**BRAIN INJURY ADVISORY COUNCIL (BIAC)**

Date: December 12, 2018  
Time: 9:30-3:30 pm  
Location: The Arc  
343 E Six Forks Rd, Large CR  
Raleigh, NC

<table>
<thead>
<tr>
<th>TYPE OF MEETING</th>
<th>Quarterly Meeting</th>
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<tbody>
<tr>
<td>FACILITATOR</td>
<td>Jerry Villemain, Chairperson</td>
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<thead>
<tr>
<th>NAME</th>
<th>PRESENT</th>
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<th>GUESTS</th>
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<tbody>
<tr>
<td>Voting Council Members</td>
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<td>Non-Voting Council Members</td>
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<tr>
<td>Jerry Villemain, Chair</td>
<td>☑️</td>
<td>Alan Dellapenna</td>
<td>☑️</td>
<td>Jill Hinton</td>
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<tr>
<td>Pier Protz</td>
<td>☑️</td>
<td>Cindy DePorter</td>
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<td>Laurie Stickney</td>
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<td>Jean Andersen</td>
<td>☐</td>
<td>Amy Douglas</td>
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<td>Michelle Merritt</td>
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<td>Craig Fitzgerald</td>
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<td>Travis Williams</td>
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<td>Vicki Smith</td>
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<td>Martin Foil</td>
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<td>Michiele Elliott</td>
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<td>Ranaa Radwin</td>
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<td>Christine Fernandini</td>
<td>☑️</td>
<td>Kenneth Bausell</td>
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<td>Lauren Costello</td>
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<td>Carmaletta Henson</td>
<td>☐</td>
<td>Dreama McCoy</td>
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<td>Steve Strom</td>
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<td>Thomas Henson, Jr.</td>
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<td>Lynn Makor</td>
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<td>Jeanne Preisler</td>
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<td>Karen McCulloch</td>
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<td>Jim Swain</td>
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<td>Sarah Stroud</td>
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<td>Melinda Munden</td>
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<td>Donna White</td>
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<td>Jan White</td>
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<td>Geana Welter</td>
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<td>Diane Westbrook</td>
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<td>Patricia Babin</td>
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<td>Ryan Lamb</td>
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<td>Dave Wickstrom</td>
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<td>Scott Pokorny</td>
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<td>Jerome Frederick</td>
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<td>Sandy Pendergraft</td>
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<td>Virginia Knowlton-Marcus</td>
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<td>Michael Brown</td>
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<td>Murray Dunlap</td>
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<td>Stephanie Jones</td>
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1. **Agenda topic: Welcome, Review of Minutes & Introductions**

*Jerry Villemain*

**Discussion**

Jerry welcomed everyone to the meeting. Introductions were made by all in attendance. The minutes for March 2018, June 2018, and September 2018 were distributed, read, and approved.

**Action Items**

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<th>Person(s) Responsible</th>
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**Conclusions**

Dave Wickstrom expressed concern regarding the following issues:
- Teleconference availability for all Brain Injury Council Meetings
- Streamline process for financial reimbursement to council members

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2. **Agenda topic: Brain Injury of NC Council Seats**

*Scott Pokorny*

**Discussion**

Scott Pokorny advised the following appointed BIANC council seats are open:
- Executive Director from NC Council on Developmental Disabilities
- Executive Director from Brain Injury Association of NC
- Stroke survivor or American Heart Association
- Veteran or family member of veteran with TBI
- Representative from Department of Military and Veterans Affairs

**Conclusions**

- Dave Wickstrom recommended that as many council seats as possible be filled by individuals with a lived experience.
- Virginia Knowlton-Marcus provided the following language as the council’s unanimous stance regarding filling vacant council seats: It is the intent of the Brain Injury Advisory Council, in filling vacant seats, to increase overall participation on the Council by persons with lived experience, including but not limited to adding a representative who is a stroke survivor, and a representative who is a veteran with a traumatic brain injury.

