

TBI/ABI Trust Fund Programs: Overview and Trends

Background

In 1985, Pennsylvania became the first State to enact legislation to create a catastrophic and medical rehabilitative fund from surcharges on traffic violation fines (\$10 each) and fees in lieu of jail time (\$25 each) in order to be able to pay for such services for individuals with brain injury. Over the years, 23 States have followed suit enacting legislation generally referred to as a Traumatic Brain Injury (TBI) or Acquired Brain Injury (ABI) Trust Fund Programs to pay for an array of programs and services specific to the needs of individuals with brain injury and their families. (See attached table.)

What are trust fund programs? Trust fund programs are dedicated funding programs created generally from fines associated with traffic offenses, criminal offenses or fees added to driver's license or car registration, which are collected by county court clerks, unless a State offense, then deposited into a State account to be used for purposes stated in the legislation creating the Trust Fund. The methods for generating revenue differ among the States. Unlike State funded (general revenue) programs, the funds may accrue over State fiscal years.

Trust Fund programs may support public education,

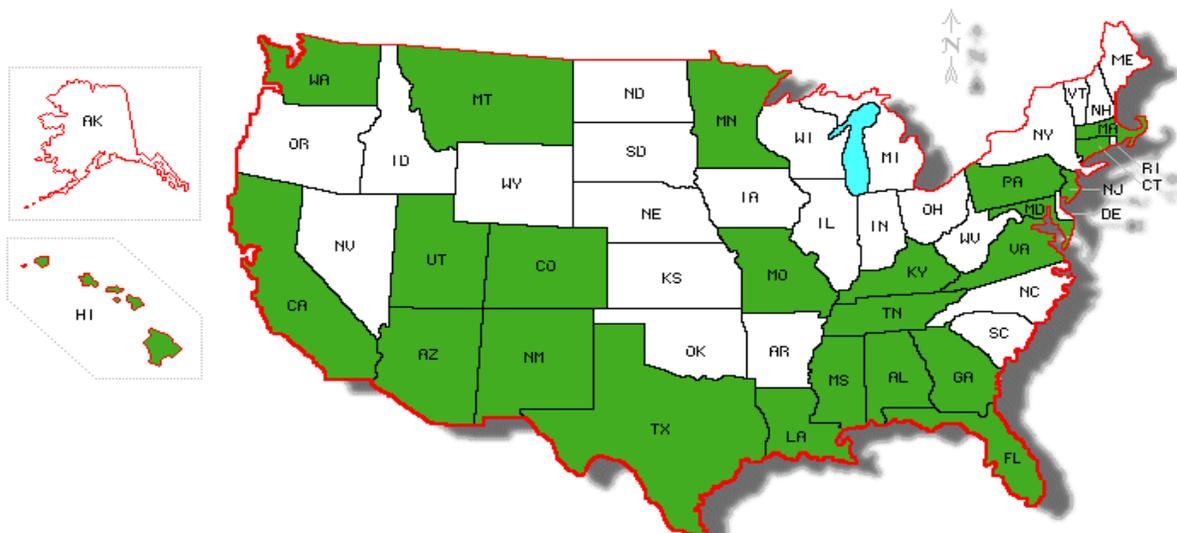
prevention, a brain injury registry, research, advisory bodies and an array of services and supports.

In some States, the revenue may be the only source of funding specifically for individuals with brain injury and their families. Trust Fund programs generally offer flexibility for States to fill in service gaps, including supports and assistance to non-Medicaid eligible residents. States which offer a robust service package for individuals with brain injury and their families generally use a combination of State and federal funds, including Medicaid and State general revenue, in addition to the revenue generated by fines and fees.

States may use funds to provide services that are not covered by their Medicaid State Plan or through the Medicaid Home and Community-Based Services (HCBS) waiver programs, such as rental deposits and other housing assistance. States may also use the funding for match for federal grants.

In some States, the Trust Fund program and the HCBS Waiver program are administered by separate State agencies. Some States coordinate these programs, while others do not.

