Utah Traumatic Spinal Cord Injury (SCI) and Brain Injury (BI) Rehabilitation Fund

Legislative Report
SFY 2016

The Traumatic Spinal Cord Injury (SCI) and Brain Injury (BI) Rehabilitation Fund was established during the 2012 Utah Legislative Session (Section 26-54). Funds are to be used to “assist qualified IRC 501(c)(3) charitable clinics to provide: a) physical, occupational, and speech therapy; and b) equipment necessary for daily living activities for people with spinal cord and brain injuries.” To be eligible for the Fund, Utahns with spinal cord or brain injuries must show that other funding options have been exhausted (i.e. insurance benefits) or are not available to provide the services.

“The purpose of this Fund is to help people receive the appropriate rehabilitative care so they can maximize their recovery and functional ability. The science around traumatic spinal cord and brain injury rehabilitation has made tremendous progress during the last 20 years and we want Utahn to benefit from that progress and this Fund helps them to do that. As a result of the Fund, we see people who become healthier, more independent, have an improved quality of life, and are much more likely to return to work and school. From my perspective, it is an example of legislation that truly makes a difference for individuals, families, and our community,” said Representative Eric Hutchings.

Traumatic SCI/BI Rehabilitation Fund Accomplishments
The Traumatic SCI and BI Rehabilitation Fund has made positive impacts on clients’ lives. During State Fiscal Year 2016, a total of 40 clients received 3,207 sessions of physical therapy, 541 sessions of occupational therapy, and 484 sessions of speech therapy. Figure 1 shows the number of therapy visits during SFY 2014-2016.

Figure 1: Physical, Occupational, and Speech Therapy Visits, SFY 2014 - SFY 2016
Figure 2 shows that 58% of patients returned to work and/or school, 95% reported improved quality of life, and 88% demonstrated improvement in ambulation with or without assistive devices. These achievements can translate into dollars saved as shown in Table 1.

Success Story

“The wellness program has helped me maintain my health and get me stronger. It has helped me with my transfers and prevented muscle atrophy in my legs.” – Oanh, age 30

Success Story

Kyley was involved in a dirt biking crash in October 2015, resulting in a SCI. He received help from the Fund to extend physical therapy to increase his transfer abilities and the necessary strength and wheelchair mobility skills to be able to go back to work and live independently. He is now working full-time as a machine shop owner and craftsman and is continuing to participate in the wellness program so that he can maintain his strength and “keep up with my wife and three children.” – Kyley, age 40
The contractors, NeuroWorx and University of Utah Sugarhouse Outpatient Clinic, could each bill up to $100,000 for services and $50,000 for approved equipment purchases in SFY16. During this period, a total of $241,059 was expended with 64% of the funds going to services and 36% to equipment.

Additional accomplishments in SFY16 included:
- 100% of eligible clients received a 90-day evaluation.
- 70% of clients participated in recreational, leisure, and/or sports activities.
- 16 presentations were held, reaching 990 professionals and members of the community, to educate and train on spinal cord and traumatic brain injuries as well as the SCI and BI Rehabilitation Fund.
- 77 clients received an intake assessment, and 37 (48%) of those clients were referred to an alternative funding sources for services.
- Reached out to an average of 85 individuals with a SCI each week for 6 weeks during the 2016 SCI Annual Forum.

**Needs and Concerns Documented by Contractors**
- More education and awareness about the SCI and BI Rehabilitation Fund services is needed among providers outside the Wasatch Front.
- A great deal of time is spent assessing whether clients have additional resources available to them to ensure that the Fund is the payor of last resort throughout their care.
- There is a limited use of the Fund to participants outside of the Wasatch Front. As a result, the contractors will continue using telemedicine to promote Fund services.
Advisory Committee
The SCI and BI Rehabilitation Fund Advisory Committee is comprised of one legislator from both the Utah House of Representatives and Utah Senate, a survivor or family member of a person with a TBI appointed by the governor and a survivor or family member of a person with a SCI appointed by the governor the executive director of the Utah Department of Health. Members of the Advisory Committee met three times during SFY 16 and conducted business according to the Open and Public Meetings Act. Minutes are posted at pmn.utah.gov. Reports from the contractors were received and reviewed with the Advisory Committee.

Overview of SCI and BI Rehabilitation Fund (Section 26-54)
The SCI and BI Rehabilitation Fund was established during the 2012 Utah Legislative Session (Section 26-54) as a restricted special revenue fund that consists of gifts, grants, donations, etc. that may be made to the Fund from private sources, a portion ($20) of the impound fee as designated in Section 41-6a-1406, and amounts as appropriated by the Legislature. The fund shall be administered by the executive director of the Utah Department of Health in consultation with the Advisory Committee. Funds shall be used to assist “qualified IRC 501(c) (3) charitable clinics” to provide physical, occupational, and speech therapy; and equipment necessary for daily living activities for people with spinal cord and traumatic brain injuries.

SCIs in Utah
• In 2013, there were 76 Utah residents who were hospitalized with a SCI.
• In 2013, the total SCI hospitalization charges due to SCIs in Utah was more than $7 million; this does not include the cost of care after hospitalization, nor lost wages.
• The average length of a hospitalization for a SCI was eight days.
• Males accounted for three-fourths (76%) of all SCI hospitalizations.
• Falls (37%) were the leading cause of SCI hospitalizations at (37%), followed by transportation (29%), and sports and recreation (21%).
• Utahns aged 65 and older had the highest rates of SCIs.

TBIs in Utah
• Every day in Utah, 68 people are seen at an emergency room for a TBI and one person dies.
• Falls (52%) were the leading cause of TBI hospitalizations, followed by transportation (24%) and sports and recreation (21%).
• In 2013, the average cost of TBI hospitalization charges in Utah was nearly $91 million; a 10% increase from 2011. This does not include costs for disability, long-term care, nor lost wages.
• The average length of hospitalizations for a TBI was 3.9 days.

Success Story
Paul sustained a SCI and was evaluated in October 2014. Paul was in a power wheelchair and required a lift at home. Thanks to the Fund, Paul was discharged from care in April 2016 and is now walking without an assistive device; having good overall balance and endurance. He received complete clearance to return to all work duties and is now a working full-time industrial machinist for the Utah Department of Transportation. -Paul, age 57