

119TH CONGRESS
2D SESSION

H. R. 9058

To amend the Public Health Service Act to establish a grant program to promote access to automated external defibrillators and cardiopulmonary resuscitation in eligible federally assisted multifamily housing, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MAY 29, 2026

Mr. GOLDMAN of New York (for himself, Mr. TONKO, Mr. KENNEDY of New York, and Ms. NORTON) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to establish a grant program to promote access to automated external defibrillators and cardiopulmonary resuscitation in eligible federally assisted multifamily housing, 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. SHORT TITLE.**

4 This Act may be cited as the “Residential AED and
5 CPR Preparedness Act of 2026”.

1 **SEC. 2. PROMOTING ACCESS TO AEDS AND CPR IN ELIGI-**
2 **BLE FEDERALLY ASSISTED MULTIFAMILY**
3 **HOUSING.**

4 The Public Health Service Act (42 U.S.C. 201 et
5 seq.) is amended by inserting after section 312D (42
6 U.S.C. 244d) the following:

7 **“SEC. 312E. PROMOTING ACCESS TO AEDS AND CPR IN ELI-**
8 **GIBLE FEDERALLY ASSISTED MULTIFAMILY**
9 **HOUSING.**

10 “(a) IN GENERAL.—The Secretary may award grants
11 to eligible entities to develop and implement a comprehen-
12 sive program to promote resident access to automated ex-
13 ternal defibrillators (in this section referred to as ‘AEDs’)
14 and cardiopulmonary resuscitation (in this section referred
15 to as ‘CPR’) in eligible federally assisted multifamily hous-
16 ing.

17 “(b) USE OF FUNDS.—An eligible entity receiving a
18 grant under subsection (a) may use funds received
19 through such grant to carry out any of the following activi-
20 ties:

21 “(1) Developing and providing comprehensive
22 materials to establish AED and CPR programs in
23 eligible federally assisted multifamily housing.

24 “(2) Providing support for AED and CPR
25 training programs for residents, building manage-

1 ment staff, maintenance personnel, and other appro-
2 priate individuals.

3 “(3) Developing a cardiac emergency response
4 plan for each participating building or residential
5 complex.

6 “(4) Purchasing AEDs that have been approved
7 under section 515 of the Federal Food, Drug, and
8 Cosmetic Act, cleared under section 510(k) of such
9 Act, or classified under section 513(f)(2) of such
10 Act.

11 “(5) Purchasing necessary AED batteries and
12 performing necessary AED maintenance (such as re-
13 placing AED pads) in accordance with the labeling
14 of the AED involved.

15 “(6) Replacing outdated AED and CPR equip-
16 ment, supplies, and educational materials.

17 “(c) ELIGIBILITY.—To be eligible for a grant under
18 subsection (a), an entity shall be—

19 “(1) an owner or operator of eligible federally
20 assisted multifamily housing; and

21 “(2) in partnership with a qualified health care
22 entity.

23 “(d) APPLICATION.—To be eligible for a grant under
24 subsection (a), an eligible entity shall submit to the Sec-
25 retary an application at such time, in such manner, and

1 containing such information as the Secretary may reason-
2 ably require.

3 “(e) CONSULTATION.—In carrying out the program
4 under subsection (a), the Secretary shall consult with—

5 “(1) the Secretary of Housing and Urban De-
6 velopment;

7 “(2) the heads of relevant agencies within the
8 Department of Health and Human Services;

9 “(3) national organizations representing emer-
10 gency medical services;

11 “(4) public health and medical professional as-
12 sociations;

13 “(5) national organizations focused on cardio-
14 vascular health and AED and CPR training;

15 “(6) State, Tribal, and local public health and
16 housing agencies; and

17 “(7) other stakeholders determined appropriate
18 by the Secretary.

19 “(f) REPORT.—Not later than 2 years after the date
20 on which the first grant is awarded under subsection (a),
21 the Secretary shall submit to the appropriate committees
22 of Congress a report describing the implementation of the
23 grant program, which shall include—

24 “(1) a list of eligible entities that have received
25 a grant under subsection (a); and

1 “(2) the actions taken by each such eligible en-
2 tity to improve AED and CPR readiness in eligible
3 federally assisted multifamily housing.

4 “(g) DEFINITIONS.—In this section:

5 “(1) APPROPRIATE COMMITTEES OF CON-
6 GRESS.—The term ‘appropriate committees of Con-
7 gress’ means—

8 “(A) the Committee on Energy and Com-
9 merce of the House of Representatives;

10 “(B) the Committee on Financial Services
11 of the House of Representatives;

12 “(C) the Committee on Banking, Housing,
13 and Urban Affairs of the Senate; and

14 “(D) the Committee on Health, Education,
15 Labor, and Pensions of the Senate.

16 “(2) ELIGIBLE FEDERALLY ASSISTED MULTI-
17 FAMILY HOUSING.—The term ‘eligible federally as-
18 sisted multifamily housing’ means residential hous-
19 ing accommodations—

20 “(A) that consist of not less than 5 hous-
21 ing units on 1 site; and

22 “(B) for which assistance is provided
23 under the program—

24 “(i) for supportive housing for persons
25 with disabilities under section 811 of the

1 Cranston-Gonzalez National Affordable
2 Housing Act (42 U.S.C. 8013);

3 “(ii) for supportive housing for the el-
4 derly under section 202 of the Housing Act
5 of 1959 (12 U.S.C. 1701q);

6 “(iii) for project-based assistance
7 under section 8 of the United States Hous-
8 ing Act of 1937 (42 U.S.C. 1437f);

9 “(iv) for public housing under section
10 9 of the United States Housing Act of
11 1937 (42 U.S.C. 1437g); or

12 “(v) described under the heading
13 ‘Rental Demonstration Program’ in title II
14 of the Transportation, Housing and Urban
15 Development, and Related Agencies Appro-
16 priations Act, 2012 (division C of Public
17 Law 112–55; 125 Stat. 673).

18 “(3) QUALIFIED HEALTH CARE ENTITY.—The
19 term ‘qualified health care entity’ means a health
20 care entity that—

21 “(A) is—

22 “(i) a public entity; or

23 “(ii) an organization described in sec-
24 tion 501(c) of the Internal Revenue Code

1 of 1986 and exempt from taxation under
2 section 501(a) of such Code;

3 “(B) demonstrates an ability to develop,
4 train, and implement a comprehensive program
5 to promote community access to defibrillation
6 and CPR; and

7 “(C) is qualified in providing technical as-
8 sistance in AED and CPR training.

9 “(h) AUTHORIZATION OF APPROPRIATIONS.—There
10 is authorized to be appropriated to the Secretary to carry
11 out the program under subsection (a) \$25,000,000 for
12 each of fiscal years 2027 through 2031, to remain avail-
13 able until expended.”.

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