

Consumer Guide

*An information resource for
individuals living with traumatic
brain injury*



AHiF
Alabama Head Injury Foundation

Table of Contents

- I. Overview of the AHIF Consumer Guide2
- II. Overview of Traumatic Brain Injury3
- III. About Alabama Head Injury Foundation5
 - Services
 - Resource Coordinators
 - Support Groups
 - Respite Care
 - Camp
- IV. Advocacy, Rights and Appeals9
- V. Americans with Disabilities Act.....10
- VI. Service Provider Research11
- VII. Financial Planning12
- VIII. Education.....17
- IX. Behavioral Counseling20
- X. Alabama Crime Victims’ Compensation
Commission.....22
- XI. Legal Counseling23

Overview of the AHIF Consumer Guide

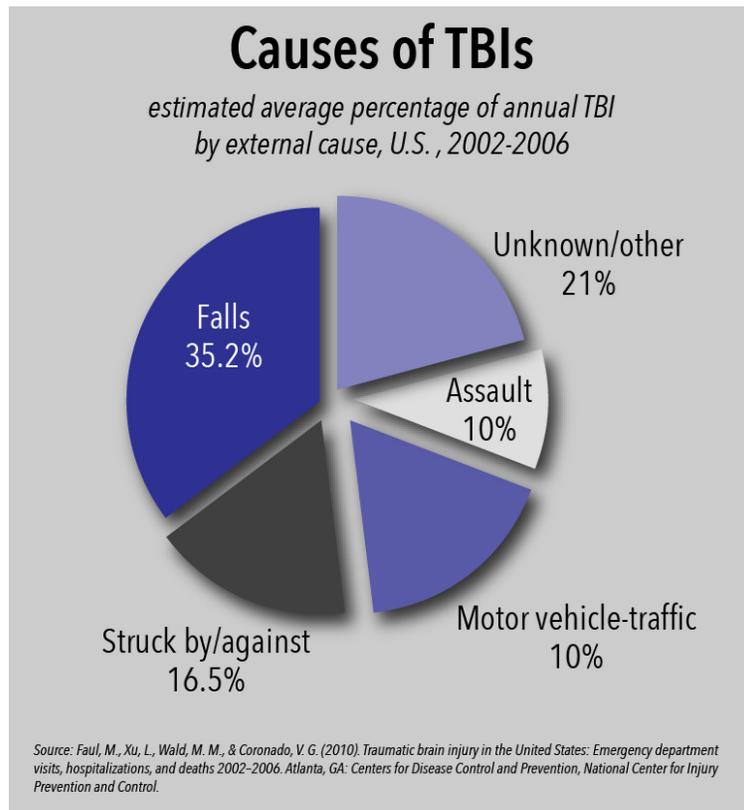
Each brain injury is unique. In Alabama there are about 100,000 people living with a disability as a result of brain injury. That means there are about 100,000 different ways to approach brain injury treatment and rehabilitation.

Because the world of brain injury can be difficult to navigate, the Alabama Head Injury Foundation and the Alabama Department of Rehabilitation Services provide this guide to help consumers find their way through the available support services. This publication is also intended to help people affected by brain injury become stronger and more independent advocates for themselves and their loved ones.

Alabama Head Injury Foundation (AHIF) provides information and one-on-one support for individuals living with brain injury as well as family, friends, co-workers and medical professionals who serve individuals with brain injury. Life after brain injury is a challenge and AHIF is here to help every person affected by brain injury to achieve his or her full potential.

For more information, call Alabama Head Injury Foundation at 800-433-8002 or 205-823-3818 Monday through Friday 8 a.m. to 4:30 p.m. At other times, check your local phone directory for the county crisis hot line in your area.

Alabama Head Injury Foundation does not endorse any product or service listed in this consumer guide. Please use the information found in each section to assist you in making informed decisions.



Overview of Traumatic Brain Injury

What is brain injury?

The brain controls everything we do, say, think and feel. It controls the very functions that keep us alive: breathing, circulation, digestion, hormones and the immune system. It is through the brain that we experience emotion and personal expression.

A brain injury is damage to living brain tissue caused by an external or internal insult (e.g. blow to the head, excessive force like shaking/whiplash, bleeding inside the brain, inflammation/swelling, etc.) that may result in temporary or permanent cognitive, physical, behavioral and/or emotional changes. There may or may not be a period of unconsciousness immediately following the event. Because no two brains are the same, the results of a brain injury, which can affect different areas of the brain depending on the type and severity of the accident, vary widely from person-to-person.

Major causes of brain injury include falls, motor vehicle crashes, violence, concussions, bicycle crashes, lack of oxygen from cardiac arrest, near drowning, aneurysms, strokes and tumors. Illness that can cause inflammation of the brain, such as encephalitis, may also result in a brain injury. The only known cure for brain injury is prevention.

Brain injury happens to persons throughout all communities, regardless of race, ethnicity, sexual orientation, gender, socio-economic class, age or any other variable. Native Americans and African-Americans, however, generally have a higher incidence of brain injury than others.

Mild brain injury, the most common brain injury, may occur with no loss of consciousness or noticeable physical injury. Persons with mild brain injury may experience symptoms and impairments that are temporary or permanent. A concussion is a mild form of brain injury. Unfortunately, many mild brain injuries go undiagnosed for weeks, months or even years after the injury.

