

# ENGAGE. INTEGRATE. INSPIRE.

The mission of the BIAC is to engage, integrate and inspire brain injury stakeholders to help achieve the  
Statewide Vision for Brain Injury Policies and Services.

## **Brain Injury Advisory Council (BIAC) Meeting**

**December 12, 2025 - 10:00 a.m. – 2:00 p.m. CT**

**Zoom information for connecting: <https://educationne.zoom.us/j/94166263913>**

To Join By Phone, dial +1 312 626 6799 US (Chicago) - Meeting ID: 941 6626 3913

Find your local number: <https://educationne.zoom.us/u/avQempuQZ>

### **APPROVED MEETING MINUTES**

**MEMBERS PRESENT (and substitutes):** Tiffany Armstrong, Emaly Ball, Jodi Bodnar, Karen Houseman, RaLynn Jacobsen, Sarvinoz Kadyrova, Kristen Larsen, Carla Lasley, Amy Levering, Terry Levering, Brooke Murtaugh, Judy Nichelson, Zijian Qin (substitute for Peg Ogea-Ginsburg), Darsha Pelland, Michelle Ploeger, Peggy Reisher, Tamara Snider, Dennis Thompson, Shawna Thompson, Madison Wurtele

**MEMBERS ABSENT:** Jessica Coffey, Ashley Davis, Lisa McGuire, Jennifer Swanson

**STAFF PRESENT:** Keri Bennett, Alexa Krueger

**VISITORS/PRESENTORS:** Andrew Ngochoch, Ming Qu, and Edith Titamoh

**10:00 – 10:15 am: ENGAGE**

**Call the meeting to order – Council Chair, Emaly Ball**

The meeting of the Nebraska Brain Injury Advisory Council Commenced at 10:03 am.

**Approve September 19, 2025 meeting minutes and December 12, 2025 meeting agenda – Emaly Ball**

The minutes of the September 19, 2025, meeting were reviewed. A motion was made by Tiffany to amend the Public Policy Report to read Keri's name instead of Tiffany's. A motion was made by Darsha and seconded by RaLynn to approve the amended meeting minutes. There were no objections, motion carried by unanimous consent.

The December 12, 2025, agenda was reviewed. A motion was made by Tiffany to move up the Public Policy Report to 10:45-10:55 am. All times on the agenda that followed this report were shifted back 10

minutes. A motion was made by Darsha and seconded by Tiffany to approve the amended agenda. There were no objections, motion carried by unanimous consent.

**10:15 – 10:45 am: ENGAGE and INTEGRATE**

***TBI Registry Report for 2024 – Andrew Ngochoch, Health Data Coordinator and Ming Qu, DHHS Administrator – Both with Public Health, Nebraska Department of Health and Human Services***

Andrew shared a PowerPoint presentation with the Council focusing on Nebraska's TBI Registry cumulative data for 2017 – 2024 and National Trends in TBI.

- Please see attached PowerPoint presentation for statistics.

**10:45 – 10:55 am – Public Policy Update – Karen Houseman and Tiffany Armstrong**

Karen shared the DHHS's renewal of the Aged and Disabled and TBI waivers with the Council.

Every 5 years, DHHS has to renew their agreement with their federal partners, which is the Center for Medicare and Medicaid Services.

Karen shared they are due for their 5-year renewal for the Aged and Disabled Waiver. Due to the changes, they are also amending the TBI Waiver at the same time, so the programs are aligned in how they are being administered.

The proposed changes include individual cost limits in excess of institutional costs, provisions for how the state will implement the individual cost limit and other safeguards for when services exceed the proposed cost limits.

Changes are also proposed to Participant Services, Person-Centered Planning and Service Delivery, Financial Accountability and other sections of the waivers.

They have also updated language and service specifications for many services.

Karen shared a link to summary of changes. This can be found below:

[Summary of Waiver Changes for 1915\(c\) Medicaid Home and Community-Based Services \(HCBS\) Waivers](#)

Karen also shared a link with Council members where they can submit formal comments. This is listed below:

[Webpage for more information on attending presentations or submitting formal comments](#)

Public comment can be submitted December 5<sup>th</sup> through January 5<sup>th</sup>, 2026.

Kristen Larsen shared there has been an emergency Olmstead meeting because of these changes. (Please see attached PDF for dates Zoom Links, dates, and times).

**10:55 – 11:05 am – Break**

## **11:05 – 11:25 am: ENGAGE and INTEGRATE**

### **Strong Infrastructure Components for Brain Injury: State Self-Assessment Tool - Keri Bennett**

Keri shared an update with the Council on the on Strong Infrastructure Components for Brain Injury. This presentation focused on discussing Access to Services/Service Provision.

The definition of this component is as follows:

- Individuals with brain injury and families are supported through an array of services that address needs across recovery and over a lifetime.
- Needs are identified and support is person-centered and customized.