States with TBI/ABI Trust Fund Programs



Administration

State Trust Fund programs may be housed in health, vocational rehabilitation, mental health, disabilities, aging, long-term care or other agencies. Most State laws included an advisory body to oversee or help the agency plan for how funding is to be awarded. States may award grants to local agencies, may provide services through provider agreements, or through contracts via the State bid process. Some States use the funding to support the administrative expenses, such as the central office staff, advisory body expenses, and service or care coordination staff. States may contract for consultant services to assist with evaluation or assessment.

A few States do not refer to their programs as Trust Funds Programs, as such, even though they may have a dedicated funding source, such as fines associated with traffic offenses. In Connecticut, the money generated is passed directly to the Connecticut Brain Injury Alliance so that the agency does not have direct involvement in the administration of the funds.

Some States establish a lifetime limit or other caps with regard to the amount that may be used per person.

Revenue

The amount generated varies greatly among the States. A few States have enacted subsequent legislation to raise the fines or fees or to add other fines/fees in order to generate more income. Florida added boating while intoxicated to its list of offenses to generate funding for the program. Maryland, which enacted legislation in 2013 to create a fund, does not have a funding mechanism. Montana relies on a \$1 voluntary donation through motor vehicle registration, and generates less than \$30,000.

The funding is generally appropriated to the State agency through the legislative appropriation process. As the money is placed into a non-reverting account, funds are allowed to accrue across State fiscal years.

Eligibility

Most State laws define TBI and or ABI. Effective July 1st, 2014, people with ABI (non-traumatic brain conditions) in New Mexico will be eligible for the Brain Injury Services Fund (BISF). At least eight States also provide services or assistance to individuals with spinal cord injuries (Arizona, Florida, Georgia, Kentucky, Louisiana, Mississippi, Texas and Utah). Not all programs serve individuals of all ages. In Missouri and Alabama, the program serves only adults with TBI.

Advantages and Disadvantages

The advantages of the program include:

- States are ensured of a funding source for brain injury services.
- Funds are able to accrue and be carried over State fiscal years in order to have available funding to continue services.
- States may set their eligibility and service criteria in accordance with the law and other State guidance, as opposed to adhering to federal program guidelines.
- Flexibility to administer the program in terms of how the funds are distributed.

A disadvantage is that in many States, the Trust Fund Program is the only source of funding specific to the needs of individuals with brain injury and their families. When fines decrease, funding decreases as well, while at the same time, there may be more demand for services. In a few States, there may be competition between brain injury and spinal cord injury in terms of how funds are distributed.

Trends

Over the past few months, NASHIA asked States about their funding trends. A few States had previously addressed declining revenues by enacting legislation to increase or add fines to generate more funding. These States indicated that while that was successful for a period of time, in more recent years, the funding had leveled or began to decrease again. Overall, out of the 22 States that have dedicated funding as the result of fines assessed to traffic offenses or other offenses or fees associated with drivers license or motor vehicle registration, 16 States indicated that their revenue was declining (9) or had stayed the same over the past few years (7).

States offered various reasons for declining revenues including a decrease of fines associated with drunken driving or other traffic offenses. Some speculated that the economy had had an impact as law enforcement was reluctant to impose additional hardships. Others thought that such offenses were on the decline due to public education and other efforts to curb traffic violations, such as speeding and alcohol related offenses. Another State said that traffic cameras were being increasingly used and the additional fines for the brain injury Trust Fund were not applicable to tickets resulting from offenses documented by the cameras.

States have taken a number of actions to help offset the reduced revenue such as shifting administration costs previously covered by the Trust Fund to the administering agency. A few States had reprioritized the use of the funds or created a waiting list. In a few States advocacy organizations and advisory boards have considered legislation to increase the revenue.