Some people believe that when the brain is injured, it can mend completely – like a broken arm. Unfortunately, brain cells do not regenerate like skin or bone cells. Rehabilitating from a brain injury takes time because damaged cells need to relearn how to do things while the brain uses healthy cells to compensate.

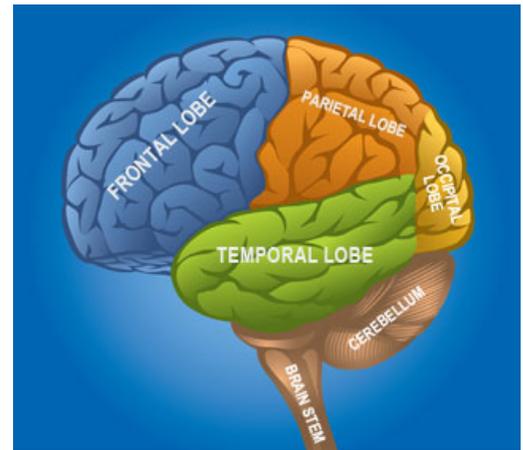
Possible Cognitive Changes:

- Short-term or long-term memory loss
- Slowed processing of information
- Impaired judgement
- Trouble concentrating or paying attention
- Difficulty keeping up with conversation; trouble finding words
- Spatial disorientation
- Difficulty organizing or problem solving

- Inability to do more than one thing at a time
- Difficulty with language or speech production

Possible Physical Changes:

- Seizures
- Fatigue, increased need for sleep
- Insomnia
- Sensory loss or impairment
- Blurred or double vision
- Headaches or migraines
- Trouble with balance and dizziness
- Decreased motor abilities
- Sexual dysfunction
- Muscle control and balance problems
- Ringing in the ears
- Hormonal changes



Possible Emotional Changes:

- Depression, grief over loss of ability, or chemical changes caused by the injury
- Anxiety, restlessness, agitation
- Lower tolerance for stress
- Irritability, frustration, impatience
- Mood swings
- Impulsiveness and lack of inhibition
- Emotional flatness and passivity

After brain injury, individuals vary on how they define or adjust to the changes in their life. Persons who survive brain injury often find that things will never be the same. Fortunately, many rehabilitation and treatment programs can help persons with brain injury rebuild their lives and achieve more independence.

While it is important to understand changes that may have a negative impact, the best resources for recovery are an individual's current strengths, abilities and interests. As many individuals with brain injury have said: "It's not about what you lost – it's about how you use what you have left!"

About Alabama Head Injury Foundation

In 1984, a small group of families and providers came together to advocate for services for persons with brain injury and their families living in the state of Alabama. Today, Alabama Head Injury Foundation is celebrating its 30th year as the only statewide nonprofit dedicated to enhancing the quality of life for Alabamians affected by brain injury. Over the decades, AHIF has developed from an advocacy driven organization to one that focuses on both advocacy and direct service.



Alabama Head Injury Foundation offers support to Alabamians affected by traumatic brain injury through:

- Advocacy and public policy
- Resource Coordination services, which provide personal one-on-one connection to information and resources
- Respite Care for caregivers of individuals who have sustained a traumatic brain injury
- Recreational Support Group opportunities for TBI survivors and their families
- A weekend camp specifically designed for TBI survivors

Organizational Strengths and Values

The mission of Alabama Head Injury Foundation is to improve the quality of life for survivors of traumatic brain injury and for their families. We accomplish this through our organizational strengths and values:

- **Social Change:** We believe in social and systemic change as we empower others to advocate on their own behalf.
- **People-Centered Services:** We share a passion for the people we serve and strive to provide services that support each individual's choices and needs.
- **Equal Access:** We work hard to ensure that all individuals are aware of and have access to services.
- **Quality:** We provide all people affected by brain injury with the highest level of service of which we are capable.
- **Collaboration:** We value our partners and recognize that together we can achieve more than if we act alone.
- **Innovation:** We continually strive to monitor trends, anticipate needs, forge creative solutions, and set the standard for best practices in the field.

Resource Coordinators

Resource Coordinators are available to provide confidential support following a brain injury. Persons with brain injury, their family or friends, and professionals can use these services to answer questions, problem-solve issues, find brain injury support resources, navigate complicated systems and assist with educating family, employers and professionals about living with a brain injury.

Many persons affected by brain injury or their families are referred to AHIF at the point of hospital discharge; but, anyone can self-refer or be referred by a professional, such as a social worker, rehabilitation provider, teacher or nurse, at any time.

Resource Coordinators work to determine the level of support needed and provide information and support so that each person can actively guide and direct his or her rehabilitation process.

The following chart includes the names and contact information for each AHIF Resource Coordinator across the state, along with the service area covered by the individual.

Resource Coordinator	Phone	E-mail	Counties Served
Catherine Barlow	(334) 580-9062	Cbarlow2ahif@gmail.com	Autauga, Bullock, Chambers, Coosa, Dallas, Elmore, Hale, Lee, Lowndes, Macon, Montgomery, Perry, Russell, Tallapoosa, Wilcox
Terrie Causey	(334) 889-4450	tcahif@aol.com	Barbour, Butler, Coffee, Conecuh, Covington, Crenshaw, Dale, Geneva, Henry, Houston, Pike
Debi Dean	(256) 383-5005	ahifshoals@aol.com	Colbert, Fayette, Franklin, Greene, Lamar, Lauderdale, Lawrence, Marion, Pickens, Tuscaloosa, Walker, Winston
Sandy Kiplinger	(256) 498-1023	sandykip@juno.com	Blount, Cherokee, Cullman, Dekalb, Jackson, Limestone, Madison, Marshall, Morgan
Pat Motley	(205) 594-4992	patmotley@windstream.com	Bibb, Calhoun, Chilton, Clay, Cleburne, Etowah, Jefferson, Randolph, St. Clair, Shelby, Talladega
Teresa Roberts	(251) 246-5003	teresabroberts@att.net	Baldwin, Clarke, Choctaw, Escambia, Marengo, Mobile, Monroe, Sumter, Washington
Debi Dean	(256) 383-5005	ahifshoals@aol.com	Colbert, Fayette, Franklin, Greene, Lamar, Lauderdale, Lawrence, Marion, Pickens, Tuscaloosa, Walker, Winston

