



Location: Web-conference

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**1. Agenda topic: Welcome, Review of Minutes & Introductions****Pier Protz**

<b>Discussion</b>	Pier Protz, Vice Chair, welcomed everyone to meeting. The attendees discussed recommended edits to March's minutes and the members provided their votes via chat to approve March 2021 minutes with recommended edits.		
<b>Conclusions</b>			
<b>Action Items</b>		<b>Person(s) Responsible</b>	<b>Deadline</b>
Voting members unable to attend the meeting will be contacted to vote on March's minutes.		Michael Brown	06/30/21

**2. Seat Appointments & Vacancies****Scott Pokorny**

<b>Discussion</b>	<p>Scott Pokorny provided the following updates regarding BIAC Seat Appointments &amp; Vacancies:</p> <p><b>Reappointment:</b> Todd Bennett reappointed for the Representative of the NC Hospital Assoc. or other organization interested in brain injury prevention &amp; treatment seat to expire 9/30/2024.</p> <p><b>New Appointments:</b></p> <ul style="list-style-type: none"> <li>• Dr. Edward Jauch new appointment for the MD w/expertise in trauma, neuro- surgery, neuropsychology, PM&amp;R or emergency medicine seat to expire 9/30/2023.</li> <li>• Renee Johnson new appointment for the Family Member of person with Brain Injury (Western, NC) seat to expire 9/30/2023.</li> <li>• Beth Overby new appointment for the Family Member of person with Brain Injury (Central NC) seat to expire 9/30/2022.</li> <li>• Betty Lilyquist new appointment for the Chair of the Board of the Brain Injury Association, NC or designee seat to expire 9/30/2024.</li> </ul> <p><b>Vacant Seats:</b></p> <ul style="list-style-type: none"> <li>• Rep. of Veterans Affairs – There is an interested party for the seat. The Department of Administration and Dept. of Veterans Affairs is collaborating to fill the seat.</li> <li>• Rep. of Office of Emergency Medical Services – DHHS is working to fill the seat.</li> </ul>		
<b>Conclusions</b>	•		
<b>Action Items</b>			
<ul style="list-style-type: none"> <li>• Review the statute's interpretation regarding granting the Dept. of Veterans Affairs to fill the Rep. of Veterans Affairs seat. Also, consider convening a workgroup concerning this matter.</li> <li>• Alan Dellapenna will be retiring in August 2021 and hoping his replacement would be able to fill his position as a nonvoting council member.</li> </ul>	Pier Protz		

**3. DHB Updates****Michelle Merritt**

	<p>Michelle Merritt provided the following updates:</p> <ul style="list-style-type: none"> <li>• NC Medicaid Managed Care - Standard plans will launch 7/1/2021. All beneficiaries' assignments are complete but may change their plans for any reason through 9/30/2021.</li> <li>• The Department has developed a NC Medicaid Managed Care fact sheet to provide clarity regarding individuals that are mandatory and exempt from choosing a plan.</li> <li>• Through June 1, 2021, 7000 beneficiaries that are Tailored Plan-eligible selected a Standard Plan. The Dept. stopped the standard plan enrollment and will disseminate a notice to those individuals advising how services will be impacted if they change to Standard Plan.</li> <li>• The enrollment broker website located at <a href="https://ncmedicaidplans.gov/">https://ncmedicaidplans.gov/</a> at is available via chat or call for questions or concerns. The website also offers a request form to stay on NC Medicaid Direct and a form and process in the future for individuals to transition to Tailored Plans.</li> <li>• The NC Ombudsman site located at <a href="https://ncmedicaidombudsman.org/">https://ncmedicaidombudsman.org/</a> provides support and education for individuals regarding Medicaid.</li> <li>• The NC Healthy Opportunities website located at <a href="https://www.ncdhhs.gov/about/departments/initiatives/healthy-opportunities">https://www.ncdhhs.gov/about/departments-initiatives/healthy-opportunities</a> provides information regarding additional aspects of health and selected organizations to serve three regions of the state, marking a major milestone towards launching the nation's first comprehensive program to test evidence-based, non-medical interventions designed to reduce costs and improve the health of Medicaid beneficiaries.</li> <li>• The TBI Waiver renewal is being reviewed by CMS with 7/1/2021 as the target renewal start date. Information regarding the TBI waiver expansion process to an additional catchment area is</li> </ul>		
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	forthcoming. <ul style="list-style-type: none"><li>Cardinal and Vaya will merge together with Vaya being the lead agency. Also, Union and Cabarrus counties will disengage 9/1/2021 from Cardinal to Partners. There are additional counties that are pending approval to disengage.</li></ul>		
Conclusions	The following feedback was provided: Additional outreach is needed for individuals who may have inadvertently chosen the Standard Plan instead of the Tailored Plan. Consider utilizing the Ombudsman to help with this process.		
Action Items		Person(s) Responsible	Deadline
A statement of concerns from the council will be provided regarding disengagements.		Council/Michelle Merritt	7/30/2021