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State	Trust Fund	Trust Fund Source	Trust Fund Services and Programs/ Administrative Costs	Revenue Trends/Action	Medicaid/Other Funds
Alabama	Alabama Driver's Trust fund Enacted 1993.	\$100 for each DUI conviction	Public information, prevention education, and research coordinated by the Alabama Head Injury Foundation. Post- acute medical care, rehabilitation therapies, medication, attendant care, home accessibility modification, and equipment necessary for activities of daily living. Priorities include: <ul style="list-style-type: none"> ● Resource Coordination ● An Interactive Community Based Model (ICBM) - five care coordinators ● An Independent Living Program and attendant care client services ● Extended Support in Supported Employment 	Declining. Have moved some functions to other funding sources. Studying options for increasing revenue for the program.	
Arizona	Arizona Spinal and Head Injuries Trust Fund Enacted 1992.	13% penalty assessment on every fine, penalty, and forfeiture related to criminal offenses and traffic, fish, and game law violations. Trust Fund receives 22% of amount collected.	Client Services: Information, support & rehab; Prevention Programs; Education Programs. Specific purposes: <ol style="list-style-type: none"> 1. Public information, prevention and education of the general public and professionals. 2. Rehabilitation, transitional living and equipment necessary for activities of daily living. 3. A portion of the disease surveillance system and statewide referral services for those with head and spinal injuries. 4. Costs incurred by the advisory council on spinal and head injuries established pursuant to section 41-3201. 5. Administrative costs incurred by the Department of Economic Security to administer the provisions of this article. 	Declining. Had a 4% decrease last year and anticipate a 4-5% decrease in SFY 2014. The state has cut programs and reprioritizing services. Pursuing possibilities of legislation to increase revenue	

State	Trust Fund	Trust Fund Source	Trust Fund Services and Programs/ Administrative Costs	Revenue Trends/Action	Medicaid/Other Funds
California	California TBI Fund Enacted 1988.	Assessments on vehicle code, criminal and civil infractions are deposited in the State Penalty Fund. .66% of these revenues are provided to the Trust Fund.	Community Re-Integration, Supportive Living, Vocational Supports, Information and Referral, and Public and Professional Education	Significant declines in the TBI fund; decreasing revenues from the seatbelt penalty fund. Have already made public that the next 3 year contract cycle will most likely include reductions in the contract amounts.	Working toward implementing a HCBS Waiver, but know that a waiver alone won't fully fund the programs.
Colorado	Colorado TBI Trust Fund Enacted 2002.	\$15 assessment on speeding convictions; \$20 assessment on DUI convictions; \$15 assessment on motorcycle helmet violations.	Range of services may include, but shall not be limited to: (I) Case management; (II) Community residential services; (III) Structured day program services; (IV) Psychological and mental health services for the individual with the traumatic brain injury and the individual's family; (V) Prevocational services; (VI) Supported employment; (VII) Companion services; (VIII) Respite care; (IX) Occupational therapy; (X) Speech and language therapy; (XI) Cognitive rehabilitation; (XII) Physical rehabilitation; and (XIII) One-time home modifications. (b) Covered services shall not include institutionalization, hospitalization, or medications.	Revenue declining. Passage of a motorcycle helmet law with a \$10 fine for failure to comply (2007); surcharges on all convictions increased by \$5 (2009); percentage of funds dedicated for specific uses changed (2009) Reorganized/prioritized programs to accommodate the reduced expenditures.	CO Persons with Brain Injury HCBS Waiver (1995). (Not coordinated with trust fund program.)
Connecticut	Connecticut TBI Fund Enacted 2004.	\$5 assessment for each speeding, DUI, and reckless driving infraction	Funding is to be allocated to the Connecticut Department of Social Services in order to provide grants to the BIA-CT. The DSS contracts with BIA-CT for specific services. These services are part of a broader contract between DSS and BIA-CT.	Connecticut does not have a trust fund as such. The money generated goes directly to the Brain Injury Alliance of CT per the law.	ABI HCBS Waiver (1999).
Florida	Florida Brain and Spinal Injury Rehabilitation Trust Fund	\$60 (of \$135) surcharges on fines for DUI and BUI; fines for moving	To provide acute care, inpatient and outpatient rehabilitation, transitional living services, adaptive equipment, home modifications, peer mentoring,	Have shifted funds to waiver program (match).	Brain and Spinal Injury HCBS Waiver (1999)