Support Groups

AHIF is committed to providing recreational and social opportunities for our consumers across the state. A recent CDC study found that the #1 problem identified by individuals who have sustained TBI is social isolation. The following chart represents the standing support group meetings. You are encouraged to contact the individual support group contact to verify the meeting time and location.

City/County	Meeting Date	AHIF Contact	Contact Phone	Meeting Location
Anniston/Jacksonville	4th Friday of each month; 12:00- 2:00 pm	Pat Motley	(205) 594-4992	Jacksonville Community Center, 501 Alexandria Rd SW #A, Jacksonville
Auburn	4 th Tuesday of each month, 6:00 pm cst <i>(exception: Nov & Dec)</i>	Catherine Barlow	(334) 580-9062	Grace United Methodist Church, 915 E. Glenn Avenue, Auburn
Birmingham	3rd Thursday of each month; 4:00 pm- 6:00 pm	Pat Motley	(205) 594-4992 or 800-433-8002	Patton Ridge Apartments, 2122 Rocky Ridge Road, Hoover
DeKalb County	Quarterly	Sandy Kiplinger	(256) 498-1023 or 800-671-6834	Call for Time and Location
Dothan	1st Tuesday of each month; 6:30 pm	Terrie Causey	(334) 889-4450	HealthSouth Rehab Hospital <i>(in the cafeteria)</i> 1736 E Main Street, Dothan
Dothan/Headland	3rd Monday of each month; 10:00 am – 1:00 pm	Terrie Causey	(334) 889-4450	Living Waters Counseling, Inc., 2130 County Road 125, Headland
Gadsden	2nd Friday of each month; 12:00 pm- 2:00 pm	Pat Motley	(205) 594-4992	Elliott Community Center, 2829 West Meighan Blvd, Gadsden
Mobile	Every Tuesday of each month; 10:00 am - 2:00 pm	Teresa Roberts	(251) 246-5003	Regency Church of Christ; 501 S. University Blvd, Mobile
Montgomery	2nd Thursday of each month; 6:00 pm	Catherine Barlow	(334) 580-9062	HealthSouth Rehab Hospital <i>(in the cafeteria)</i> , 4465 Narrow Lane Rd, Montgomery

City	Meeting Date	AHIF Contact	Contact Phone	Meeting Location
Opelika	3 rd Wednesday of each month; 12:00 noon	Catherine Barlow	(334) 580-9062	Easter Seals Achievement Center (<i>in conference room</i>) 510 W Thomason Circle, Opelika
Roanoke	2 nd Tuesday of each month; 12:00- 2:00 pm	Pat Motley April Turner	(205) 594-4992 (334) 293-7047	Community Life Church, 220 County Road 79, Roanoke
Shoals	2nd Thursday of each month; 3:00- 5:00 pm	Debi Dean	(256) 383-5005	Dogwood Terrace Apts. Community Room, 1502 Marlborough Blvd, Florence
Tuscaloosa	Please call for additional information	Debi Dean	(256) 383-5005	Caring Days 943 31 st Street East Tuscaloosa

Respite Care

AHIF recognizes the vital role that caregivers play in the recovery and general welfare of a traumatic brain injury survivor. AHIF further recognizes that this role is 24/7 and ongoing, giving tremendous importance to the availability of periodic respite care to give these caregivers a short but invaluable moment to step away. Caregivers who are interested in learning more about the AHIF respite care services can call the AHIF corporate office at 205-823-3818.

Camp

AHIF provides a weekend camp at the beautiful Camp ASCCA in Jackson's Gap, Alabama. Camp is typically offered in April of each year and individuals can contact the AHIF corporate office at 205-823-3818 to request additional information about the camp program and registration.

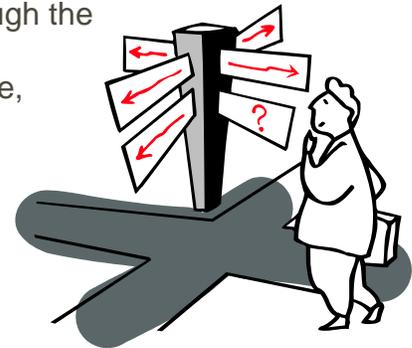


Advocacy, Rights and Appeals

Persons with brain injury and their loved ones are supported in efforts to advocate for themselves with the assistance of others. This guide is designed to assist persons with brain injury and their families in locating and accessing support systems and services. Ideally, you will be able to find providers who will work with you or your loved one to maximize independence and rehabilitation. Ultimately, you are the best advocate for yourself and your family. While many people will assist you along the way, you are the final decision maker.

Alabama Head Injury Foundation can assist you in understanding your options; you are the authority on what is best for your situation. Always remember that you are your own best advocate. Do not be afraid to ask questions or campaign assertively to access available services.

