

# Allocate Federal Resources



## COORDINATE FEDERAL PROGRAMS

The U.S. Department of Health and Human Services (HHS) Administration for Community Living (ACL) funds programs impacting individuals with brain injury and families, including Aging and Disability Resource Centers, Assistive Technology, Independent Living Centers, Lifespan Respite Care; and the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR).

- Support HHS in carrying out its mandate to develop a plan for coordinating Federal activities impacting TBI service delivery.

## INCREASE TBI ACT FUNDING

ACL administers the TBI State Partnership Grant Program to help states increase access to services and supports for individuals with TBI throughout the lifetime and the Protection and Advocacy (P&A) TBI Grant Program to provide advocacy services for people with brain injury. Currently only 24 states receive TBI State grants, and all the P&A grants are severely under-funded.

- Appropriate \$19 million to the Federal TBI State Grant Program to increase the number of state grants to \$300,000 and appropriate \$6 million to the P&A Grant Program.

## FUND CDC TBI PROGRAM

The TBI Act of 1996, as amended, authorizes the Centers for Disease Control and Prevention (CDC) to collect data and conduct public education and research. The TBI Program Reauthorization Act of 2018 further authorized the establishment of a national concussion surveillance system.

- Support the TBI national concussion surveillance system at \$5 million as part of a total allocation of \$11.75 million and continue to include brain injury across multiple CDC programs, including STEADI, opioid misuse prevention, intimate partner violence, and others.

## ABOUT BRAIN INJURY

An acquired brain injury (ABI) is any injury to the brain that is not hereditary, congenital, degenerative, or induced by birth trauma. There are two types of ABI: non-traumatic and traumatic. Non-traumatic injuries arise from internal causes; traumatic injuries are caused by external forces. The Centers for Disease Control and Prevention (CDC) report that 2.8 million children and adults sustain TBIs annually and at least 5.3 million people live with a TBI-related disability. The cost to society for medical care and lost wages associated with TBI is \$76.5 billion (in 2010 dollars) annually.

Individuals with brain injury may experience memory loss, concentration or attention problems, slowed learning, and difficulty with planning, reasoning, or judgment. Emotional and behavioral consequences can include depression, anxiety, impulsivity, aggression, and thoughts of suicide. Physical challenges may include fatigue, headaches, difficulty with balance or motor skills, sensory loss, and seizures. Brain injury can lead to respiratory, circulatory, digestive, and neurological diseases – including epilepsy, Alzheimer's, and Parkinson's disease. Poor outcomes after brain injury result from shortened lengths of stay in both inpatient and outpatient treatment settings. Payers point to a lack of sufficient evidence-based research as a primary reason for coverage denial of medically necessary treatment. This occurs particularly when behavioral health services and cognitive rehabilitation are needed.

## ABOUT BIAA

Founded in 1980, the mission of the Brain Injury Association of America (BIAA) is to advance brain injury awareness, research, treatment, and education to improve the quality of life for all people affected by brain injury. BIAA is dedicated to increasing access to high quality care and accelerating research. With a network of state affiliates, local chapters, and support groups, BIAA provides help, hope, and healing and serves as the voice of brain injury for individuals who are injured, their families, and the professionals who provide research, treatment, and services.

**Sign up for BIAA's free e-newsletter, Policy Corner, at [biausa.org/policycorner](http://biausa.org/policycorner).**



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