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	Enacted 1988.	violations; specialty motorcycle tag fees; and \$1 (of \$2) surcharges on temporary license tags.	transportation, housing, and other services necessary for community reintegration. Services are provided through state designated and approved facilities. Case management is the primary service available to assist clients and their families.		
Georgia	Georgia Brain and Spinal Injury Trust Fund Enacted 1998.	10% surcharge on fines for DUI or drug convictions	Provides care and rehabilitative services and goods as approved by the Georgia Brain and Spinal Injury Commission. Funds are used for the actual and necessary operating expenses that the commission incurs in performing its duties.	Declining. Going to introduce legislation to increase funding.	
Hawaii	Hawaii Neurotrauma Special Trust Fund Enacted 2002.	\$10 surcharge for violation of child safety restraint; \$10 surcharge on seat belt violation; \$10 surcharge for speeding; \$25 for DUI; \$100 surcharge for accidents causing bodily injury; \$250 for substantial bodily injury; \$500 for accidents causing deaths.	Fund projects dedicated to prevention, education and research. (Stroke, traumatic brain injury or spinal cord injury)	Staying the same. At the time that legislation was passed to establish the fund in 2002, was estimated to be \$1M; however, were also cautioned that the more realistic figure would be around \$800k due to non-payment of fines.	
Kentucky	Kentucky Spinal Cord and Head Injury Trust Fund Enacted 1998.	5.5% of each court cost to be deposited in Trust fund – not to exceed \$2,750,000; 8% of DUI service fees (\$375) after first \$50.	Funding Priorities: registry/surveillance, to provide funding for case management and support services that enable individuals to remain in their home communities. The Benefit Management Program (BMP) to provide toll free number; public information; case management; take application and review service plans.	Revenue has stayed consistent.	Two HCBS Waiver programs: 1) KY Acquired Brain Injury (1999) 2) ABI Long-term Care (2007)
Louisiana	Louisiana Traumatic Head and Spinal Cord Injury Trust Fund Enacted 1993.	\$5 surcharge on fines for speeding or reckless operation; \$25 surcharge on fine for first offense DUI, \$50 – 2 nd offense,	<ul style="list-style-type: none"> • Services include: • Evaluations • Post-acute medical care rehabilitation • Therapies • Medication 	Staying the same. Have identified counties which have not been collecting fines and hope that they will now be	

State	Trust Fund	Trust Fund Source	Trust Fund Services and Programs/ Administrative Costs	Revenue Trends/Action	Medicaid/Other Funds
		\$100 – 3 rd offense, \$250 – 4 th offense.	<ul style="list-style-type: none"> Attendant care Equipment necessary for activities of daily living 	contribution.	
Maryland	Maryland TBI Trust Fund Enacted 2012.	No revenue source	Purpose is to fund case management and neuropsychological evaluation and may be used for an array of other services and supports.	N/A	TBI HCBS Waiver, 2003. Considering legislation for a funding mechanism.
Massachusetts	Head Injury Treatment Trust Fund Enacted 1991.	\$250 assessment for DUI and driving to endanger and \$50 assessment for speeding	The trust fund language stipulates the use of these monies for non-recurring services and are to be used to serve SHIP eligible consumers whose needs are short-term. Services may include, but is not limited to day services, respite, recreation, assistive technology, home modifications, substance abuse treatment, transportation, extended rehabilitation, dental care, life skills training, and case management.	<p>Has increased usage to 100% of the funds.</p> <p>The lawmakers convened a MA Brain Injury Commission (legislature) and developed a report. A senator became a champion to make sure the program received the entire fund for services. BIA of MA has been a strong advocate.</p>	<p>MA Statewide Head Injury Program (SHIP) -- State funding since 1985; expanded: Brain Injury and Statewide Specialized Community Services (BI&SSCS). TBI HCBS Waiver 2003-- Two HCBS Waiver programs:</p> <p>1) MA Acquired Brain Injury Non-Residential Habilitation</p> <p>2) MA Acquired Brain Injury Residential Habilitation</p>
Minnesota	TBI Fund Enacted 1991.	\$50 surcharge from each DUI conviction	Department of Health (MDH) uses 17 percent to operate the registry, analyze data, and support some community-based prevention initiatives; 83 percent supports Resource Facilitation through Minnesota's Brain Injury Alliance.	In Fiscal Year 2004, the income stream became a surcharge vs. a DWI reinstatement fee. The result was a revenue stream increase for funding Resource Facilitation. The amount peaked in FY2007 (just prior to the economic downturn), and has dropped about \$100,000 in each of the next four years --about the same	TBI HCBS Waiver 1992, operated by the Dept. of Human Services; both children/adults eligible Programs (waiver/ trust fund) are operated by 2 separate agencies.