You should expect to have basic rights when navigating through the brain injury system. Each medical care facility should have a Patient's Bill of Rights to show you upon request. For example, you should have the right to know about treatment and rehabilitation plans, the right to direct and actively participate in rehabilitation service plans and educational planning, and the right to access your medical files. Seeking clarity is important for successful self-advocacy: ask questions until you fully understand your situation.



Appealing medical decisions is common in the brain injury rehabilitation process. If you are not satisfied with the decision that a provider has made regarding care, you have the right and responsibility to appeal that decision. While some appeals are denied, other appeals may improve the situation. Many persons with brain injury and their families have appealed and won decisions relating to government benefits, educational plans, insurance settlements and more. Do not feel that you are “complaining” or “being difficult” if you decide to appeal a decision.

The Alabama Disabilities Advocacy Program (ADAP) provides representation for persons with disabilities who live throughout Alabama. More information about ADAP can be found at www.adap.net.

Americans with Disabilities Act

The Americans with Disabilities Act (ADA) is a law that prohibits discrimination against persons with disabilities. The law protects the basic civil rights of the millions of persons with disabilities throughout the United States. The ADA guarantees people the following:

Earning a Living: Title I of the ADA covers all employment practices, including hiring and firing, raises and promotions, job training, insurance and other benefits. As determined by specific guidelines, employers are required to make reasonable accommodations unless it would impose undue hardship on the employer.

State and Local Government Programs and Services: People with disabilities may not be excluded from educational and recreation programs, even if separate programs are available. If a public service operates out of an inaccessible office, it must be moved or provided at another location.

Transportation: The ADA covers traveling by bus or rail. All trains, buses and their stations must be accessible.

Public Accommodations: Public accommodations must be accessible. This includes places that provide food and drink, lodging, entertainment, areas for public gathering, shopping and rental services, recreation or exercise, education, social services, travel and more.

Telephone Relay Services: Telephone companies must provide telephone relay services for persons who use TDDs (Telecommunications Devices for the Deaf) or similar devices at no extra charge. Relay services are available by dialing 711.

For more information about what the ADA means for your situation, call the ADA Information Line at 800-514-0301. The TDD number is 800-514-0383.

Service Provider Research

You have the choice to research professionals to assure their competence in providing services for persons with brain injury. Do your research when you are choosing providers and professionals with whom to work. Try to interview at least three providers or professionals whenever you make a decision and then choose the best one for your situation. The following list of questions is designed to get you started. You may want to ask more questions relating to the services needed in your particular situation. Some sections in this guide have more specific questions that you may want to ask.

- How many persons with brain injury with situations similar to my own have you provided services for?
- How long have you been providing services for persons with brain injury?
- What training do you have that qualifies you to work with persons who have sustained brain injury? Explain your knowledge of government benefits.
- How can we work together to encourage a high level of independence for my loved one and support for myself?
- Can you provide the names and telephone numbers of three references?



If you have any questions during the process of finding competent providers and professionals, call Alabama Head Injury Foundation at 205-823-3818 or 800-433-8002.

Financial Planning

After a brain injury, many people face financial struggles and challenges that may be overwhelming. This section provides a background of financial planning and discusses different government financial resources and options for persons with brain injury and their families.

Financial Planning

Brain injury can greatly affect the financial situation of the person with the injury and their loved ones/dependents. There may be a change in earning potential and the projected income from salary/wages. Income from government benefits, legal settlements and other sources may become necessary. Changes in expenses, such as housing, transportation, and personal care may also affect finances. Other issues to consider include lifestyle, debt, insurance, estate planning and investments.

Although it can seem like a lower priority during time of crisis, it is imperative to take time to develop a comprehensive plan for meeting current and future financial needs. This information needs to be revisited regularly, because it is an important step in making sure you and/or your loved one can live the quality of life desired.



There are public benefits available to persons with disabilities, as detailed in the "Government Financial Resources" section on the following page. Some of these resources place limits on income and certain types of assets. Exceeding such limits, which include insurance settlements or inheritance money, can lead individuals to lose some or all of their benefits. There are many other qualification criteria that need to be met to keep public funding, such as having properly titled assets and beneficiaries.

Proper planning can help protect a person's continued eligibility for public benefits. It is in Special Needs Planning to structure a solid financial plan.

Special Needs Trust (SNT)

Government cash benefits, as detailed in the "Government Financial Resources" section on the following page, provide for the bare necessities of care. Parents or guardians of an individual with special needs often provide extras beyond the bare necessities to make their life comfortable. An important aspect of care is to consider how the loved one will be cared for when the parent or guardian is no longer able.

To maintain eligibility for government benefits and leave assets to an individual with brain injury, a Special Needs Trust (SNT) needs to be set up. Special Needs Trusts are designed specifically to supplement, not replace, government benefits, to ensure "extra" expenses are covered. Some of these extras include but are not limited to out-of-pocket medical expenses, eyeglasses, vehicle maintenance, insurance, hobby materials, entertainment, personal care attendant, or essential dietary needs.

Money from the SNT cannot be distributed to the person with a disability; it must be distributed directly to a third party. Trust assets are not held in the name of the person

with the disability. Family members can become the beneficiary of the trust assets. The laws governing trusts are complex and vary, so it's advised that a qualified attorney or a financial planner who specializes in Special Needs Planning is consulted when setting up a SNT. It should be noted that Alabama Head Injury Foundation, as a qualified 501(c)3 nonprofit, can be established as the residual beneficiary of a Special Needs Trust. This provision would need to be established at the initial creation of the SNT, but does provide a wonderful opportunity to care for a loved one in their lifetime and memorialize their legacy through a charitable gift upon their death.

