

BOLD INFRASTRUCTURE FOR ALZHEIMER'S
 REAUTHORIZATION ACT OF 2024

MAY 21, 2024.—Committed to the Committee of the Whole House on the State of
 the Union and ordered to be printed

Mrs. RODGERS of Washington, from the Committee on Energy and
 Commerce, submitted the following

R E P O R T

[To accompany H.R. 7218]

The Committee on Energy and Commerce, to whom was referred the bill (H.R. 7218) to amend title III of the Public Health Service Act to extend the program for promotion of public health knowledge and awareness of Alzheimer's disease and related dementias, and for other purposes, having considered the same, reports favorably thereon without amendment and recommends that the bill do pass.

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PURPOSE AND SUMMARY

H.R. 7218 reauthorizes programs to support states, local public health departments, and other entities that educate and support early detection and diagnosis, support patients and caregivers needs, and promote public health knowledge and awareness of Alzheimer’s disease and related dementias, among other activities, for fiscal years 2025 through 2029.

BACKGROUND AND NEED FOR LEGISLATION

The “BOLD (Building Our Largest Dementia) Infrastructure for Alzheimer’s Act” utilizes population-level approaches to prevent Alzheimer’s and related dementias and improve outcomes by promoting cognitive health. The law provides funding to support public health strategies that promote brain health, address dementia, and support individuals living with Alzheimer’s and related dementia and their caregivers. An estimated 6.7 million Americans aged 65 and older are living with Alzheimer’s in 2023. By 2050, this number is projected to rise to 12.7 million. About 1 in 9 people aged 65 and older (10.7 percent) have Alzheimer’s, and 1 in 3 seniors dies with Alzheimer’s or another dementia.¹

COMMITTEE ACTION

On February 14, 2024, the Subcommittee on Health held a hearing on H.R. 7218. The title of the hearing was “Legislative Proposals to Support Patients and Caregivers.” The Subcommittee received testimony from:

- Andy Shih, PhD, Chief Science Officer, Autism Speaks;
- Corey Feist, JD, MBA, Co-Founder and CEO, Dr. Lorna Breen Heroes’ Foundation;
- Joanne Pike, DrPH, President and CEO, Alzheimer’s Association;
- Gordon Tomaselli, MD, Former President, American Heart Association; Marilyn and Stanley M. Katz Dean, Emeritus and Professor of Medicine, Albert Einstein College of Medicine; Adjunct Professor of Medicine, Johns Hopkins University School of Medicine;
- Michelle Whitten, President, CEO, and Co-Founder, Global Down Syndrome Foundation;
- Randy Strozyk, President, American Ambulance Association; and
- Christina Annunziata, MD, PhD, Senior Vice President of Extramural Discovery Science, American Cancer Society.

On March 12, 2024, the Subcommittee on Health met in open markup session and forwarded H.R. 7218, without amendment, to the full Committee by a record vote of 25 yeas and 0 nays.

On March 20, 2024, the full Committee on Energy and Commerce met in open markup session and ordered H.R. 7218, without amendment, favorably reported to the House by a record vote of 44 yeas and 0 nays.

¹Alzheimer’s Association, “Alzheimer’s Disease Facts and Figures”, 2024. <https://www.alz.org/alzheimers-dementia/facts-figures>.

COMMITTEE VOTES

Clause 3(b) of rule XIII requires the Committee to list the record votes on the motion to report legislation and amendments thereto. The following reflects the record votes taken during the Committee consideration:

**COMMITTEE ON ENERGY AND COMMERCE
118TH CONGRESS
ROLL CALL VOTE # 7**

BILL: H.R. 7218, BOLD Infrastructure for Alzheimer's Act of 2024

AMENDMENT: A motion by Chair Rodgers to order H.R. 7218 favorably reported to the House, without amendment (Final Passage)

DISPOSITION: AGREED TO, by a roll call vote of 44 yeas to 0 nays.

