

HOUSE BILL REPORT

2SHB 2055

As Amended by the Senate

Title: An act relating to traumatic brain injury.

Brief Description: Concerning traumatic brain injuries.

Sponsors: By House Committee on Appropriations (originally sponsored by Representatives Flannigan, Ahern, McCoy, Ormsby and Santos).

Brief History:

Committee Activity:

Human Services: 2/20/07, 2/22/07 [DPS];
Appropriations: 3/3/07 [DP2S(w/o sub HS)].

Floor Activity:

Passed House: 3/8/07, 96-2.
Senate Amended.
Passed Senate: 4/10/07, 46-0.

Brief Summary of Second Substitute Bill

- Adds several provisions to assist individuals with traumatic brain injuries including: creating an advisory council, developing a public awareness campaign, facilitating support groups, and creating an account to fund the public awareness campaign and support groups.

HOUSE COMMITTEE ON HUMAN SERVICES

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 8 members: Representatives Dickerson, Chair; Roberts, Vice Chair; Ahern, Ranking Minority Member; Walsh, Assistant Ranking Minority Member; Bailey, Darneille, McCoy and O'Brien.

Staff: Sonja Hallum (786-7092).

HOUSE COMMITTEE ON APPROPRIATIONS

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Majority Report: The second substitute bill be substituted therefor and the second substitute bill do pass and do not pass the substitute bill by Committee on Human Services. Signed by 33 members: Representatives Sommers, Chair; Dunshee, Vice Chair; Alexander, Ranking Minority Member; Bailey, Assistant Ranking Minority Member; Haler, Assistant Ranking Minority Member; Buri, Chandler, Cody, Conway, Darneille, Dunn, Ericks, Fromhold, Grant, Haigh, Hinkle, Hunt, Hunter, Kagi, Kenney, Kessler, Kretz, Linville, McDermott, McDonald, McIntire, Morrell, Pettigrew, Priest, Schual-Berke, Seaquist, P. Sullivan and Walsh.

Minority Report: Without recommendation. Signed by 1 member: Representative Anderson.

Staff: Elisabeth Donner (786-7137).

Background:

Traumatic brain injury (TBI) occurs when a sudden trauma causes damage to the brain. A TBI can result when the head suddenly and violently hits an object, or when an object pierces the skull and enters brain tissue. Symptoms of a TBI can be mild, moderate, or severe, depending on the extent of the damage to the brain.

Traumatic brain injury can cause a wide range of functional changes. Disabilities resulting from a TBI depend upon the severity of the injury, the location of the injury, and the age and general health of the individual. Some common disabilities include problems with cognition (thinking, memory, and reasoning), sensory processing (sight, hearing, touch, taste, and smell), communication (expression and understanding), and behavior or mental health.

The Center for Disease Control (CDC) estimates that at least 5.3 million Americans, approximately 2 percent of the U.S. population, currently have a long-term or lifelong need for help to perform activities of daily living as a result of a TBI. Traumatic brain injuries contribute to a substantial number of deaths and cases of permanent disability annually.

According to the CDC, of the 1.4 million who sustain a TBI each year in the United States:

- 50,000 die;
- 235,000 are hospitalized; and
- 1.1 million are treated and released from an emergency department.

Among children under 14 years of age, TBI results in an estimated:

- 2,685 deaths;
- 37,000 hospitalizations; and
- 435,000 emergency department visits annually.

The federal government created the Traumatic Brain Injury Program (Program) to improve access to health and other services regarding TBI. The Program competitively awards state planning, implementation, and post-demonstration grants. Washington has received grants under this Program in the amount of \$100,000 for the purpose of building the system and the infrastructure to deliver services to individuals with TBI. The Program is being administered

through the Aging and Disability Services Administration in the Department of Social and Health Services.

Summary of Second Substitute Bill:

New Chapter

A new chapter is created in Title 74 to address new sections of law dealing with TBI.

Advisory Council

The bill creates the Washington Traumatic Brain Injury Strategic Partnership Advisory Council (Council) within the Department of Social and Health Services (Department). The Council consists of a wide variety of individuals who are appointed by the Governor. The Council includes representatives from several state agencies, non-profit agencies working with individuals with TBI, medical specialists, rehabilitation and vocational specialists, social workers, veterans, the National Guard, a Washington Native American Indian Tribe, the Washington Protection and Advocacy System, individuals with TBI, and family members of persons with TBI.

The initial appointments to the Council will be made by September 1, 2007, and the terms will be run for three years. The Council will annually elect a chairperson.

The duties of the Council include the following:

- (1) to collaborate with the Department to develop a comprehensive statewide plan to address the needs of individuals with TBIs;
- (2) provide recommendations to the Department on criteria to be used to select programs facilitating support groups by November 1, 2007;
- (3) submit a report to the Legislature and the Governor by December 1, 2007 on the following:
 - (a) the development of a comprehensive statewide information and referral network for individuals with TBIs;
 - (b) the development of a statewide registry to collect data regarding individuals with TBIs;
 - (c) the efforts of the Department to provide services for individuals with TBIs; and
- (4) to review the preliminary comprehensive statewide plan developed by the Department and submit a report to the Legislature and the Governor containing comments and recommendations regarding the plan by December 30, 2007.