Government Financial Resources

All government financial programs have an appeals process for individuals who have been denied benefits. It is necessary for persons with brain injury to appeal negative financial decisions. If you think that you should be eligible and have been denied benefits, you are encouraged to begin the appeals process immediately. Please do not feel that you are “complaining” or “being difficult” or that it will be “no use.” The appeals process is part of the application process.

Social Security Disability Insurance (SSDI)

SSDI may be an option if there is a physical or mental impairment that is expected to keep a TBI survivor from doing any substantial work for at least one year, or a condition that is expected to result in death. The amount of a person's SSDI payment depends upon how much he or she has worked and how much he or she has paid into the Social Security system through taxes.



Once you have qualified for SSDI, a knowledgeable financial planner or lawyer should be able to assist you in structuring a compensation plan that will allow you to keep eligibility for government benefits. When choosing a financial planner or attorney, be sure to ask the questions found in the [Legal Counseling](#) section.

It is advised that you apply for SSDI benefits as soon as possible because of a six-month waiting period. If a person has qualified for SSDI, benefits begin on the sixth full month after the application is accepted.

To apply for SSDI, call your local Social Security Administration (SSA) office. It also can be useful to work with an attorney during the SSDI application. For more information on working with an attorney, see the [Legal Counseling](#) section. To find out where the nearest SSA office is located, call 800-772-1213 or see the Administration's Web site at www.ssa.gov. You can also call Alabama Head Injury Foundation at 205-823-3818 or 800-433-8002.

Supplemental Security Income (SSI)

Supplemental Security Income (SSI) is a strictly need-based federal financial assistance program for persons with disabilities who have limited resources. The program is intended to guarantee a minimum monthly income to persons with disabilities who have little or no income and resources.

Persons with disabilities can be eligible for SSI even if they have never worked. Age is not a factor. If a person is eligible for SSI, he or she is automatically eligible for Medicaid. People receiving SSI must meet certain income and resource limitations to be eligible. Insurance policy payments, court settlements, worker's compensation and other financial resources may limit your eligibility for SSI.

To apply for SSI, call your local Social Security Administration (SSA) office. To find out where the nearest SSA office is located, call 800-772-1213 or see the Administration's Web site at www.ssa.gov.

Medicare

Medicare is a federal health insurance plan that includes persons with disabilities that are determined to be eligible for SSDI due to disability. Medicare is not based on income. Medicare has four components: hospital insurance (Part A), medical insurance (Part B), Medicare Advantage Plan (Part C) and Prescription Drug Coverage (Part D). Local Social Security Administration offices process applications and provide information about the program.

Information on requirements for certification and covered benefits is addressed in a booklet published by the Social Security Administration. For a copy, call 800-772-1213 or visit www.medicare.gov. To be eligible, a person must have been entitled to SSDI benefits for 29 months or turn age 65. Medicare parts A and B are often called "Traditional Medicare."

Hospital Insurance (Part A)

Any person who has received SSDI for 29 months automatically becomes eligible for Medicare hospital insurance at no monthly cost without an application process. You may wish to call the Centers for Medicare & Medicaid Services at 800-633-4227, TTY at 877-486-2048 or visit www.cms.hhs.gov. Medicare will help pay for the following health care options:

- **Hospital Inpatient Care:** Patients are responsible for a deductible. After the deductible is met, Medicare will pay a certain percentage of inpatient care based upon length of stay.
- **Skilled Nursing Home Care:** Medicare pays 100 percent for the first 20 days for skilled care or physician-ordered rehabilitation when the person has been hospitalized for at least three days. There is a daily charge beginning on the 21st day. It does not cover Long-Term or Custodial Care.
- **Home Health Care:** Medicare can pay for a limited amount of home-based skilled nursing care and physical, occupational, and speech therapy.
- **Hospice Care:** Medicare provides full coverage for inpatient and home care services. There is no deductible.



Medical Insurance (Part B)

After receiving SSDI benefits for 29 months, a person with brain injury may choose to enroll in the Medicare medical insurance program (Part B). Premium and deductible charges do apply. If a recipient does not want the medical insurance Part B, he or she

must refuse it in writing. After the deductible is met, and premiums are paid, Medicare will cover:

- **Doctor's Services:** After the deductible is met, Medicare pays 80 percent of allowable or approved charges for an unlimited number of surgical, diagnostic and other medical doctor-administered services.
- **Other Services:** Services covered may include ambulance transport, home health visits, outpatient services such as emergency room or clinics and certain durable medical equipment..

*Currently, many persons receiving Medicare also purchase supplemental insurance (Medigap) to ensure more reliable health coverage. For more information, call your county social service office.

*Services NOT covered under Medicare include personal assistants, institutional services, dental care/dentures, hearing aids, eye care/glasses, routine foot care, some screening tests, bathroom grab bars, etc. Call 800-633-4227 for more information about Medicare coverage.

