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Summary of Changes Between SB 219A and CS for SB 219E

This document is an identification of the changes between W.O. 26-LS1312A and W.O. 26-LS1312E. Some of the changes between SB 219A and CS for SB 219E are based on recommendations from the Department of Health and Social Services.

Title of SB 219A is amended so that “traumatic brain injury” is replaced with “traumatic or acquired brain injury” in CS for SB 219E because the program, registry, and medical assistance coverage deals with brain injury that is not only a result of sudden trauma but also otherwise acquired through stroke, aneurism, or tumors. All other references in **SB 219A** to “traumatic brain injury” have been replaced by “traumatic or acquired brain injury” in **CS for SB 219E**.

Section 1 of CS for SB 219E amends AS 18.15.360(a)(4) to state “longitudinal data on traumatic or acquired brain injury from the registry established under AS 47.80.500(c)(1); and.” This section refers to a registry established under AS 47.80.500(c)(1) in **CS for SB 219E**, which lists specific longitudinal data on traumatic or acquired brain injury that the Department of Health and Social Services is authorized to collect.

4(A) through 4(D) in **Section 1 of SB 219A** is moved to **Section 5(c)(1) in CS for SB 219E** as (A) through (H).

Based on recommendations from the Department of Health and Social Services, the **CS for SB 219E** establishes the registry under AS 47.80, which deals with Persons with Disabilities under the Welfare, Social Services and Institutions. Persons with traumatic or acquired brain injury are currently under the jurisdiction of this sub-department. Originally in **SB 219A**, the registry would have fallen under AS 18.15, which deals with Disease Control and Threats to Public Health under Health, Safety, and Housing.

Section 2 of SB 219A is moved and established in **Section 5 of CS for SB 219E**. As a result, CS for SB 219E establishes the brain injury program in Title 47 of Alaska Statute, removing the program from Title 18 as established in SB 219A. The specifications in (c)(1) and (c)(2) in **SB 219A** are deleted in the **CS SB 219E**.

CS SB 219E therefore also amends the placement of the definition of “traumatic or acquired brain injury” to AS 47.80.590 from AS 18.15.590 in **SB 219A**. The CS for SB 219E changes the definition to “an insult from physical force or internal damage to the brain or its coverings, not of a degenerative or congenital nature, that produces an altered mental state and that results in a decrease in cognitive, behavioral, emotional, or physical functioning.”

Some further clarifications are made in the CS for SB 219E, which are detailed later.

Section 3 of SB 219A is moved and established as **Section 2 of CS for SB 219E**. Section 2 of CS for SB 219E amends the bill to offer case management services for traumatic or acquired brain injury. The wording has not been changed between SB 219A and CS for SB 219 except for the use of “traumatic or acquired brain injury.”

Section 4 of SB 219A is moved and established as **Section 3 of CS for SB 219E**.

Section 3 of CS for SB 219E:

- Adds a new subsection (e)(1) in AS 47.07.030 that defines what “case management services for traumatic or acquired brain injury” means as referred to in AS 47.07.030(b).
- Amends AS 47.07.030(e) by replacing “In this section, case management services for traumatic brain injury means” with “In this section,”
- Adds subsections AS 47.07.030(e)(1)(A), which further defines case management services as “care and service coordination to assist individuals and families affected by traumatic or acquired brain injury to minimize the disabling effects of the injury;”
- Moves what was AS 47.07.030(e)(2) and AS 47.07.030(e)(3) in **SB 219A** to AS 47.07.030(e)(1)(C) and AS 47.07.030(e)(1)(D) in **CS for SB 219E**.
- Based on recommendations of the Department of Health and Social Services, the language of AS 47.07.030(e)(1) in **SB 219A** is modified and moved to 47.07.030(e)(1)(B). Originally, the definition included: “and strengthen the local capacity for delivery of needed services, including housing.”
- Adds 47.07.030(e)(2), which indicates where the definition of “traumatic or acquired brain injury” can be found in Alaska Statute.

Section 5 of SB 219A is moved and established as **Section 4 of CS for SB 219E**.

Section 4 of **CS for SB 219E** adopts the new section AS 47.07.046 as established in **SB 219A**. The CS for SB 219E adds subsection AS 47.07.046(c) which specifies that the definition of “traumatic or acquired brain injury” can be found in AS 47.80.590.

Section 6 of SB 219A is removed in its entirety. However, **CS for SB 219E** does add a subsection (b)(10) in AS 47.80.500 which suggests that the Department of Health and Social Services deliver “a plan that describes recommendations for the development of a statewide delivery continuum of comprehensive rehabilitative, supportive, living, and community programs.”