State	Trust Fund	Trust Fund Source	Trust Fund Services and Programs/ Administrative Costs	Revenue Trends/Action	Medicaid/Other Funds
				<p>level in FYs 2011, 2012 and 2013.</p> <p>Have considered expanding the surcharge to include other driving offenses (speeding, distraction, careless operation, etc.), have not moved in that direction.</p>	
Missouri	Head Injury Trust Fund Enacted 2002.	\$2 surcharge on court costs related to violations of county ordinances, criminal or traffic laws	Funds shall be used for purposes of transition and integration of medical, social and educational services, or outreach activities and short-term supports that enable individuals with TBI and their families to live in the community.	Staying constant. Legislation introduced in 2014 to increase funding for trust fund as program relies on combination of state general revenue, trust fund and Medicaid. State funding has fluctuated in recent years, impacting the Adult Head Injury program.	Missouri receives state general revenue, which has been increased/ cut/restored over the years. The program receives reimbursement from Medicaid for services offered in the TBI program that are the same as Medicaid State Plan, if the recipient is Medicaid eligible (i.e. administrative case management).
Mississippi	Spinal Cord Injury/TBI Trust Fund Enacted 1996.	\$25 surcharge for violation of DUI law; initially \$6, now \$5.45, from all moving vehicle violations.	Funds pay for direct services, prevention and public education. Program has donated multi-sport helmets in elementary schools, and partially funds the registry.	Revenue staying the same, even with the reduced fine for a moving violation.	MS TBI/Spinal Cord Injury HCBS Waiver (0366.R02.00), 2001
Montana	TBI Trust Fund Enacted 2003.	\$1 voluntary donation through motor vehicle registration	May be used by the department to fund the Advisory Council and provide grants for public information, prevention.	N/A – revenue is from “donations”. As of 2012, volunteer donations have generated \$29,000 for the trust fund. The legislature appropriated \$100,000 for resource facilitation, which had been developed through a federal	The HCBS waiver program serves a small number of individuals with a TBI who would have been served in out-of-state rehab facilities, inpatient rehabilitation, or remained inappropriately placed in nursing homes, group homes, or other institutions were it not for the specialized services

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				HRSA TBI State Grant, and carried out by the Brain Injury Association of MT.	available under the HCBS Waiver program.
New Jersey	TBI Fund Enacted 2002.	\$.50 surcharge on vehicle registration fees	There is a process for prioritizing individual requests for funds. Less than 10 percent is spent on administration. Provides assistance and supports; and awareness and education. The most requested services: cognitive therapy, followed by case management, physical therapy, assistive technology, and home modifications.	Constant revenue—registration fees are easy to predict. When the trust fund program was open to ABI and TBI, there were too many applicants for the amount of funding, which is relatively stable, so tighten eligibility criteria for trust fund programs from all ABI to TBI to avoid overspending.	New Jersey is combining HCBS waiver programs, which has not yet been approved. Under the trust fund, was covering all ABI, has narrowed to TBI due to demand and not enough money. ABI Waiver – 1993 (is being combined into a comprehensive waiver).
New Mexico	Trust Fund Traumatic Brain Injury Program Enacted 1997. Effective July 1 st , 2014, people with acquired brain injury (ABI) will be eligible for the Brain Injury Services Fund (BISF)	\$5 surcharge on all moving vehicle violations	Services include service coordination, such as skills coaching, and crisis interim services—respite, transportation, in-home modifications, etc.	Revenue declining, believed due to less enforcement of the law (ti Has supplemented program with general revenue (state) funding, and moved individuals who are Medicaid eligible to waiver program..	Individuals who are Medicaid eligible are served under the Mi Via Self-Directed Waiver program.
Pennsylvania	Catastrophic Medical and Rehabilitation Fund Enacted 1985.	25% of amount collected in surcharges on traffic violation fines (\$10 each) and fees in lieu of jail time (\$25 each)	Legislation states the trust fund can pay for medical rehabilitation services and attendant care. Services are assessment, rehabilitation and transitional case management. Consumers can obtain assistance from the Brain Injury Association of Pennsylvania (BIAPA) in applying to the Trust Fund Program.	Declining. Funded at the same level. Brings in \$3 million; spending \$5 M — revolving fund.	Theoretically, short-term (trust fund); then referred to COMMCARE Medicaid Waiver (2002). However, waiver slots are filled. PA BI Caucus, advocates, providers have started dialogue about increasing fines.
Tennessee	TBI Trust Fund Enacted 1993.	Variable surcharges on 6 traffic violations: speeding, reckless	To fund the registry, the TBI coordinator position and additional staff requirements and other	Two new infractions were added to list of traffic violations:	