Medicare Advantage Plan and Prescription Drug Coverage (Part C and Part D)

In 2006, the federal government instituted a change for Medicare recipients, which provides a new outpatient prescription drug benefit. Beneficiaries can now remain in traditional Medicare and enroll separately in private prescription drug plans or enroll in a Medicare Advantage Plan (Part C) that also covers prescription drugs. Up until this point, drug coverage was not part of Medicare. Individuals who are Medicaid eligible automatically are enrolled in a plan. Almost one in three people with Medicare qualify for these extra benefits.



With the Medicare Advantage Plan, Medicare will pay for almost all of the drug costs. You will have to pay the monthly Medicare Part B premium and you also may have to pay a monthly premium for the extra Medicare Advantage Plan benefits. There is extra help available for people with limited income and resources. For more information, call the Linkage Line at 866-333-2466 or go to www.medicare.gov.

Dual Eligibles

This term describes individuals that are eligible for both Medicare and Medicaid due to low income and are either age 65+ or have a disability. For many people Medicaid provides a critical supplement to Medicare, filling gaps in coverage. Some specific types of drugs will still be paid for via Medicaid (check with your pharmacist).

Medicaid

Some persons will be eligible for Medicaid. Medicaid is a need based program (e.g. low income, few assets, meet immigration/residency requirements). It pays for eyeglasses, dental care, mental health services, family planning, hospice care, lab and x-ray, health centers, medical equipment, home health care, inpatient and outpatient hospital services, nursing home services, some prescribed drugs and transportation to and from medical appointments. People receiving SSI/SSDI are eligible for Medicaid. For more information, call your county social service office.

Department of Veterans Affairs (VA)

The Department of Veterans Affairs (VA) is a federal program that provides benefits to eligible veterans and their dependents. An honorable or general discharge will qualify a veteran for benefits. Veterans in prison or on parole may be entitled to certain VA benefits.

Eligible veterans may receive acute rehabilitation, residential care, outpatient treatment, dental treatment, alcohol and drug treatment, prosthetic devices or mental health services. The VA has a system that prioritizes who can receive services and at what time. Since there are limited numbers of beds available in VA facilities, there are often waiting lists for services.

For more information about eligibility and services, call your local VA facility. "Military One" is also source for a one-stop information center. Contact Military One at 800-342-9647 or visit www.military.onesource.com.

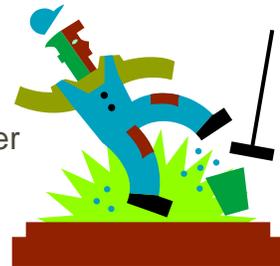
If you sustained a brain injury during active military status, you may be eligible for services through the Defense and Veterans Brain Injury Center. For more information, call 800-870-9244 or visit www.dvbic.org.

Workers Compensation

Workers Compensation Program is an insurance program provided by many employers at no cost to the employee. If an employee is hurt on the job or develops a disease due to conditions on the job, Workers Compensation pays all reasonable and necessary medical care related to the injury or illness.

If a brain injury happens on the job, a person or his or her family should immediately inform the employer that an injury has occurred. Many employers require that an employee report his or her injury within 24 hours.

The worker should only seek treatment at approved medical facilities. The worker must report any earnings, Social Security benefits, or unemployment compensation benefits to the insurance company. These forms of income can affect the amount of Workers Compensation benefits received.



Education

Participating in a positive and enriching educational program is the right of all students with or without disabilities. This section makes suggestions about whom to contact and how to create an educational plan that can help you or your loved one obtain a quality education and become as independent as possible.

Alabama Head Injury Foundation has many educational materials for parents and educators. To request information or for assistance in finding educational resources for your child, call Alabama Head Injury Foundation at 205-823-3818 or 800-433-8002. A Resource Coordinator is available to assist parents and professionals to identify resources and help with problem solving.



Educational Rights of Persons with Disabilities

ADA is comprised of civil rights laws that protect persons with disabilities from discrimination. Schools are required to provide accommodations for students. Some examples of accommodations include alternative format testing, preferential seating and textbooks on audio tape.

The ADA prohibits the discriminatory assignment of students with disabilities to segregated classes or facilities by state and local governments. Section 504 of the Federal Rehabilitation Act of 1973 prohibits similar actions by any organization or program that receives federal funding.

These laws apply to elementary, secondary and post-secondary schools. In elementary and secondary schools, students with disabilities may be assigned to separate facilities or courses of special education only when this placement is considered the least restrictive environment (LRE) and necessary to provide equal educational opportunities. Any separate facilities, and the services provided in separate facilities, must be comparable to other facilities and services.

Individuals with Disabilities Act and Individual Education Plans (IEPs or IIIPs)

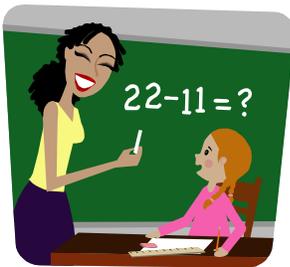
The 1997 Individuals with Disabilities Education Act (IDEA) requires that all local school districts provide a free and appropriate public education (FAPE) for all students with disabilities from birth through 21 years of age. IDEA gives parents the right and responsibility to participate in the development of the Individual Education Plan (IEP or IIIP) that should be created for each child with a recognized disability, including brain injury. An IIIP is a new option where all services and agencies involved with the child and family work together.

An Individual Education Plan (IEP or IIIP) describes a child's abilities and learning needs. An IEP or IIIP should list the type of assistance your child may require in order to learn. Each child should have an IEP or IIIP that is responsive to his or her specific needs.