#### 4. Agenda topic: NC ACL Grant Update

**Scott Pokorny**

<b>Discussion</b>	<p>Scott Pokorny provided the following updates regarding the ACL Grant Update:</p> <ul style="list-style-type: none"> <li>The current grant cycle ended 5/31/2021.</li> <li>The next grant cycle will be for 5 years, 7/1/2021-6/20/2026.</li> <li>The awards will range from \$170,000 to \$260,000 annually.</li> <li>The proposal is based upon the ACL's review of outcomes and funding awards.</li> <li>The proposed TBI grant goal: To facilitate the continued development and expansion of a comprehensive, multi-disciplinary, and easily accessible system of care for the individuals with lived experience and their families.</li> <li>Objectives and Activity/Deliverables: <ul style="list-style-type: none"> <li>Educate, train individuals with TBI, caregivers, and professionals: Increased understanding and knowledge by those involved in the TBI continuum of care</li> <li>Screen: Increased identification of people who is staying TBI an approved data collection and analysis</li> <li>Update Information and Referral System: Increased knowledge about TBI, including services and supports for individuals with TBI, their families and other stakeholders</li> <li>Collaborate &amp; Coordinate: Increase collaboration and coordination between primary health and behavioral healthcare systems, with eventual increase in the availability of TBI-informed services</li> <li>Develop Sustainability and Continuous Program Improvement</li> </ul> </li> <li>The composition of the TBI State Advisory Board for grant funds - This is the final year the federal government will accept the advisory's board current membership composition. In the future significant strides must be demonstrated to show alignment with 42 U.S.C. § 300 d-52.</li> <li>If progression towards the membership composition requirements (specifically 50% individuals with TBI) aren't met within 12 months of the grant the following actions may occur: <ul style="list-style-type: none"> <li>Increase Monitoring</li> <li>More frequent (quarterly) reporting</li> <li>Conversion from advance to reimbursement payments</li> <li>Loss of funds</li> </ul> </li> </ul>		
<b>Conclusions</b>	<p>The following feedback was provided regarding the NC ACL grant application:</p> <ul style="list-style-type: none"> <li>Include information regarding outreach to veterans and their families.</li> <li>Council member voiced concerned regarding DHHS's agreement with meeting ACL's advisory board member composition requirement.</li> </ul>		
<b>Action Items</b>	<b>Person(s) Responsible</b>	<b>Deadline</b>	
<ul style="list-style-type: none"> <li>Carol suggested linking with other councils across the country that may be having challenges with meeting composition federal guidelines.</li> <li>Clarify if a family member or guardian may be recognized in the composition requirements on behalf of the individual with TBI.</li> <li>The Bylaws group should reconvene and work on the composition requirements.</li> <li>Identify mechanisms to identify potential TBI survivors for the council.</li> </ul>	Scott Pokorny	Ongoing until complete	

**6. Agenda topic: DMH TBI Program Report****Michael Brown**

<b>Discussion</b>	<ul style="list-style-type: none"> <li>Michael Brown provided the council with the following updates:</li> <li>BIACNC, BIAC and LME-MCO's TBI allocations and expenditures through Qtr. 3 and identified the services that were utilized from the funding.</li> <li>TBI screening – 1208 individuals have been screened for TBI through Qtr. 3.</li> </ul>		
<b>Conclusions</b>	TBI staff will ensure that with county disengagements and LME mergers the funding will be allocated correctly.		
<b>Action Items</b>	<b>Person(s) Responsible</b>	<b>Deadline</b>	