Basic access/service provision benchmarks for the lead state agency include:

- Implementing core components as the foundation for coordinating state systems of services and supports. This includes maintaining the following:
  - Advisory Board (Council)
  - Lead Agency
  - Needs and Resource Assessment
  - State Plan

Intermediate benchmarks include:

- Develops an easily identified and user-friendly points of entry to the state's service delivery systems.
- Develops in-service basic training programs that may include screening, support, referral, basic information for the state's service providers, administrators, community providers and decision-makers.
- Develops a state plan that outlines the mechanism and methods for coordinated systems of services/supports.
- Develops a BI screening process of new applicants and existing clients for the state's systems of service/supports.
- Formalizes state agency and other key partner commitments to coordinate the State's systems of services/supports.

Advanced benchmarks include:

- Implements BI screening of new applicants and existing clients for the state's systems of services/supports.
- Implements the state plan for coordinating systems of services/supports.
- Develops a collaborative interagency structure devoted to ongoing coordination of system services/supports.
- Establishes an evaluation plan to review, revise, and/or expand system coordination as needed.
- Capture client satisfaction.
- Capture provider satisfaction and practices.
- Coordinates the development and delivery of an advanced curriculum for in-service education programs and updates on emerging practices and advances in the field for service providers, administrators, and decision-makers.

BI State Plan Activities to Advance:

Access Services, Goal 1. Improvements to Nebraska's system of care and community-based services for people with brain injury will be driven by the collection and analysis of meaningful data:

- 2024 Needs and Resources Assessment
- Needs Assessment guidance document
- Data matrix
- Impact of COVID-19 on individuals with brain injury, family members/caregivers and service providers

Access Services, Goal 2. Paid caregivers and professionals in medicine and healthcare, education, behavioral health, law enforcement, vocational rehabilitation, and other disciplines will receive information, training, and education to understand and address the physical, cognitive, emotional, and behavioral needs of people with brain injury:

- Identify training needs via the Needs and Resources Assessment
- Nebraska VR staff training curriculum/modules
- Modify the training curriculum/modules for service providers
- Resource inventory organized by age group and/or profession

Access Services, Goal 3. People with brain injury and their family members will access affordable housing, and home and community-based service options in all parts of the state:

- Participate in Olmstead Plan committees, advocate for people with brain injury
- Identify nursing home and assisted living costs/use data, advocate for supports to keep people with brain injury in their homes
- Participate in Nebraska Older Adult Falls Coalition to prevent TBI
- Develop data collection plan for assessing neurobehavioral treatment and residential needs for Nebraskans with brain injury

Access Services, Goal 4. People with brain injury and their family members will be made aware of the dangers of Opioid medication misuse and know where to seek assistance and treatment of substance abuse concerns:

- Identify data sources and partners to explore opioid medication misuse and brain injury, summarize findings
- Compile materials used by other states/federal agencies regarding the dangers of Opioid and other medication misuse

Access Services, Goal 5. Compile and summarize the data on the needs of people with brain injury related to mental illness, and common services used/available to meet their needs.

Connect to Resources, Goal 2. People with brain injury will have access to trained Peer Supporters:

- One-page summary of Peer Support- how it differs from and complements other services
- Identify areas where Peer to Peer Supports may be needed, explore opportunities to increase availability of Peer Supports for individuals and families

Connect to Resources, Goal 3. Nebraska's statewide capacity to provide comprehensive and coordinated services to people with brain injury and their families will be enhanced through active participation in federal brain injury grant and technical assistance programs:

- Participate in at least two federal grantee workgroups, share information with the BIAC

**11:25 – 11:40 am: *INSPIRE***

**BI State Plan Progress – *Keri Bennett***

Keri shared two updates with the Council.

1. There is a small workgroup from the Council that is meeting to look at the needs assessment data. They will be looking for any revisions that need to happen to the Brain Injury State Plan.
2. In March of 2025 the Council voted to shift the BI State Plan from a 2-year plan to a 5-year plan. Keri will be meeting with Liz from PIE in January 2026 to go through revisions and recommendations to shift from a 2-year focus to a 5-year focus. Keri is hoping to bring this back to the Council in March of 2026 to talk about recommendation changes.

**11:40 – 12:00 pm: *Working Lunch***

**12:00 – 12:10 pm - Updates: *ENGAGE and INSPIRE*  
Committee and Contractor Reports (written reports)**

**Public Policy- (verbal report only) – *Tiffany Armstrong***

Tiffany reported not much is changing in the news. A continuing resolution was passed to fund the government through the end of January 30<sup>th</sup>, 2026. There have been a couple of changes within CMS for those that are community providers as far supplies for ostomy and urology and orthotic braces. Tiffany said if anyone wants information, she will send it to them.

Tiffany suggested to have Peggy update the group on a bill for 2026 because it fits within the Public Policy. Emaly agreed to have this item added to the Public Policy verbal report.

Peggy shared some of the work they have been doing on a national level. They are trying to get states to introduce legislation that would extend cognitive rehab for individuals who are participating in an outpatient therapy.

