



BRAIN INJURY

A Guide for Virginia Policy Makers
2nd Edition



Foreword

The Centers for Disease Control indicate 1.7 million traumatic brain injuries (TBIs) occur each year in the United States and result in 52,000 deaths, 275,000 hospitalizations, and 1.3 million emergency department visits. However, none of these numbers include data on those who receive no care (e.g., abused children), those who sustain non-traumatic injuries (e.g., stroke), or those who are treated in physicians' offices or military facilities.

Based on CDC estimates of the prevalence of disability from TBI and stroke and Virginia population estimates from the Weldon Cooper Center for Public Policy at the University of Virginia, more than 90,000 Virginians are disabled as a result of a TBI; over 95,000 are disabled as a result of a stroke. Therefore, more than 185,000 Virginians have some level of disability due to a brain injury.

Increased awareness of the number of brain injury survivors in the commonwealth has led to more state funded supports and services. A 2007 report by the Joint Legislative and Audit Review Commission, *Access to State Funded Brain Injury Services in Virginia*, concluded that these supports and services are a cost effective investment for the state, providing very beneficial community-based care far less expensively than institutionally-based care. However, the report also pointed out that access to these services is limited and needs to be improved. Thousands of Virginia citizens fail to receive adequate rehabilitation, lack access to housing options, vocational assistance and transportation services, and have virtually no system of community-based care if behavioral problems exist due to their brain injury. And the worst is yet to come. The already inadequate and overwhelmed system of care will be further swamped by untold numbers of war veterans who return home with traumatic brain injuries, the signature injury of our military's efforts in Iraq and Afghanistan.

Large areas of Virginia still lack services; in areas that do have services, survivors often face extensive waiting lists. State policy makers have been and will continue to be asked to address the needs of persons with brain injury throughout the commonwealth. Funding is needed for expansion of services into unserved and underserved parts of the state, to address existing wait lists, to provide outreach, information and referral services, for DARS funded brain injury services, to provide neurobehavioral health care, and for a brain injury Medicaid waiver.

TBI is truly the great equalizer; it is an injury that happens to a friend or family member who misses a step and takes a tumble, to a high school athlete on the football field on Friday night, to a wife on her honeymoon whose car is hit by a boulder thrown from an overpass, to a child who is hit by a car while riding his bike, or to a woman who is a victim of intimate partner violence. Over 4,000 Virginians are hospitalized annually because of a TBI, and the perception that it occurs as a result of reckless behavior is simply not accurate.

This manual, designed for state policy makers, will serve as a guide for understanding the effects of brain injury on the individual and on society. It provides an overview of current and past legislation, future needs for programs and services for persons with brain injury in Virginia, an overview of available programs and services throughout the state, and service gaps. It will provide valuable information as you address the needs of Virginians with brain injury.

Anne McDonnell, Executive Director

Joint Legislative Audit and Review Commission (JLARC) Report on BI in Virginia

Increased awareness of the number of brain injury survivors in the commonwealth and the services necessary to meet their needs has led to an increase in state funds as well as efforts to create a brain injury waiver program. As a result, and before allocating additional funds, the 2006 General Assembly commissioned a study on brain injury in Virginia to be conducted by the Joint Legislative Audit and Review Commission (JLARC). The study was to encompass several areas including:

- Causes and prevalence of brain injury in Virginia
- The availability of state funded services for survivors
- The effectiveness of these services
- DRS' oversight of state funded services
- How other states have addressed the needs of survivors

JLARC staff conducted interviews, surveys, and focus groups with survivors, caregivers, and providers throughout the commonwealth and released their report, *Access to State Funded Brain Injury Services in Virginia*, in September of 2007. A summary of some of the findings include:

- As many as 150,000 Virginians have long term disabilities resulting from a brain injury.
- More than 1,000 survivors have been able to access community based services as a result of increases in state funding. In spite of these increases, some areas of Virginia have no services or very limited services available; any existing services are very limited; waiting lists or other obstacles often block access.
- Thousands of survivors suffer from behavioral issues as a result of their injuries; those with severe behavioral issues often end up in long term or correctional facilities. Only 20 beds are available in Virginia to provide the necessary treatment for behavioral issues; all of these are private and insurers are often reluctant to cover behavioral treatment.
- Most insurance plans have limited coverage for brain injury services and coverage often ends too soon. Legal settlements and workers' compensation provide funding sources for some individuals but are not available for all survivors.
- TBI is considered to be the signature wound of the conflicts in Iraq and Afghanistan; however, federal assistance may not adequately meet the needs of these veterans. If they seek state funded services, Virginia's existing community based services may not be able to meet their needs.
- An increase in community-based services could reduce the number of survivors who reside in nursing homes and other long term care facilities. Expanding Virginia's Medicaid Individual and Family Developmental Disabilities Support Waiver or implementing a TBI specific waiver program could provide assistance for these individuals.