**Action Items**

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3. **Agenda topic: TBI Risks from Motorized scooters**

*Laura Sandt*

**Discussion**

Laura Sandt provided the following updates:
- The Collaborative Sciences Center for Road Safety mission statement is:
  - Research
  - Education
  - Professional Development
- E-scooters are currently available in the following NC cities:
  - Charlotte - Lime (May 2018) Bird (May 2018)
  - Greensboro - Bird (Aug-Nov 2018)
  - Winston-Salem - Bird (Sept-Nov 2018)
  - Cary/Morrisville - Bird (Oct 2018)
- E-scooters main features are they cost about $1 to unlock/15 cents per minute to ride with an operating speed of 20 mph.
- According to Portland’s Bureau of Transportation Survey e-scooters are used primarily for recreation and amongst males ages 30-39.
- The following unresolved concerns exist with e-scooters:
  - Difficult to identify injuries using existing injury surveillance system (especially non-severe ones)
  - Exposure data are difficult to obtain (e.g., how many people ride scooters and aren’t injured)
  - Risk factors:
    - Helmet use
    - Demographics and e-scooter user behaviors
    - Built environment and roadway conditions

**Conclusions**

**Action Items**

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4. **Agenda topic: TBI Waiver Implementation**

*Cristina Phillips*

**Discussion**

- Cristina Phillips thanked the council for their advocacy
- Cristina provided the following updates regarding the TBI Waiver:
  - The TBI waiver process started with meetings with partners, community engagements,
communication blitz and contracting with providers.

- Alliance’s TBI Waiver team consist of approximately 43 people and over 15 departments.
- The goal is to create a guidebook to assist other MCO’s in the TBI Waiver Implementation process.
- All members who call in and state they have sustained their TBI at 22 years after will:
  - Be placed on the TBI Registry of Interest
  - Receive a letter notifying them that they are on the interest registry.
  - Be Contacted by a TBI Waiver Guide
  - Receive assistance in locating medical records, diagnostic verification information and accident report information. Note: Psychiatric Evaluations used to determine eligibility can’t be more than 3 years old.
- Once level of care is approved, the individual’s paper work will be used for the following:
  - develop an ISP with their assigned TBI CC
  - reviewed by Alliance’s UM Team
  - sent to local DSS teams to have IN indicators turned on
  - used to submit formalized Service Authorization Requests to Alliance UM team
  - reviewed by UM team to approve or deny specific service authorization request
- The TBI Waiver Provider network include the following:
  - Community Partnerships Inc.
  - ReNu Life
  - A Small Miracle
  - Lutheran Family Services
  - EduCare Community Alternatives
  - Resources for Seniors
  - Kaleo Supports
  - Ellen Scherling Morales – Solo Practitioner
  - Community Work Force Solutions
  - Residential Support Services

- 9 Training Modules are being Developed by BIANC for Alliance.

**Conclusions**

**Action Items**

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5. **Agenda topic: Medicaid Transformation Update**  

**Discussion**
- The Statewide TBI Workgroup convened its first meeting on Monday, December 3, 2018.
- Kenneth Bausell provided the following update regarding the Tailored Plan:
  - Tailored plans will launch in 2021.
  - Key features of the Tailored Plan are:
    - designed for those with significant behavioral health (BH) needs and intellectual developmental disabilities (I/DDs)
    - serve other special populations, including Innovations and Traumatic Brain Injury (TBI) waiver enrollees and waitlist members
    - contracts will be regional, not statewide
    - LME-MCOs are the only entities that may hold a Tailored Plans contract during the first four years; after the first four years, any non-profit PHP may also bid for and operate a Tailored Plan
    - LME-MCOs operating Tailored Plans must contract with an entity that holds a prepaid health plan (PHP) license and that covers the same services that must be covered under a standard benefit plan contract
    - Tailored Plans will manage State-funded behavioral health, I/DD, and TBI services for the uninsured and underinsured
  - Eligibility for Tailored Plan will be determined by DHHS or self-identification.
  - Tailored Plans will provide comprehensive benefits, including physical health, long-term services and supports (L, pharmacy, and a more robust behavioral health, I/DD, and TBI benefit package than Standard Plans.
  - BH I/DD Tailored Plans will offer care management
  - DHHS is working to design responsive Tailored Plans that consider the varied and specialized needs of their populations and will be seeking stakeholder input on how to best ensure enrollee protections are in place, and that enrollees have a positive experience.
  - The next listening session is scheduled for January 2019.

