

**Please Support
S.1168 & H.1956**

**Brain Injury Commission
Resolve**

More than **3.5 million children and adults** in the U.S. sustain an acquired brain injury (ABI) each year. Those who survive face a range of challenges—from temporary symptoms to life-altering disabilities. 5.3 million Americans live with a long-term disability as the result of traumatic brain injury (TBI), which is the leading cause of ABI. **Brain injuries occur** indiscriminately and affect not only the individual but their families and communities as well.

What is the Brain Injury Commission Resolve?

Purpose:

There is hereby established a special commission known as the Brain Injury Commission to review data concerning the epidemiology of brain injury and the needs of individuals with brain injury and their families in the commonwealth and to make findings regarding the current status of rehabilitative residential and integrated community-based support services for persons with acquired brain injury and persons with traumatic brain injury and recommendations regarding the improvement of such services.

Structure:

The commission shall consist of 2 members of the house of representatives, 1 of whom shall be appointed by the minority leader and 1 of whom shall be appointed by the speaker of the house, 2 members of the senate, 1 of whom shall be appointed by the minority leader and 1 of whom shall be appointed by the president of the senate, the secretary of health and human services or a designee; the assistant secretary of the office of disabilities and community services or a designee; the commissioner of public health or a designee from the office on health and disability, the commissioner of the Massachusetts rehabilitation commission or a designee, the secretary of elder affairs, the secretary of veterans services, the Executive Director of the Brain Injury Association of Massachusetts, and 8 persons appointed by the governor. The co-chairs of the commission shall be designated by the president of the senate and the speaker of the house.

Included in the Study:

The review and study shall include, but not be limited to the availability, nature and adequacy of the following services for the target population: acute and long-term medical and cognitive rehabilitation and outpatient services; therapy services; residential nursing care; structured day treatment and day activity programs; club programs; respite care services; community-based housing; home-based services; family support programs; case management; companion services; personal care attendant services; specialized medical equipment and supplies; environmental modifications; counseling and training; and prevocational services.

Findings and Recommendations:

The commission shall file a report of its findings and recommendations with the clerks of the house of representatives and the senate and the house and senate committees on ways and means not later than June 30, 2018. The report shall include findings regarding the cost of maintaining or establishing recommended services and any legislation necessary to implement or allow for the development or expansion of services for the target population.