An IEP or IIIP should be written with the input of at least four people: a person from the school district who can ensure that the plan will be implemented; the student's mainstream teacher; a special education teacher; and one or more parent or guardian. Transition-age students (age 14-21) are encouraged to participate in their IEP or IIIP meetings. At least one member of the evaluation team should be an education professional who is knowledgeable about brain injury, also known as a TBI Specialist.

An IEP or IIIP for children age 14 and older should include planning that deals with the transition from school to adult life. Transition planning should address a variety of needs and may include job training and placement, continuing education, income, housing, recreation and leisure activities, community access, insurance, guardianship and medical care. The [Alabama Department of Rehabilitation Services](#) can assist individuals with the transition to school or employment through assessment services, support, and training.

It is a parent's right to assist in the development of his or her child's IEP or IIIP. A parent must sign the IEP in order for it to be a legally binding document. Parents are encouraged to work with the school district every step of the way. The parent or guardian may not be aware that they actually lead the team. Let the school know if your family needs an interpreter and translated materials during a meeting with school officials.



The parent or the school may request an evaluation. If, after an evaluation, your child qualifies for special education services, you can expect the school to provide free and appropriate public education to meet the individual needs of your child. Your child may receive certain services for which he or she qualifies, including alternative transportation, speech and language therapy, physical therapy or assistive technology. When the services are educational based, you can expect the school district to make the necessary financial arrangements to provide or pay for the services. Minnesota law requires school districts to pursue third party reimbursement for special education students who receive some health related services such as Occupational Therapy (OT) or Speech Therapy. You may be asked to sign a release of information to allow the schools to receive this important funding. Your school district can answer any questions you may have about this.

Services for Students Ages 3-21

If your child has sustained a brain injury, notify the school principal and the district special education director as soon as possible and provide medical documentation. Request an evaluation for special education services in writing. It is strongly recommended that a Traumatic Brain Injury (TBI) specialist from the school district be involved in the evaluation process.

Once your child qualifies for special education services, a TBI specialist should be a member of your child's educational team. If you have any questions about school re-entry, the evaluation process, or the special education team, you are encouraged to contact the special education case manager, the principal and/or the special education supervisor assigned to your child's school, or the district's director of special services. If

you still have questions, call Alabama Head Injury Foundation at 205-823-3818 or 800-433-8002.

College, Adult, and Community Education Services

A college or university student should call the main telephone number of his or her institution and ask for the office or person in charge of working with students with disabilities, often called the disability services office. Universities and colleges have support staff that coordinate services and accommodations for persons with disabilities.

Under the ADA, post-secondary institutions that receive federal funding are required by law to provide any reasonable accommodation or modification necessary for students with disabilities to have equal access to educational opportunities and services as those of non-disabled students. Examples of available accommodations may include alternative format testing, note taking, priority registration or accessible housing. You will need to provide recent medical documentation of your disability in order to request reasonable accommodations. Students should expect to self-advocate for their needs with individual instructors.

For more information about the services that colleges are required to provide, call the Alliance for Higher Education and Disability at 777-948-7779 or visit www.ahead.org. For more information about how the Americans with Disabilities Act affects institutions of higher learning, call 800-949-4232.

Hospital/Homebound Educational Services

A child may need educational services at home upon release from the hospital or rehabilitation center, based on his or her medical condition, mobility and need for supervision. Hospital/home-bound educational services are available through your local school district on a short-and long-term basis. For more information contact your school's principal. The hospital discharge planner may assist with this process as well.

Community Education

Many community education programs offered through your school district have adults with disability programs. These programs offer customized enrichment and ongoing education classes. They also provide inclusion services for all community education classes. Call the adult program coordinator of community education in your district for more information.

Assistive Technology

Many tools exist to enable persons with brain injury to improve their quality of life and participate more fully in the community, such as a pager-sized device that clips to an individual's belt and is programmed to vibrate to remind them to stay on task, assistive listening devices to block extra noise and planners to help with memory challenges.



Behavioral Counseling

Many individuals find that a brain injury can affect a person forever. A person's abilities, strengths, and personality can all change significantly.

After brain injury, most people go through a period of emotional recovery. The person with brain injury and their loved ones may need to process how their lives have been affected by the loss of abilities, personality changes, vocational adjustments, and changes in family structure and support.

Mental Health Professionals

A mental health professional can assist with emotional adjustment issues, help a person accept their new self, and address self-esteem issues. Many times people may need to explore questions of meaning, spirituality, and identify the new role he or she plays in the family or community. There are many types of professionals who deal with mental health and the emotional issues related to brain injury. The following is a list of some of the professionals in the counseling/therapeutic field.

Psychologists

A professional psychologist has broad knowledge about human behavior and understands how to apply that knowledge to help people explore personal issues and affect change. Psychologists provide evaluation, diagnosis and treatment of mental and emotional issues and disorders.



Licensed Independent Clinical Social Workers (LICSWs)

Family and Marriage Counselors

Counselors specialize in the application of counseling and psychological theory as well as methods to treat and prevent psychosocial dysfunction, disability or impairment. Counselors can address cognitive, affective or behavioral issues. They provide a individuals, families and/or groups therapy.

Religious Leaders

Religious leaders have been trained to support persons in distress in their community. They are able to help people solve problems and assist with referrals to a skilled counselor or therapist.

Behavioral Intervention

Problem behaviors are those that interfere with a person's ability to be independent or relate to others. The most common forms of behavior changes in people who have sustained brain injury involve social skills and the ways in which people interact. Other less frequent, but more difficult behavior issues include aggression, self-injury, property destruction, verbal abusiveness, tantrums and lack of awareness.