**Conclusions**

**Action Items**

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None
6. Agenda topic: NeuroBehavioral Health  

**Discussion**
- Jerry Villemain emphasized the need for neurobehavioral health because often there isn’t enough providers in the State which results to TBI individuals being stuck in hospitals for treatment.
- The following subsets are established to progress the initiative:
  - Data Collection
  - Coordination with Hospital Associates
  - Program Development
  - Funding
- Jerry encouraged the council members to participate in one of the above subsets.
- Jerry stated that the TBI State Plan and TBI bylaws will need to be updated.
- A taskforce is needed to support disabled parents with protections for their children.

**Conclusions**

**Action Items**

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N/A

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7. Agenda topic: State Opioid Action Plan  

**Discussion**
- Alan Dellapenna provided the following updates regarding the Opioid Action Plan:
  - Visit the NC DHHS Opioid website for county data, links, and details regarding the Opioid Action Plan at [https://www.ncdhhs.gov/about/department-initiatives/opioid-epidemic](https://www.ncdhhs.gov/about/department-initiatives/opioid-epidemic).
  - North Carolina among the top 13 states in prescriptions per person.
  - The availability of cheap heroin and fentanyl results in more people dying.
  - Heroin or other synthetic narcotics were involved in 60% of unintentional opioid deaths in 2016 in NC.
  - There were 457 Opioid deaths in March 2018 compared to March 2017.
  - Almost 20% of North Carolina High School Students have reported using prescription opioids recreationally.
  - 50% of Opioid related emergency room visits were uninsured or self-pay patients.
  - The Opioid Action Plan focus on the following area:
    - create a coordinated infrastructure
    - reduce oversupply of prescription opioids
    - reduce diversion of prescription drugs and flow of illicit drugs
    - increase community awareness and prevention
    - make naloxone available and link overdose survivors to care
    - expand treatment and recovery-oriented systems of care
    - measure impact and revise strategies based upon results
  - More than 5,700 individuals were treated thru the first year of the NC CURES Grant Funding.
  - The HOPE Act became law in June 2018 and provides law enforcement quicker access to Controlled Substances Reporting Data.

**Conclusions**

**Action Items**

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None

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8. Agenda topic: BIANC  

**Discussion**
- Sandy Pendergraft provided the following updates regarding scheduled events:
  - hosting a webinar in December 2018 regarding Brain Injury Basics and Strategies
  - hosting TBI annual conference for families and survivors April 2019
  - hosting Camp Carefree in October 2019
  - hosting Professional conference in December 2019.

**Conclusions**

**Action Items**

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None

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9. Agenda topic: Partnership Updates  

**Discussion**
- Legislative – Pier Protz advised the following initiatives are priorities:
  - educate new legislators about TBI
  - educate support groups at grassroots

**Conclusions**

**Action Items**

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None
o collect TBI data from hospitals, prisons, Medicaid records (Ken Bausell was working on that)
o monitor helmet laws
o monitor Medicaid Transformation
o support Medicaid expansion
o support additional funding for the TBI State Fund and to request that this fund be made Recurring rather than its current Non-Recurring status

**DD Council** – Travis Williams advised the council that Chris Egan has assumed his new role as Senior Director of Employment Services. DD Council is continuing to progress their initiatives. Please feel free to view the initiatives on council’s website at [https://nccdd.org/](https://nccdd.org/) and advise Travis if there are any questions.

**Disability Rights** – Virginia Knowlton-Marcus, Chief Executive Officer for Disability Rights, has been in her new role for 3 months. This was her first time attending BIANC meeting and look forward to further collaboration.

**Alliance of Disability Advocates** – Dave Wickstrom advised the council that Vicki Smith will be assuming the role as Executive Director. ADANC advocated in the following initiatives:
o Access parking for individuals with disabilities in downtown Raleigh
o After Action report to review ADANC’s response to Hurricane Florence, as well as provide recommendations to local, state and federal entities to better serve the needs of those who experience a disability in the next disaster.

**Money Follows the Person** – Steve Strom stated that the Money Follows the Person program has been extended for 3 months in the NC House and is pending in the NC Senate.

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**10. Agenda topic: Adjourn**

**Discussion**
Jerry thanked everyone for their participation. The meeting was adjourned at 4:00 p.m.

**Conclusions**

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<tr>
<td>Next meeting scheduled for 3/13/19 from 9:30 a.m. – 3:30 p.m. located at Governor’s Institute</td>
<td>Jerry Villemain</td>
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Respectfully submitted: Stephanie Jones, Michael Brown and Scott Pokorny.