

Danny was in a devastating car accident in 2003. Today, he receives an array of rehabilitative therapies at home. If this legislation doesn't pass, Danny could lose the care he needs to survive, and his health would rapidly decline.

Danny was a bright, active 11-year-old when he was involved in a devastating auto accident in 2003. After the accident, he spent almost a year in Bronson and Mary Free Bed hospitals, where he began receiving an array of rehabilitative services—and our family was able to access counseling from a social worker. These services continued at home after Danny was discharged.

Today, Danny receives around-the-clock skilled nursing care as well as physical, speech, recreational, and occupational therapies. **Without all these services combined, Danny would have had to be placed in a nursing home. Without skilled nursing care, Danny would likely not be with us today.** The other therapies have helped Danny to remain involved with his family, friends, and community.

Danny's aquatic therapy is particularly important. Outside of the pool, he has no functional movement and is non-verbal. But in the pool, Danny has shown the ability to use his legs to spell

words, answer questions, make choices, and more. We always knew he was alert and aware of his surroundings, but we never imagined he could process information and move his body on command to demonstrate cognitive abilities.

**The no-fault system has allowed Danny to live at home and stay out of the hospital, but I can't comprehend my life if I had to provide his care 24/7. There is no way I could give him what his nurses provide, his health would decline drastically.** The therapies and services he received helped us realize that he's still that bright young man we knew prior to the accident. In fact, his sister is getting married in October with Danny serving as her best man. Having access to nursing care will allow us to make the drive with Danny to attend the wedding.

*- Laurie, mother of Danny*  
Resident of Battle Creek, MI



## WHY WE NEED ACTION NOW

Danny 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.



“

The no-fault system has allowed Danny to live at home, but I can't comprehend my life if I had to provide his care 24/7. There is no way I could give him what his nurses provide, his health would decline drastically.

”

# 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 & 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**
- **Michigan HomeCare & Hospice Association**