Section 5 of CS for SB 219E adds new sections to AS 47.80 that define “Article 5A. Traumatic or Acquired Brain Injury” and establish a statewide program under AS 47.80.500. The change was recommended by the Department of Health and Social Services because a traumatic or acquired brain injury registry would be better placed under AS 47.80, which deals with Persons with Disabilities under the Welfare, Social Services and Institutions.

The CS for SB 219E:

- a. Establishes that a statewide traumatic or acquired brain injury program will be covered under AS 47.80 in **CS for SB 219E**. **SB 219A** had the program under AS 18.15.
- b. Clarifies what must be included under the statewide traumatic or acquired brain injury program in AS 47.80.500(b).
 1. AS 47.80.500(b)(1) amends that the data collected under the registry can be found in AS 47.80.500 (c)(1) in **CS for SB 219E** and not AS 18.15.360(a)(4) in **SB 219A**
 2. AS 47.80.500(b)(2) in **CS for SB 219E** is now what was AS 18.15.500(b)(2) in **SB 219A**
 3. AS 47.80.500(b)(3) in **CS for SB 219E** is now what was AS 18.15.500(b)(3) in **SB 219A**
 4. The CS for SB 219E clarifies in AS 47.80.500(b)(4) that there needs to be an “assessment of the availability acute and long-term care treatment, care, and support options in and outside the state for persons with traumatic or acquired brain injury;” rather than an “assessment of the availability of acute and long term care options in and outside the state for persons with traumatic brain injury.”
 5. AS 47.80.500(b)(5) in **CS for SB 219E** is now what was AS 18.15.500(b)(5) in **SB 219A**
 6. AS 47.80.500(b)(6) in **CS for SB 219E** is now what was AS 18.15.500(b)(6) in **SB 219A**
 7. The CS for SB 219E specifies in AS 47.80.500(b)(7) that there needs to be “coordination and expansion of public and privately funded residential and non-residential acute and long-term services, which includes education, referral, and home and community-based services.”
 8. AS 47.80.500(b)(8) in **CS for SB 219E** is now what was AS 18.15.500(b)(8) in **SB 219A**
 9. Adds AS 47.80.500(b)(9), which further defines that there is more than just the traditional treatment and care facilities, which may include long-term acute care hospitals, neurobehavioral programs, neuro-rehabilitation, supportive living, clubhouse model, and home and community based services.
 10. Adds AS 47.80.500(b)(10), which describes recommendations for the development of a statewide service delivery continuum of comprehensive rehabilitative, supportive, living and community programs. This change replaces what was originally Section 6 in **SB 219A**, which developed a pilot project for a statewide traumatic brain injury program under the uncodified law of the State of Alaska.

- c. CS for SB 219E adds a new subsection AS 47.80.500(c), which calls the Department of Health and Social Services to “establish and implement a traumatic or acquired brain injury registry of information from service providers” in AS 47.80.500(c)(1)
 - 1. Moves what was originally AS 18.15.360(a)(4)(A), AS 18.15.360(a)(4)(B), AS 18.15.360(a)(4)(C), and AS 18.15.360(a)(4)(D) **in SB 219A** under AS 47.80.500(c)(1) **in CS for SB 219E**
 - A. Clarifies what constitutes “health status” in AS 47.80.500(c)(1)(A)
 - B. Identifies “acute recovery period” in AS 47.80.500(c)(1)(B)
 - C. Adds “location of the” in AS 47.80.500(c)(1)(C)
 - i. Adds location of the “event that caused the injury” in AS 47.80.500(c)(1)(C)(i)
 - ii. Adds location of the “hospital treating the injury” in AS 47.80.500(c)(1)(C)(ii)
 - iii. Adds location of the “residence of the person with traumatic or acquired brain injury” in AS 47.80.500(c)(1)(C)(iii)
 - D. Clarifies what “access to and use of rehabilitation services” includes in AS 47.80.500(c)(1)(D)
 - E. Adds “access to and use of neuropsychological assessment” under AS 47.80.500(c)(1)(E)
 - F. Adds “status of long-term recovery at five-year intervals” under AS 47.80.500(c)(1)(F)
 - G. Clarifies “family impacts” in **SB 219A** as “financial and social effects on family” in **CS for SB 219E** with AS 47.80.500(c)(1)(G)
 - H. Adds “cost associated with services” in AS 47.80.500(c)(1)(H)
 - 2. Moves what was originally AS 18.15.500(c)(3) **in SB 219A** to AS 47.80.500(c)(2) in **CS for SB 219E**
 - 3. Moves AS 18.15.500(c)(4) in **SB 219A** to AS 47.80.500(c)(3) in **CS for SB 219E**
 - 4. Adds AS 47.80.500(c)(4), which calls the Department of Health and Social Services to “provide a standardized reporting form for use in gathering data for the registry”
- d. Adds AS 47.80.500(d) which establishes the definition of “service provider” mentioned in AS 47.80.500(c)