**7. Agenda topic: BIANC Update****Daniel Pietrzak**

<b>Discussion</b>	<p>Daniel Pietrzak provided the following updates:</p> <ul style="list-style-type: none"> <li>Brain Injury Association of North Carolina is hosting Digital Classes <ul style="list-style-type: none"> <li>Thriving Survivors</li> <li>Mending to Music</li> <li>Drums Alive</li> </ul> </li> <li>The next digital conference is scheduled for November 5-6, 2021.</li> <li>The Brain Injury Association will partner with NCCARE360 as a resource for individuals with Brain Injury or their families.</li> <li>A scheduled date for Virtual Camp 2021 is forthcoming.</li> <li>The Brain Injury Association was selected by Cardinal Innovations for a grant that will help fund the following directives: <ul style="list-style-type: none"> <li>Fund Day programs with Hinds' Feet Farm</li> <li>Helmet Giveaway</li> <li>Increase Brain Injury awareness</li> <li>The Brain Injury Association will continue to serve the brain injury community in Charlotte in spite of the change of relationship with Atrium Health.</li> </ul> </li> </ul>		
<b>Conclusions</b>	Daniel encouraged the committee to become members of the Brain Injury Association.		

**8. Agenda topic: Qmetis Update****Jack Fitzgibbons**

<b>Discussion</b>	<p>Jack Fitzgibbons provided the following updates regarding Qmetis:</p> <ul style="list-style-type: none"> <li>Qmetis is a Healthcare Technology company that is grounded in the Science of Evidence-Based Medicine by building tools that improve patients' long-term outcomes and reduce cost of care.</li> <li>The initial products were for adult and pediatric TBI, Stroke and Concussion patients.</li> <li>In 2018 the State of North Carolina chose to pilot a program to aid hospitals in Acute Care of TBI Patients to improve outcomes post NICU/ICU and post hospital discharge. The target was 3-5 hospitals.</li> <li>Deliverables for hospitals is to provide the most current guidelines within the tool.</li> <li>Vidant and WakeMed are currently utilizing the software with 12 patients enrolled in the system.</li> <li>WakeBaptist and Atrium are in the onboarding stage and additional hospitals are in discussion to join the pilot.</li> <li>Two tools under development are the following: <ul style="list-style-type: none"> <li>mobile application for schools</li> <li>emergency department tool</li> </ul> </li> </ul>		
<b>Conclusions</b>			
<b>Action Items</b>	<b>Person(s) Responsible</b>	<b>Deadline</b>	
Link Qmetis with a representative from the Children and Youth committee.	Scott Pokorny	9/2021	