Several types of professionals can be helpful in treating behavior issues: behavior professionals, analysts, neuropsychologists, pediatricians, neurologists and psychiatrists. Behavior analysts have been effective in using positive programs to treat

changes in behavior. Neuropsychologists can also be very helpful in identifying neurological factors that are critical in the design of effective behavioral treatment programs. AHIF provides a list of neuropsychologists in Alabama on its website at www.ahif.org.

Questions for behavioral interventions:

1. What is the educational level of the behavior professional?
2. What approaches does the program use to address behavioral concerns?
3. What roles do individuals and their families play in determining the types of behavioral interventions used?
4. What steps does the program take to assure that behavioral interventions are clearly understood by all staff the person has contact with, and that the plan is being implemented consistently by all staff (even at 3 a.m.)?
5. How is the effectiveness of behavioral interventions measured?
6. What role does medication play in "behavior management"?
7. Are physical restraints used? In what circumstances? What policies or protocols exist for the use of physical restraints? Can I see a copy of these?
8. Is a "secure" or locked unit available? When does the program recommend the use of these? Who decides when a person is ready for an open unit after being on a secure unit? How?
9. At what point is an individual's behavior deemed unacceptable to the program? How much notice does the program give the individual and their family? What efforts are made by the program to assist in locating a comparable program that can better meet the needs of the person?

Alabama Crime Victims' Compensation Commission

The Alabama Crime Victims' Compensation Commission was created in 1984 through a laws passed by the Alabama Legislature. Its purpose is to help alleviate hardships suffered by victims of crime. The law covers a variety of expenses for which compensation is paid. This assistance is meant to lessen the financial burden on innocent victims of violent crime and serves as a vehicle of hope for the rights of crime victims. The Alabama law is unique in that it requires a victim or family member of a victim to serve on the three-member Commission which hears cases, ensuring that claims are reviewed from the victim's standpoint.

Eligibility

Any person who is an innocent victim of criminally injurious conduct and who has sustained personal injuries as a result, a surviving spouse or child of a victim who died as a result of criminally injurious conduct, or a person authorized to act on behalf of a victim or a dependent may be eligible for compensation. Applicants must meet all eligibility criteria before compensation may be awarded.

Types of Compensation

- Medical Care
- Counseling
- Funeral Expenses
- Work Loss
- Rehabilitation
- Property
- Moving Expenses



For more information about the Alabama Crime Victims' Compensation Commission, please call **(334) 290-4420** or toll-free (victims only) at **1-800-541-9388**. The application and other information about compensation is available on the Commission website, www.acvcc.alabama.gov.

Legal Counseling

Legal issues and questions can be complicated. This section is intended to guide you on the journey of finding competent and appropriate legal representation.

Why Do You Want a Lawyer?

Lawyers can assist you with:

- Securing maximum benefits from insurance policies
- Determining eligibility for, securing and maintaining government benefits
- Obtaining a settlement from the person or company responsible for the brain injury
- Ending discrimination against a person with a brain injury
- Estate planning, including trust funds, wills, power of attorney, and legal guardianship
- Workers compensation



What if You Can't Afford a Lawyer?

In personal injury cases, you have the right and ability to retain competent legal assistance regardless of your economic situation. In Alabama, you are often able to retain an attorney by using a contingent fee agreement. This means that you do not pay the attorney any money until a successful settlement is reached, in which case the attorney takes a certain percentage of the settlement.

How Do You Pick a Good Lawyer?

Step One: Identify your Issues. The first thing to remember is that lawyers, like doctors, specialize in their field. For example, an expert in estate planning may not be competent to handle a personal injury case. You should select an attorney with the skills and experience to address your specific legal issues.

Step Two: Interview Lawyers. After you have identified the areas in which you need assistance, find at least three lawyers or law firms that you think can meet your needs. It is your right and responsibility to ask potential lawyers about their background and experience. Questions to ask include

1. How many cases involving brain injury like mine have you handled? What were the results? A good, experienced attorney should be able to tell you that she or he has successfully handled several cases involving brain injury.
2. What training have you received involving brain injury cases?
3. What kind of experience do you have interrogating expert witnesses? How would you use expert witnesses in my case? Attorneys can use physical, speech and occupational therapists, psychiatrists, psychologists, neuropsychologists, neurosurgeons, case managers and other professionals as experts to strengthen

your case. Experts should be able to prove the future costs of rehabilitative care, loss of earnings and other economic losses for which you may be compensated.

4. What knowledge do you have of government benefits for persons with brain injury? Can you structure the settlement so that I will not lose eligibility for government benefits? Attorneys should know and be able to explain to you how to keep eligibility for Social Security, Medical Assistance and other government benefits.
5. Will you provide the names and telephone numbers of three individuals as references who had situations similar to mine? Attorneys should be able to provide references that will vouch for their abilities.

Other Legal Resources

The Americans with Disabilities Act (ADA) guarantees that individuals with disabilities receive equal opportunities in employment, public accommodations, transportation, state and local government services, and telecommunications. If you have any further questions about locating and retaining qualified legal assistance, please call Alabama Head Injury Foundation at 205-823-3818 or 800-433-8002.



**3100 Lorna Road
Suite 203
Hoover, AL 35216
Phone: (205) 823-3818
Fax: (205) 823-4544
E-mail: ahif1@bellsouth.net
Web: www.ahif.org**