State	Trust Fund	Trust Fund Source	Trust Fund Services and Programs/ Administrative Costs	Revenue Trends/Action	Medicaid/Other Funds
		driving, DUI, revoked license, drag racing, accidents resulting in death	expenditures and grants. Funds provide supported living, therapeutic recreation, camp, service coordination, and services under Project BRAIN. Service coordinators are in 8 locations covering 95 counties.	accidents involving death (\$15) and drag racing (\$25). However, revenues have since declined over the years from \$1.3M to just at \$1M, resulting in cuts to contracts for services. During that time there was increased use of speeding cameras in the state and technically, violators do not get a "ticket" from that, so believe is a contributing factor with regard to declining revenues.	
Texas	TBI/SCI Trust Fund Enacted 1991.	\$133 surcharge on felony convictions; \$83 on Class A & B misdemeanors, \$40 on convictions punishable by fines only (9.8218% of all fines collected)	Funding decisions are made by vocational counselors based on collected documentation. The trust fund will pay for three core services: 1) up to 90 days at an inpatient, comprehensive medical rehabilitation program if the consumer is making progress and all other resources have been utilized, 2) up to 120 hours of outpatient therapy if the consumer is making progress and all other resources have been utilized, and 3) up to 6 months of post-acute rehabilitation services - residential or non-residential - services, if the consumer is making progress and all other resources have been utilized. Additional services may be purchased while the consumer is receiving one of these three core services. Additional services include transportation, medication, assistive technology, personal attendant	Percent of surcharges on misdemeanors and felonies directed to the Trust Fund increased from 5.3218% to 9.8218% in 2011.	

State	Trust Fund	Trust Fund Source	Trust Fund Services and Programs/ Administrative Costs	Revenue Trends/Action	Medicaid/Other Funds
			services, psychological services, orthotics and prosthetics. Once the limit on service is reached, a person cannot receive any more of that service. The exception is if there is a new TBI or spinal cord injury. There are no annual or lifetime caps on the amount of funding.		
Utah	Traumatic Spinal Cord and Brain Injury Rehabilitation Trust Fund Enacted 2012.	Funds are received through appropriations, gifts and a portion of impound fees to assist charitable clinics providing rehabilitation services for the post-acute-care of people with such injuries.	Fund money shall 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. (6) All actual and necessary operating expenses for the advisory committee and staff shall be paid by the fund.	Currently, generates about \$200,000m but is a new program.	The state agency also administers a TBI Fund which can only be used for education, resource facilitation, and prevention (not treatment). It is funded with one-time appropriations each year in the amount of \$200,000. ABI HCBS Medicaid Waiver, since 1996, provides an array of supports for individuals 18 and older.
Virginia	Commonwealth Neurotrauma Initiative Trust Fund Enacted 1997.	Trust Fund receives \$25 of the Driver's license reinstatement fee (\$30) levied on individuals whose license has been revoked or suspended.	47.5 percent of the revenue is used to support applied research on the mechanisms and treatment of neurotrauma, 47.5 percent to support community-based rehabilitation projects, and 5 percent is set aside for program administration. Also, a provision in 2004 legislation gives the Commissioner of the Department of Rehabilitative Services the authority to reallocate up to \$500,000 each year in unexpended balances to fund research grants.	Declining. Canceled an RFP; administering agency (VR) "loaned" funding to continuing funding through grant cycle in 2011; grantees took a subsequent cut.	The Virginia Department of Aging and Rehabilitative Services (DARS) receives state general revenue, as well as administers the trust fund program funds, to offer an array of service coordination and community services statewide. DARS also staffs the advisory council.
Washington	Washington TBI Account Enacted 2007.	TBI Account receives \$2 of each penalty fee imposed for violation of traffic laws	To support the activities in the statewide TBI comprehensive plan, to provide a public awareness campaign and services, for information and referral services; and for costs of required department staff who are providing support for the council.	Relatively new program.	