

Union Calendar No. 331

104TH CONGRESS
2^D SESSION

H. R. 248

[Report No. 104-652]

A BILL

To amend the Public Health Service Act to provide for the conduct of expanded studies and the establishment of innovative programs with respect to traumatic brain injury, and for other purposes.

JUNE 27, 1996

Reported with an amendment, committed to the Committee of the Whole House on the State of the Union, and ordered to be printed

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IN THE HOUSE OF REPRESENTATIVES

JANUARY 4, 1995

Mr. GREENWOOD (for himself and Mr. PALLONE) introduced the following bill;
which was referred to the Committee on Commerce

JUNE 27, 1996

Additional sponsors: Ms. LOFGREN, Mr. GEJDENSON, Mr. EHLERS, Mr. HUTCHINSON, Mr. SERRANO, Mr. LEWIS of Georgia, Mr. QUILLEN, Mr. DAVIS, Mr. SMITH of New Jersey, Mr. FOLEY, Mr. MINETA, Mr. STUDDS, Mr. WATTS of Oklahoma, Mr. BEILENSEN, Mr. FRAZER, Mr. ENGLISH of Pennsylvania, Mr. BOUCHER, Mr. BALDACCI, Mr. LIPINSKI, Mr. WAXMAN, Mr. ACKERMAN, Mrs. MORELLA, Mr. HAMILTON, Mr. STARK, Mr. STEARNS, Mr. LEACH, Mr. MORAN, Ms. NORTON, Ms. ESHOO, Mr. GUTIERREZ, Mr. UPTON, Mr. THORNBERRY, Mr. FRANK of Massachusetts, and Mr. HOBSON

JUNE 27, 1996

Reported with an amendment, committed to the Committee of the Whole
House on the State of the Union, and ordered to be printed

[Strike out all after the enacting clause and insert the part printed in *italic*]

[For text of introduced bill, see copy of bill as introduced on January 4, 1995]

A BILL

To amend the Public Health Service Act to provide for the conduct of expanded studies and the establishment of innovative programs with respect to traumatic brain injury, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. PROGRAMS OF CENTERS FOR DISEASE CON-**
4 **TROL AND PREVENTION.**

5 *Part J of title III of the Public Health Service Act*
6 *(42 U.S.C. 280b et seq.) is amended by inserting after sec-*
7 *tion 393 the following section:*

8 “PREVENTION OF TRAUMATIC BRAIN INJURY

9 “SEC. 393A. (a) *IN GENERAL.*—*The Secretary, acting*
10 *through the Director of the Centers for Disease Control and*
11 *Prevention, may carry out projects to reduce the incidence*
12 *of traumatic brain injury. Such projects may be carried*
13 *out by the Secretary directly or through awards of grants*
14 *or contracts to public or nonprofit private entities. The Sec-*
15 *retary may directly or through such awards provide tech-*
16 *nical assistance with respect to the planning, development,*
17 *and operation of such projects.*

18 “(b) *CERTAIN ACTIVITIES.*—*Activities under sub-*
19 *section (a) may include—*

1 “(1) the conduct of research into identifying ef-
2 fective strategies for the prevention of traumatic brain
3 injury; and

4 “(2) the implementation of public information
5 and education programs for the prevention of such in-
6 jury and for broadening the awareness of the public
7 concerning the public health consequences of such in-
8 jury.

9 “(c) *COORDINATION OF ACTIVITIES.*—The Secretary
10 shall ensure that activities under this section are coordi-
11 nated as appropriate with other agencies of the Public
12 Health Service that carry out activities regarding trau-
13 matic brain injury.

14 “(d) *DEFINITION.*—For purposes of this section, the
15 term ‘traumatic brain injury’ means an acquired injury
16 to the brain. Such term does not include brain dysfunction
17 caused by congenital or degenerative disorders, nor birth
18 trauma, but may include brain injuries caused by anoxia
19 due to near drowning. The Secretary may revise the defini-
20 tion of such term as the Secretary determines necessary.”.

21 **SEC. 2. PROGRAMS OF NATIONAL INSTITUTES OF HEALTH.**

22 Section 1261 of the Public Health Service Act (42
23 U.S.C. 300d–61) is amended—

24 (1) in subsection (d)—

1 (A) in paragraph (2), by striking “and”
2 after the semicolon at the end;

3 (B) in paragraph (3), by striking the period
4 and inserting “; and”; and

5 (C) by adding at the end the following
6 paragraph:

7 “(4) the authority to make awards of grants or
8 contracts to public or nonprofit private entities for
9 the conduct of basic and applied research regarding
10 traumatic brain injury, which research may in-
11 clude—

12 “(A) the development of new methods and
13 modalities for the more effective diagnosis, meas-
14 urement of degree of injury, post-injury monitor-
15 ing and prognostic assessment of head injury for
16 acute, subacute and later phases of care;

