health agencies limit the scope, duration and timing of treatment,” said Susan Connors, BIAA President and CEO. “Patients with brain injury and family caregivers suffer because of lack of access to this important treatment modality.”

Cognitive rehabilitation is a systematically applied set of medical and therapeutic services provided by physicians and allied health professionals to improve cognitive functioning after brain injury. The treatment requires patients to work through thinking exercises that restore attention, memory, word recall and other language abilities. Brain injury survivors also learn to use tools to help with planning, organization and daily activities such as calendars, pagers, alarms or PDAs.

“The benefits of cognitive rehabilitation have been discussed in more than 700 published research studies and are evident in positron emission tomography (PET) scans and other neuroimaging techniques,” said Dr. Douglas I. Katz, Brain Injury Programs Medical Director at Braintree Rehabilitation Hospital in Braintree, Mass., and first author of the BIAA’s position statement. “Numerous scientific organizations and professional societies have adopted treatment guidelines and acknowledged the value of cognitive rehabilitation.”

The BIAA believes that cognitive rehabilitation should be provided by the existing national network of qualified practitioners who have fulfilled the requirements for certification and licensure in their respective fields. Dr. Mark J. Ashley, Chairman of the Board of BIAA and President/CEO of the Centre for Neuro Skills headquartered in Bakersfield, Calif., cites the current needs of the ever-increasing number of servicemen and women returning from Iraq with blast brain injuries as an immediate opportunity to demonstrate the advantages of accessing this service provider network. “The Veterans’ Administration has advocated for advancing rehabilitation throughout its history and stands to lead the way to promotion of better treatment availability for our servicemen and women,” said Ashley. “The opportunities for substantial functional improvement associated with cognitive rehabilitation are especially relevant for these returning heroes. While the Veterans’ Administration does not currently have the capacity to treat the large number of servicemen and women returning with traumatic brain injury, it should consider contracting with civilian partners and providers in the private sector who have been providing these services for many years to the nonmilitary sector.”

The BIAA acknowledges the need for additional research on the benefits of cognitive rehabilitation for brain-injured patients. It also believes that the need for further exploration into the benefits of cognitive rehabilitation should not be used as an excuse to withhold payer support for treatment. “Many people who sustain brain injuries make remarkable recoveries when they get the appropriate treatment,” said Dr. Gregory J. O’Shanick, BIAA Medical Director and President/Medical Director of the Center for Neurorehabilitation Services, PC in Richmond, Va. “We can learn much more about what works through

additional research, but we need Congressional support to do so. The Traumatic Brain Injury (TBI) Model Systems, housed in the U.S. Department of Education's National Institute on Disability and Rehabilitation Research, hasn't had a pay raise in years. It is time to increase our investment in applied research as well as examine coverage denials and payment practices in the public and private sectors as related to treatment for victims of both traumatic and acquired brain injury."

Moving forward, the BIAA advocates the following priorities to provide a more comprehensive continuum of care for brain-injured patients:

- Expanded public and private payer coverage of sufficient scope, duration and intensity to accommodate the changing and long-term needs of patients with brain injury
- Expanded clinical education and certification for allied health practitioners who work with brain-injured patients
- Increased emphasis on research
- Improved integration of cognitive treatment in public vocational and social services
- Greater attention to the particular needs of brain-injured children in special education so they can move seamlessly throughout their lives within a comprehensive, coordinated system of care that is designed to improve their level of functioning, independence and, ultimately, give them back some of the skills and abilities stolen by their brain injury.

About the Brain Injury Association of America

Founded in 1980, the mission of the Brain Injury Association of America is to create a better future through brain injury prevention, research, education and advocacy. BIAA and its nationwide network of state affiliates, chapters and support groups represent the 5.3 million Americans who live with a lifelong disability as a result of traumatic brain injury, as well as their families and the researchers, clinicians and professionals who provide treatment and long-term care. For more information about brain injury or the BIAA, visit www.biausa.org.

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*Full copies of the position paper, **Cognitive Rehabilitation: The Evidence, Funding and Case for Advocacy**, can be obtained by visiting the Brain Injury Association of America website at www.biausa.org*