

When Dillon was in eighth grade, he was struck by a car while crossing M-59. Despite severe injuries that put him in a vegetative state, today Dillon is still working toward recovery thanks to a variety of specialized therapies.

My son Dillon was a teenager walking home from a day at the ski lodge when he was struck by a car while crossing highway M-59. He spent months in the hospital, part of the time on life support. The first night, doctors told me he had less than a 20 percent chance of survival due to the extensive injuries to his brain and sacrum. He spent another year in a long-term care facility. Finally, he was able to be transferred back home.

Today, Dillon has made small yet significant progress because of the range of care he's received, including skilled nursing care and physical, speech, stem cell, occupational, swim, massage, and vital stimulation therapies. **Without many of these therapies, I have no doubt my son would not be alive today.** Seven years before my son's accident, Dillon's father (my husband) was killed in a car accident—I cannot express enough how devastating this was, and without the former auto no-fault law, I wouldn't have been able to advocate for my son.

Without around-the-clock home health care, I would have suffered extreme financial hardship. I do not have the professional training his injuries require, and trying to take that on myself would have set us both up for failure.

Dillon's home care keeps him out of the hospital and steadies his healing path. **It gives me hope when everything is hopeless.** Every little victory, no matter how small or insignificant it may seem to an outsider, is a huge victory to us. It makes it all doable; it makes it all worth the everyday fight. **If HB 4486 and SB 314 aren't given a fair shake, dramatic cuts like those outlined in the new fee schedule would mean that after years of fighting, Dillon's care team will have a new battle to maintain his quality of life.**

- Rebecca, mother of Dillon
Resident of Howell, MI



WHY WE NEED ACTION NOW

Dillon is **one of at least 6,000 patients expected to lose care** if HB 4486 and SB 314 are not passed well before July 1, 2021.

HB 4486 and SB 314 **preserve the cost controls implemented** in the auto insurance law passed in 2019.

HB 4486 and SB 314 provide a narrow fix. **They do not rewrite Michigan's entire fee schedule or undo reforms.**

The bills offer legislators a stark choice: Protect access to care for thousands of critically injured accident victims, as well as future accident victims—or take the side of big auto insurance companies, who have raked in record profits during the pandemic.



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Support HB 4486 and SB 314

Put vulnerable Michigan citizens first

HB 4486 and SB 314 provide a **narrow, technical fix** to an unintended consequence of Michigan's 2019 auto insurance reform package — **without rewriting the entire fee schedule, adding costs to the system, or changing any other element of auto no-fault reform.**

This technical issue must be addressed well before the fee schedule written into the 2019 package goes into effect after July 1. If it isn't, 9 out of 10 post-acute centers do not have confidence they can continue to operate. Without access to these services, patients with horrific injuries from life-altering accidents will lose access to care, and face chaos and disruption in their recovery process. Your constituents deserve better!

What does this proposed legislative solution do?



Preserves access to specialized rehabilitative care for people with serious injuries sustained in auto accidents — often as a result of somebody else's negligent driving.



Saves thousands of caregiver jobs, according to a recent survey by the Michigan Brain Injury Provider Council.



Maintains cost controls implemented as part of the 2019 insurance reform legislation.

Why should you support HB 4486 and SB 314?

- The bills offer a fair and reasonable cap on providers — no more than 200% of what Medicare will pay, just as the reforms dictate. **Providers are still held to their 2019 rates, if these rates are lower than the new fee schedule.**
- They allow **ethical practitioners** to remain in business.
- **They don't add costs to the system** while maintaining the long-term beds and services required to meet the needs of Michigan's patient population.
- **Time is of the essence**—even if the bills are passed quickly and immediate effect is granted, the 90-day waiting period puts additional strain on small businesses trying to keep their doors open to continue providing care.

Who supports it?

Affected patients and their families. If the new fee schedule goes into effect as is, even family caregivers able to keep their loved ones at home will see their reimbursement rates gutted.

Michigan voters. In a 2018 statewide survey, nearly two-thirds of voters said we have a responsibility to continue our long-honored promise to provide care for auto accident victims with catastrophic injuries.

Small businesses. The MBIPC survey found that 86% of providers had little to no confidence that they would be able to keep their doors open after July. Nearly 5,000 Michigan jobs are on the line—this will be especially devastating for access to care in rural areas, in an already shaky pandemic economy.

Advocacy organizations, including:

- **The Christopher and Dana Reeve Foundation**
- **The Michigan Assisted Living Association**
- **Disability Rights Michigan**
- **The Brain Injury Association of America**
- **Disability Network/Michigan**
- **Michigan Occupational Therapy Association**
- **Michigan League for Public Policy**
- **Michigan Developmental Disabilities Council**