My name is Amanda M. Mitchell. I am a board-certified Advanced Practice Registered Family Nurse Practitioner, a member of the American Nurses Association and North Dakota Nurses Association, and a member of the American Association of Nurse Practitioners.

I want to thank Brandy Pyle, our District 22 ND House Representative for her advocacy efforts and encouragement. It took a lot of courage on my part to be present today, however I knew that despite my disabilities, I needed to be present today. Brandy has gone above and beyond to help bring attention to the inadequacies of ND Century Code Section 32-12.1-03(2) on liability limits for the state and political subdivisions.

I am here today to provide testimony in support of proposed changes to Senate Bill 2129 and want amendments made: retroactive action and increased amounts.

The proposed changes are to amend and reenact subsection 2 of section 32-12.1-03 and subsection 2 of section 32-12.2-02 of the ND Century Code relating to liability limits for the state and political subdivisions.

The proposed increase in liability limits for state and political subdivisions are not adequate, nor do they include retroactive measures or future inflation.

According to Brainline.org, "Each year, traumatic brain injuries (TBI) contribute to a substantial number of deaths and cases of permanent disability." Here are some statistics provided by Brainline.org:

- An estimated 2.8 million people sustain a TBI annually. Of them:
 - o 50,000 die,
 - o 282,000 are hospitalized, and
 - o 2.5 million, nearly 90%, are treated and released from an emergency department.
- Direct medical costs and indirect costs of TBI, such as lost productivity, totaled an estimated \$60 billion in the United States in 2000.

That last statistic is most concerning to me. In the year 2000, direct medical costs and indirect costs of TBI estimated \$60 billion in the U.S.

The Centers for Disease Control and Prevention (CDC) reported that in 2010, the lifetime economic cost of TBI, including direct and indirect medical costs, was estimated to be approximately \$76.5 billion. Even more alarming, the cost of fatal TBIs and TBIs that require hospitalization account for approximately 90% of total TBI medical costs.

I could spend more time going over numbers, but I believe my personal story will provide a better picture.

Personal Testimony

I worked a 12-hour day shift on July 13th, 2020 at McKenzie County Healthcare System Urgent Care as a locum NP in Watford City, ND. I thankfully do not remember that day. I do not remember the day before the accident. Perhaps it's from the accident or it was God's way of protecting me from the ending of that day. I can tell you all that I am in Love with my job and felt So blessed to make it through 5 years of absolute blood, sweat, and tears to serve others.

On July 13th my car was t-boned on the passenger side by a police officer who was responding to an emergency call in Watford City. Due to the injuries I sustained, I was taken to Watford City's ER to be assessed, treated, and intubated by staff I am beyond grateful were present and able to treat me. The CT scan that evening showed a moderate left frontotemporal subarachnoid hemorrhage, a small left frontal subdural hematoma, and a probable tiny right parietal subdural hematoma. I suffered a traumatic brain injury with loss of consciousness of 30 minutes or less. I was diagnosed with diffuse axonal brain injury and cognitive and neurobehavioral dysfunction.

I had a grand-mal seizure for over 2 minutes immediately following the CT scan which required use of intravenous Ativan. Because of the Ativan and seizure, I needed to be intubated to protect my airway. I was then air lifted to Trinity Hospital for ICU care. Four days of ventilator care and steroid treatments later, I was extubated.

I was transferred back to Fargo by ambulance to Sanford Health Rehab on July 24th, 2020. I started various therapies by the next day. It felt beyond weird to be a Patient. This experience has changed me in more ways than one, all for the better.

I was discharged back Home with scheduled outpatient therapies and appointments by August 4th, 2020. I continue with occupational (OT) and speech therapies (ST), to name a few, with Sanford Health to learn how to make use of adaptive strategies and techniques to help me keep on task. My short-term memory is a work in progress, but I refuse to give up. I am blessed beyond measure that I have not lost my long-term memory or my nursing/nurse practitioner knowledge.

I had an MRI with and without intravenous contrast on October 3rd 2020 which showed multiple bilateral regions of bloom artifact consistent with my given history of bilateral prior subarachnoid hemorrhages and multiple hemosiderin deposits. The MRI also showed a small old infarct in the anterior left temporal lobe without signs of an acute infarct. Flair images showed scattered small foci of high signal bilateral white matter unusual for a 35-year-old. Demyelination was not excluded. My health insurance did not cover the cost for this expensive, but necessary diagnostic procedure. I still owe \$605.87 for the MRI. Due to the MRI findings, I am to stay on Keppra twice daily for at minimum the next year for seizure prevention. I will require another MRI in one year. Unfortunately, a side effect of Keppra is slowed brain processing speed.

I have also required 2 tracheal surgeries to maintain my airway on September 3rd, 2020 and November 20th, 2020. The last tracheal surgery cost \$21,000 and required an overnight hospital stay in Minneapolis, Minnesota. I now wear prism lenses due to injuries from the TBI to help with depth perception and proper focusing of my eyes.