Department Responsibilities

The following are responsibilities of the Department:

- (1) to designate a staff person who shall be responsible for the following:
 - (a) coordinating policies, programs, and services for individuals with TBIs; and
 - (b) provide staff support to the Council which may be funded through the TBI account;

- (2) to provide data and information to the Council that is requested by the Council and is in the possession or control of the Department;
- (3) by December 1, 2007, the Department must provide a preliminary report to the Legislature and the Governor and a final report by December 1, 2008, containing recommendations for a comprehensive statewide plan to address the needs of individuals with TBIs, that consider the following:
 - (a) building provider capacity and provider training;
 - (b) improving the coordination of services;
 - (c) the feasibility of establishing agreements with private sector agencies to develop services for individuals with TBIs; and
 - (d) other areas the advisory council deems appropriate;
- (4) by December 1, 2007, the Department must:
 - (a) provide information and referral services to individuals with TBI until the statewide referral and information network is developed. The referral services may be funded from the TBI account; and
 - (b) encourage and facilitate the following:
 - (i) collaboration among state agencies that provide services to individuals with TBIs;
 - (ii) collaboration among organizations and entities that provide services to individuals with TBIs; and
 - (iii) community participation in program implementation; and
- (5) by December 1, 2007, and by December 1 each year thereafter, the Department shall issue a report to the Governor and the Legislature containing the following:
 - (a) a summary of action taken by the Department to meet the needs of individuals with TBIs; and
 - (b) recommendations for improvements in services to address the needs of individuals with TBIs.

Program Development

By December 1, 2007, the Department is required to institute, in collaboration with the Council, a public awareness campaign that utilizes state or federal funding to leverage a private advertising campaign to promote awareness of TBIs through all forms of media including television, radio, and print.

By March 1, 2008, the Department is also required to provide funding to programs that facilitate support groups to individuals with TBIs and their families. The Department shall use a request for proposal process to select the programs to receive funding. The Council must provide recommendations to the Department on the criteria to be used in selecting the programs. The public awareness campaign and the support groups will be funded from the TBI account, to the extent that funds are available.

Traumatic Brain Injury Account

The Traumatic Brain Injury Account (TBI Account) is created with the State Treasurer. The Department may authorize spending on information and services related to the public awareness campaign, support groups, or information and referral services.

The TBI Account is funded by fees collected as part of a reissuing fee on licenses that have been suspended for driving under the influence. The reissuing fee is increased from \$150 to \$200. Twenty-four percent of each fee collected must be deposited in the TBI Account.

EFFECT OF SENATE AMENDMENT(S):

The Senate amendment changes the advisory council from being created within the DSHS to being an advisory council to the Governor, the Legislature, and the Secretary of DSHS. The Council must consider utilizing the Department of Information Services to develop the statewide registry.

The revenue source in the TBI Account is changed from an increased fee on suspended licenses to an additional \$2 fee on traffic infractions. Authority is granted to the DSHS to utilize the TBI account for information and referral services, as well as staffing for the council.

The bill is named the Tommy Manning Act.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: (Human Services)

(In support) Traumatic brain injury (TBI) is unknown to most people. This bill creates a public awareness campaign to help people begin to understand the problem and creates funding for support groups. Support groups are important for people with TBI. Many people with TBI fall through the cracks. Traumatic brain injury is a significant problem for our veterans. About 4,500 veterans returning to Washington will have concussive TBI. With TBI, the medical system focuses on the physical symptoms, but what many individuals with TBI need are a full range of services. There needs to be a priority on information and referral. I had a college degree and a job as an executive until my TBI and afterwards, I could not add or even feed myself. With rehabilitation I have been able to regain many of my abilities. Without rehabilitation, much progress of individuals with TBI would not be possible. It is very difficult to find resources in Washington. We need a registry in this state. Traumatic brain injury is also devastating to the family. There is a national crisis on Native American Reservations with TBI. There are no support groups on reservations. We have collected hundreds of signatures supporting a TBI bill.

(Opposed) None.

Staff Summary of Public Testimony: (Appropriations)

None.

Persons Testifying: (Human Services) (In support) Representative Flannigan, prime sponsor; Linda Hurley Ishem; Skip Dreps, Northwest Chapter Paralyzed Veterans of America; Gene van den Bosch and Richard Adler, Brain Injury Association of Washington; Penny Condoll, Linda Scheibe, and James R. Kelly, Tacoma Brain Injury Support Group; David Lord, Washington Protection and Advocacy System; Marlene Davis; Constance Miller, Brain Injury Resource Center; and John Ernest Berry III, Think First.

Persons Testifying: (Appropriations) None.

Persons Signed In To Testify But Not Testifying: (Human Services) None.

Persons Signed In To Testify But Not Testifying: (Appropriations) None.