She stated this is not asking Medicaid to expand or provide this but encouraging state statute to have private insurance companies to have unlimited cognitive rehab services.

There are currently about 6 or 7 other states trying to introduce the same piece of legislation.

This has currently gone to bill drafters in Nebraska and Senator Bostar stated he would introduce this.

They have also worked with some of their other lobbyists, groups, and partners to help them get behind it.

At this point in time, it is still in the drafting stages.

Peggy will keep members posted as more information comes out.

***Membership – (no report) – Carla Lasley***

Carla shared there are currently 3 members serving on the Council with whose terms will expire at the end of January. All were contacted to see if they would like to renew their terms for another three years. She informed the Council one of these members will be resigning.

She encouraged all members to invite anyone they know, particularly anyone they know who have lived experience with a brain injury to come to a Council meeting and have them consider applying.

They are looking to fulfil the standard of 50% of the members being people with lived experience.

## **Contractor reports and ACL Workgroup Updates (written reports only) – Keri Bennett**

Keri deferred members to look at reports and let her know if they have any questions.

Keri stated not much has changed with contractors. They are currently in the process of trying to renew their contract with the Department of Health and Human Services for the TBI Registry work, for a period of only 6 months because the current TBI grant cycle will end on July 31, 2026.

## **12:10 – 12:20 pm: ENGAGE and INSPIRE**

### **NASHIA 2025 State of the States Conference – Keri Bennett**

*Keri will report on The National Association of State Head Injury Administrators' (NASHIA) 2025 State of the States in Brain Injury Conference that was held in Portland, Maine, October 27 – 30.*

Keri reminded the Council she sent out of list of presentations that were presented at the NASHIA conference. She asked Nebraska VR's Vocational Rehabilitation Counselor, Amy Hansen to join her for this conference due to her great knowledge and background in the criminal and juvenile justice world.

Keri stated she sat in on most of the behavioral health sessions, and thought the conference was great.

Keri said Peggy's group presented at the conference, and invited Peggy share about her experience.

Peggy shared they have been receiving money from the Sherwood Foundation, and have been focusing on bringing in other people outside the BI Community to the conference. They brought a judge from Lancaster County who works with domestic violence as well as with juvenile justice. They also invited a public defender, a researcher, and someone at Monroe Meyer. They did a panel presentation and shared what they are doing here in Nebraska.

Her big take away from the conference was how much the individuals she invited learned about brain injury. She stated they are walked away from this conference feeling inspired. She stated they are beginning to brainstorm BI into some of the work they are doing, which is exactly what Peggy hoped would happen.

Keri stated overall this was a great conference. There were about 300 people in attendance.

Keri told members If anyone would like slides of PowerPoint presentations at the conference, she could provide it to them.

## **12:20 – 2:00 pm: ENGAGE, INTEGRATE AND INSPIRE**

### **2026 Meeting Dates - Members will vote on proposed 2026 meeting dates of March 13, June 12, September 11, and December 11.**

Keri presented the Council with the proposed meeting dates for 2026. A motion was made by Peggy and seconded by Carla to approve the meeting dates. Motion carried by unanimous consent.

### **Unfinished (Old) Business (if any)**

None.

### **Roundtable Discussion: *All Members***

Peggy shared BI awareness day in Washington DC has been planned for March 11<sup>th</sup>, 2026.

Her organization's conference is March 19<sup>th</sup> and 20<sup>th</sup> in Kearney, NE.

They just finished up a 4-part series in partnership with Johns Hopkins on BI. Quite a few providers were able to attend this event.

All the presentations are available on the UNL Website below:

[Neuropsychiatric Care Webinar Series](#)

Peggy also provided a link for the [Concussion Awareness Now Campaign](#)

Kristen provided a link to the [NE Council on Developmental Disabilities](#) website. She invited the Council members to visit the website to review draft plans, goals, and objectives for 2026-2031. She told members to feel free to provide public comment.

Michelle shared QLI has been working with Madonna and Ambassador to work with Bostar's office. They will be introducing some legislation specific to special needs facility regulations to restore the processes for authorization and continued stay, to the processes that were in place prior to managed care.

### **New Business (if any)**

Keri attended workshop on the Certified Community Behavioral Health Center on the work that is being done here in Nebraska. It's a change in the way the behavioral health centers do business. It also enhances a lot of the services and supports that they can provide for people in communities.

Keri said she has had some good meetings with people from CCBHC and is learning a lot more. She thought it would be good to invite someone from HHS who could speak to the work that's being done for the CCBHC's, one of the providers, or both, to the March meeting. Members expressed interest and agreed to Keri's suggestion.

### **Adjourn –**

A motion was made by Peggy and seconded by Darsha to adjourn the meeting. No objections were made. Motion carried by unanimous consent.

The meeting was adjourned at 12:32.

**Next Meeting Date: *March 13, 2026***