

# Brain Injury Association of Virginia

## Virginia Alliance of Brain Injury Service Providers

### 2020 Legislative Needs Statement

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#### **WHAT:**

*\$2,000,000 to support in-state neurobehavioral care*

#### **PATRONS AND ITEM NUMBERS:**

- Del Mark Sickles: **HB30, Item 313#6h**
- Sen David Marsden **SB30; Item 313#17S**

#### **WHY:**

The consequences of TBI are often devastating to the individual and their loved ones, and often results in chronic neurobehavioral sequelae, including cognitive deficits, changes in personality and increased rates of psychiatric illness. Individuals who exhibit extreme behaviors inevitably experience negative consequences in community and institutional settings. Research points to large numbers of individuals with brain injury who have been institutionalized in jails, prisons and mental health facilities because of their neurobehavioral complications. Virginia is no different; DARS's surveys of 9 state funded programs indicated more than 300 of their clients are in need of and would benefit from intensive and/or specialized neurobehavioral treatment and services. A study by researchers at James Madison University revealed shockingly high numbers of people sent to Braintree Manor, a nursing home in Massachusetts at exorbitant costs to receive neurobehavioral care. Residents of the Commonwealth who face these challenges and their families would be better served with in-state, community-based treatment options to meet their significant needs.

#### **HOW:**

DMAS would receive an infusion of funds to repatriate every Virginian at Braintree Manor back to the Commonwealth, and raise reimbursement rates to incentivize the establishment of an in-state, residential neurobehavioral treatment program. For what DMAS is currently spending on out of state care, more cost effective treatment could be provided to more people.