17 “(B) the development, modification and
18 evaluation of therapies that retard, prevent or
19 reverse brain damage after acute head injury,
20 that arrest further deterioration following injury
21 and that provide the restitution of function for
22 individuals with long-term injuries;

23 “(C) the development of research on a con-
24 tinuum of care from acute care through rehabili-
25 tation, designed, to the extent practicable, to in-

1 *istration, may make grants to States for the purpose of car-*
2 *rying out demonstration projects to improve access to health*
3 *and other services regarding traumatic brain injury.*

4 “(b) *STATE ADVISORY BOARD.*—

5 “(1) *IN GENERAL.*—*The Secretary may make a*
6 *grant under subsection (a) only if the State involved*
7 *agrees to establish an advisory board within the ap-*
8 *propriate health department of the State or within*
9 *another department as designated by the chief execu-*
10 *tive officer of the State.*

11 “(2) *FUNCTIONS.*—*An advisory board established*
12 *under paragraph (1) shall advise and make rec-*
13 *ommendations to the State on ways to improve serv-*
14 *ices coordination regarding traumatic brain injury.*
15 *Such advisory boards shall encourage citizen partici-*
16 *pation through the establishment of public hearings*
17 *and other types of community outreach programs. In*
18 *developing recommendations under this paragraph,*
19 *such boards shall consult with Federal, State, and*
20 *local governmental agencies and with citizens groups*
21 *and other private entities.*

22 “(3) *COMPOSITION.*—*An advisory board estab-*
23 *lished under paragraph (1) shall be composed of—*

24 “(A) *representatives of—*

1 “(i) the corresponding State agencies
2 involved;

3 “(ii) public and nonprofit private
4 health related organizations;

5 “(iii) other disability advisory or
6 planning groups within the State;

7 “(iv) members of an organization or
8 foundation representing traumatic brain in-
9 jury survivors in that State; and

10 “(v) injury control programs at the
11 State or local level if such programs exist;
12 and

13 “(B) a substantial number of individuals
14 who are survivors of traumatic brain injury, or
15 the family members of such individuals.

16 “(c) *MATCHING FUNDS.*—

17 “(1) *IN GENERAL.*—With respect to the costs to
18 be incurred by a State in carrying out the purpose
19 described in subsection (a), the Secretary may make
20 a grant under such subsection only if the State agrees
21 to make available, in cash, non-Federal contributions
22 toward such costs in an amount that is not less than
23 \$1 for each \$2 of Federal funds provided under the
24 grant.

1 “(2) *DETERMINATION OF AMOUNT CONTRIB-*
2 *UTED.—In determining the amount of non-Federal*
3 *contributions in cash that a State has provided pur-*
4 *suant to paragraph (1), the Secretary may not in-*
5 *clude any amounts provided to the State by the Fed-*
6 *eral Government.*

7 “(d) *APPLICATION FOR GRANT.—The Secretary may*
8 *make a grant under subsection (a) only if an application*
9 *for the grant is submitted to the Secretary and the applica-*
10 *tion is in such form, is made in such manner, and contains*
11 *such agreements, assurances, and information as the Sec-*
12 *retary determines to be necessary to carry out this section.*

13 “(e) *COORDINATION OF ACTIVITIES.—The Secretary*
14 *shall ensure that activities under this section are coordi-*
15 *nated as appropriate with other agencies of the Public*
16 *Health Service that carry out activities regarding trau-*
17 *matic brain injury.*

18 “(f) *REPORT.—Not later than 2 years after the date*
19 *of the enactment of this section, the Secretary shall submit*
20 *to the Committee on Commerce of the House of Representa-*
21 *tives, and to the Committee on Labor and Human Re-*
22 *sources of the Senate, a report describing the findings and*
23 *results of the programs established under this section, in-*
24 *cluding measures of outcomes and consumer and surrogate*
25 *satisfaction.*

1 “(g) *DEFINITION.*—For purposes of this section, the
2 term ‘traumatic brain injury’ means an acquired injury
3 to the brain. Such term does not include brain dysfunction
4 caused by congenital or degenerative disorders, nor birth
5 trauma, but may include brain injuries caused by anoxia
6 due to near drowning. The Secretary may revise the defini-
7 tion of such term as the Secretary determines necessary.

8 “(h) *AUTHORIZATION OF APPROPRIATIONS.*—For the
9 purpose of carrying out this section, there is authorized to
10 be appropriated \$5,000,000 for each of the fiscal years 1997
11 through 1999.”.