## 9. Agenda topic: Committee Updates

## Council Members

<b>Discussion</b>	<p>The following updates were provided by the committees:</p> <ul style="list-style-type: none"> <li>• <b>Children and Youth committee</b> - Members of C&amp;Y committee attended the virtual Hill Day in support of funding for TBI services and national registry.</li> <li>• Dr. Karin Reuter-Rice (through Duke University Government Relations) met with staffers from Representative Price and Senator Tillis offices in May to request for research funding needs for children and youth with brain injury.</li> <li>• Updates on concussion materials: DHHS TBI brochures and posters <ul style="list-style-type: none"> <li>▪ Resuming distribution of requested materials across the State and local schools</li> <li>▪ Continues to be available also on BIANC website</li> </ul> </li> <li>• NC Public Schools Concussion Data: Pending whether concussion school data will be collected this year.</li> <li>• C&amp;Y with Department of Public Instruction help developed a County-led sports associations listing – In process of finalizing sports database this summer with plan to be available on DHHS website</li> <li>• Concussion Emergency Department Discharge Information specific to children and youth brief in process; plans to engage council for feedback in the new year</li> <li>• Child Safety Restraints Project – on hold</li> <li>• <b>Prevention committee</b> – Members of the Prevention committee has been discussing the following: <ul style="list-style-type: none"> <li>▪ Social determinants of health,</li> <li>▪ Shared risk and protective factors (i.e., a shared risk between aging individuals and individuals with TBI is social isolation. A Protective risk factor is getting both individuals engage within their community.</li> <li>▪ Veteran suicide</li> </ul> </li> <li>• <b>Service Delivery System committee</b> – No report; The committee currently have no chair or vice chair and need leadership.</li> <li>• <b>Public Policy – The Public Policy committee have continued to provide</b> local and state advocacy for the TBI community. The following 2021 legislative bills are being reviewed: <ul style="list-style-type: none"> <li>▪ HB 553 - A portion of funds to be used to establish a new part-time position to assist with Council operations. Rewrite requesting \$1 million increase in recurring funding for the TBI Fund (of Last Resort) for resources and services, staffing funding and Council supports comes through DHHS Not TBI Fund.</li> <li>▪ HB 665 - Addresses staff crisis in Intermediate Care Facilities needed before Innovations slots can be increased.</li> <li>▪ HB 734 - Would add TBI survivors and family member to the list of disability groups represented on State and Local CFACS; Vetted proposal was omitted due to increase in size of the committee which would result in increase of payments to additional members.</li> <li>▪ HB 914 - Act to provide a Medicaid rate increase to be used to support the Direct Care workforce.</li> <li>▪ SB 191 - Calls for hospitals to permit visitation to fullest extent permit ted under rules and regulations from Medicare/Medicaid.</li> <li>▪ SB 248 – Health Card shall contain at minimum: Patient obligations if any for Primary, Specialty, Urgent and Emergency Care Visits; Web address for confirming eligibility, benefits regarding financial responsibility, prior authorization, providers and special mental health benefits. This bill was ratified.</li> <li>▪ SB 350 – Aims to increase Innovations Waiver slots to serve IDD individuals on Registry of Unmet Needs with 10 year plan.</li> <li>▪ SB 477 - Recommends changing NC Contributory negligence law to more reasonably attribute responsibility, liability and awards.</li> <li>▪ SB 626 - County/Municipal recreation programs ensure safety of participant concussion awareness information for some athletic activities.</li> </ul> </li> </ul>				
<b>Conclusions</b>					
<b>Action Items</b>	<table border="1"> <thead> <tr> <th>Person(s) Responsible</th><th>Deadline</th></tr> </thead> <tbody> <tr> <td>Scott Pokorny</td><td>9/2021</td></tr> </tbody> </table>	Person(s) Responsible	Deadline	Scott Pokorny	9/2021
Person(s) Responsible	Deadline				
Scott Pokorny	9/2021				
<ul style="list-style-type: none"> <li>• Children and Youth committee was encouraged to collaborate with Lauren Costello, BIANC, regarding Emergency Department Discharge trainings..</li> </ul>					

<ul style="list-style-type: none"> <li>• Reach out to the LME-MCOs and members of additional LISTSERVs to solicit providers interested in participating on the Service Delivery System committee.</li> <li>• Public Policy committee encouraged council members to join the committee to help monitor proposed bills and provide advice.</li> </ul>		
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#### 10. Agenda topic: Council Member Communications

<b>Discussion</b>	<ul style="list-style-type: none"> <li>• Pier presented an Inter Council Communication Form to the council - A form completed by council members that will identify interests, skills, expertise and committee of interest.</li> </ul>		
<b>Conclusions</b>			
<b>Action Items</b>	<b>Person(s) Responsible</b>	<b>Deadline</b>	
The inter council communication form will be included on the agenda for the next council's meeting.	Pier Protz		

#### 11. Agenda topic: Adjourn

<b>Discussion</b>	<ul style="list-style-type: none"> <li>• Pier Protz adjourned the meeting at 1:00 p.m.</li> </ul>		
<b>Conclusions</b>			
<b>Action Items</b>	<b>Person(s) Responsible</b>	<b>Deadline</b>	
Next meeting scheduled for 9/8/21 from 9:00a.m. - 1:00p.m. virtually			

Respectfully submitted: Stephanie Jones, Michael Brown and Scott Pokorny