Additional Cost Breakdown

- 7.5 hours of mandatory neuropsychological testing--\$1,926
- MRI with and without contrast--\$5,048.95
- One month of OT twice per week--\$7,816
- One month of ST one to two times per week--\$7,575
- Coordinated treatment center--\$356
- Cost of 10 days of inpatient rehab hospitalization at Sanford--\$41,136.65
- Cost of one private room in inpatient rehab per day--\$2,034
- Visual field exam at neurological eye doctor--\$373

To save precious time, I will now fast forward. I have always tried my best to "fix" situations and get things solved. That's part of the reason I became a nurse practitioner. I wanted to be the voice for others in times that seemed impossible. I could now use some of my own warriors as my long-term disability insurance company denied my claim. After 3 bleeds on my brain—a traumatic brain injury that has changed my life.

Until my claim is approved, my family and I are at a huge loss. My husband and I have 4 handsome young boys and bills are expensive. I Need occupational and speech therapies in order to improve. I have no vehicle. I've fought to get this far. The honest truth for me? I'm Exhausted.

No programs exist to help a nurse practitioner who is independently contracted get back on their feet. I get all "no's" for volunteering in medical facilities or job shadowing other NPs which is my next step in therapy. Some explanations I receive are due to COVID while others are "you aren't an employee here". Our family is Scared.

I spent 5 years of my life to become a nurse practitioner. A rug was pulled from underneath me only 2.5 months into my new career. I cannot yet work as a nurse or nurse practitioner. I cannot be cleared to Work.

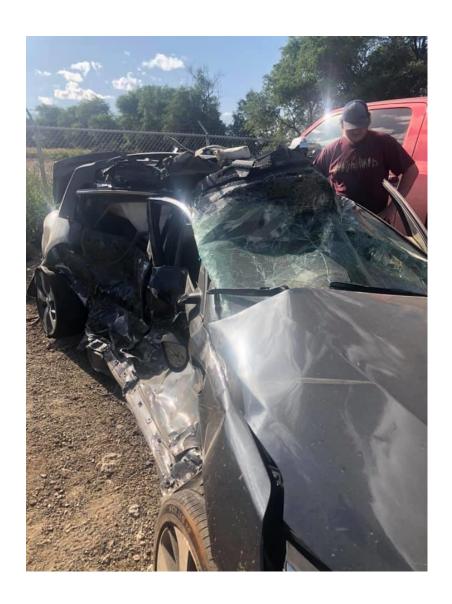
Conclusion

In short conclusion, \$500,000 will not help me to recover from this accident. My medical costs last year following July 13th, 2020 were over \$150,000. My lost wages alone before taxes and benefits are \$130,000 per Year. I pay \$1500 per month for health, dental, vision, life insurance, and long-term disability insurance. I will need outpatient therapies for about the next 2 to 3 years. I may never be able to work as a nurse or nurse practitioner again. More needs to be done to improve the proposals.

Here are Some items I hope to be addressed:

- Individualized financial reimbursement based on income obtained at the time of the incident including lost wages, cost of hospitalization, cost of rehabilitation and therapies, cost of vision therapy and adaptive equipment, cost for counseling and mental health services, cost of health/dental/vision/LTD/Life insurances, and cost (potentially) for legal representation (attorney fees/legal fees). Cost of future cost inflation to also be included.
- Code changes to be retroactive to at minimum my case.
- Above recommended updates to be considered throughout the rehabilitative process (for example, Traumatic Brain Injury (TBI) patients often require 2-3 YEARS of rehabilitation—this includes Myself).
- Option for virtual therapies to be covered by healthcare facilities/health insurance when virtual therapies are deemed to be appropriate by therapy professionals directly caring for the patient.
- Reimbursement for or replacement of lost vehicle of equal cost/value at time of incident (if applicable, as it would be in my case).
- Free transportation services for patients to and from medical appointments who have not yet been released to drive or cannot afford vehicle maintenance and or cost of fuel including patients in rural settings.
- Reimbursement or payment of student loans (Federal and private) if patient is unable to return to former occupation due to sustained injuries (I have worked as a nurse for 12 years and have \$170,000 + in student loan debt to become a nurse practitioner [LPN, RN, BSN, MSN, FNP-BC]). Reimbursement or payment of student loan interest while loans are on temporary deferment (if applicable) and/or forbearance. Reimbursement and payments are to not be taxed.
- Legal assistance for self-employed/1099 independently contracted workers including filing of paperwork for assistance programs (in conjunction with an APPOINTED social worker).
- Implementation/creation of return-to-work programs for nurse practitioners/healthcare providers (including those who are independently contracted/1099) that are supported by healthcare networks for rehabilitative purposes.

Thank you for the opportunity to speak with you today.



My brand new 2020 Kia Optima. Pictured next to my car is my little brother who is 6'5" tall.



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