12 **SEC. 4. STUDY; CONSENSUS CONFERENCE.**

13 (a) *STUDY.*—

14 (1) *IN GENERAL.*—The Secretary of Health and
15 Human Services (in this section referred to as the
16 “Secretary”), acting through the appropriate agencies
17 of the Public Health Service, shall conduct a study for
18 the purpose of carrying out the following with respect
19 to traumatic brain injury:

20 (A) *In collaboration with appropriate State*
21 *and local health-related agencies—*

22 (i) *determine the incidence and preva-*
23 *lence of traumatic brain injury; and*

24 (ii) *develop a uniform reporting sys-*
25 *tem under which States report incidents of*

1 *traumatic brain injury, if the Secretary de-*
2 *termines that such a system is appropriate.*

3 *(B) Identify common therapeutic interven-*
4 *tions which are used for the rehabilitation of in-*
5 *dividuals with such injuries, and shall, subject to*
6 *the availability of information, include an anal-*
7 *ysis of—*

8 *(i) the effectiveness of each such inter-*
9 *vention in improving the functioning of in-*
10 *dividuals with brain injuries;*

11 *(ii) the comparative effectiveness of*
12 *interventions employed in the course of re-*
13 *habilitation of individuals with brain inju-*
14 *ries to achieve the same or similar clinical*
15 *outcome; and*

16 *(iii) the adequacy of existing measures*
17 *of outcomes and knowledge of factors influ-*
18 *encing differential outcomes.*

19 *(C) Develop practice guidelines for the reha-*
20 *ilitation of traumatic brain injury at such time*
21 *as appropriate scientific research becomes avail-*
22 *able.*

23 *(2) DATES CERTAIN FOR REPORTS.—*

24 *(A) Not later than 18 months after the date*
25 *of the enactment of this Act, the Secretary shall*

1 *submit to the Committee on Commerce of the*
2 *House of Representatives, and to the Committee*
3 *on Labor and Human Resources of the Senate,*
4 *a report describing the findings made as a result*
5 *of carrying out paragraph (1)(A).*

6 *(B) Not later than 3 years after the date of*
7 *the enactment of this Act, the Secretary shall*
8 *submit to the Committees specified in subpara-*
9 *graph (A) a report describing the findings made*
10 *as a result of carrying out subparagraphs (B)*
11 *and (C) of paragraph (1).*

12 *(b) CONSENSUS CONFERENCE.—The Secretary, acting*
13 *through the Director of the National Center for Medical Re-*
14 *habilitation Research within the National Institute for*
15 *Child Health and Human Development, shall conduct a na-*
16 *tional consensus conference on managing traumatic brain*
17 *injury and related rehabilitation concerns.*

18 *(c) DEFINITION.—For purposes of this section, the*
19 *term “traumatic brain injury” means an acquired injury*
20 *to the brain. Such term does not include brain dysfunction*
21 *caused by congenital or degenerative disorders, nor birth*
22 *trauma, but may include brain injuries caused by anoxia*
23 *due to near drowning. The Secretary may revise the defini-*
24 *tion of such term as the Secretary determines necessary.*

1 (d) *AUTHORIZATIONS OF APPROPRIATIONS.*—For the
 2 purpose of carrying out subsection (a)(1)(A), there is au-
 3 thorized to be appropriated \$3,000,000 for each of the fiscal
 4 years 1997 through 1999. For the purpose of carrying out
 5 the other provisions of this section, there is authorized to
 6 be appropriated an aggregate \$500,000 for the fiscal years
 7 1997 through 1999. Amounts appropriated for such other
 8 provisions remain available until expended.

9 **SEC. 5. TECHNICAL AMENDMENTS.**

10 Title XXVI of the Public Health Service Act (42 U.S.C.
 11 300ff–11 et seq.), as amended by Public Law 104–146 (the
 12 Ryan White CARE Act Amendments of 1996), is amend-
 13 ed—

14 (1) in section 2626—

15 (A) in subsection (d), in the first sentence,
 16 by striking “(1) through (5)” and inserting “(1)
 17 through (4)”;

18 (B) in subsection (f), in the matter preced-
 19 ing paragraph (1), by striking “(1) through (5)”
 20 and inserting “(1) through (4)”;

21 (2) in section 2692—

22 (A) in subsection (a)(1)(A)—

23 (i) by striking “title XXVI programs”
 24 and inserting “programs under this title”;
 25 and

1 *(ii) by striking “infection and”; and*
2 *(B) by striking subsection (c) and all that*
3 *follows and inserting the following:*

4 “*(c) AUTHORIZATION OF APPROPRIATIONS.—*

5 “*(1) SCHOOLS; CENTERS.—For the purpose of*
6 *grants under subsection (a), there are authorized to be*
7 *appropriated such sums as may be necessary for each*
8 *of the fiscal years 1996 through 2000.*

9 “*(2) DENTAL SCHOOLS.—For the purpose of*
10 *grants under subsection (b), there are authorized to be*
11 *appropriated such sums as may be necessary for each*
12 *of the fiscal years 1996 through 2000.”.*