REPRESENTATIVE	YEAS	NAYS	PRESENT	REPRESENTATIVE	YEAS	NAYS	PRESENT
Rep. Rodgers	X			Rep. Pallone	X		
Rep. Burgess	X			Rep. Eshoo	X		
Rep. Latta	X			Rep. DeGette	X		
Rep. Guthrie	X			Rep. Schakowsky	X		
Rep. Griffith	X			Rep. Matsui	X		
Rep. Bilirakis	X			Rep. Castor	X		
Rep. Bucshon	X			Rep. Sarbanes	X		
Rep. Hudson				Rep. Tonko	X		
Rep. Walberg	X			Rep. Clarke	X		
Rep. Carter	X			Rep. Cárdenas	X		
Rep. Duncan	X			Rep. Ruiz	X		
Rep. Palmer	X			Rep. Peters	X		
Rep. Dunn	X			Rep. Dingell	X		
Rep. Curtis				Rep. Veasey	X		
Rep. Lesko	X			Rep. Kuster			
Rep. Pence	X			Rep. Kelly			
Rep. Crenshaw	X			Rep. Barragán	X		
Rep. Joyce	X			Rep. Blunt Rochester			
Rep. Armstrong	X			Rep. Soto	X		
Rep. Weber				Rep. Craig	X		
Rep. Allen	X			Rep. Schrier	X		
Rep. Balderson	X			Rep. Trahan	X		
Rep. Fulcher	X			Rep. Fletcher	X		
Rep. Pfluger	X						
Rep. Harshbarger	X						
Rep. Miller-Meeks							
Rep. Cammack	X						
Rep. Obernolte	X						

03/20/2024

OVERSIGHT FINDINGS AND RECOMMENDATIONS

Pursuant to clause 2(b)(1) of rule X and clause 3(c)(1) of rule XIII, the Committee held a hearing and made findings that are reflected in this report.

NEW BUDGET AUTHORITY, ENTITLEMENT AUTHORITY, AND TAX EXPENDITURES

Pursuant to clause 3(c)(2) of rule XIII, the Committee finds that H.R. 7218 would result in no new or increased budget authority, entitlement authority, or tax expenditures or revenues.

CONGRESSIONAL BUDGET OFFICE ESTIMATE

Pursuant to clause 3(c)(3) of rule XIII, at the time this report was filed, the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974 was not available.

FEDERAL MANDATES STATEMENT

The Committee adopts as its own the estimate of Federal mandates prepared by the Director of the Congressional Budget Office pursuant to section 423 of the Unfunded Mandates Reform Act.

STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

Pursuant to clause 3(c)(4) of rule XIII, the general performance goal or objective of this legislation is to promote public health knowledge and awareness of Alzheimer’s disease and related dementias.

DUPLICATION OF FEDERAL PROGRAMS

Pursuant to clause 3(c)(5) of rule XIII, no provision of H.R. 7218 is known to be duplicative of another Federal program, including any program that was included in a report to Congress pursuant to section 21 of Public Law 111–139 or the most recent Catalog of Federal Domestic Assistance.

RELATED COMMITTEE AND SUBCOMMITTEE HEARINGS

Pursuant to clause 3(c)(6) of rule XIII, the following related hearing was used to develop or consider H.R. 7218:

- On February 14, 2024, the Subcommittee on Health held a hearing on H.R. 7218. The title of the hearing was “Legislative Proposals to Support Patients and Caregivers.” The Subcommittee received testimony from:
 - Andy Shih, PhD, Chief Science Officer, Autism Speaks;
 - Corey Feist, JD, MBA, Co-Founder and CEO, Dr. Lorna Breen Heroes’ Foundation;
 - Joanne Pike, DrPH, President and CEO, Alzheimer’s Association;
 - Gordon Tomaselli, MD, Former President, American Heart Association; Marilyn and Stanley M. Katz Dean, Emeritus and Professor of Medicine, Albert Einstein Col-

lege of Medicine; Adjunct Professor of Medicine, Johns Hopkins University School of Medicine;

- Michelle Whitten, President, CEO, and Co-Founder, Global Down Syndrome Foundation; o Randy Stroyk, President, American Ambulance Association; and
- Christina Annunziata, MD, PhD, Senior Vice President of Extramural Discovery Science, American Cancer Society.

COMMITTEE COST ESTIMATE

Pursuant to clause 3(d)(1) of rule XIII, the Committee adopts as its own the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974. At the time this report was filed, the estimate was not available.

EARMARK, LIMITED TAX BENEFITS, AND LIMITED TARIFF BENEFITS

Pursuant to clause 9(e), 9(f), and 9(g) of rule XXI, the Committee finds that H.R. 7218 contains no earmarks, limited tax benefits, or limited tariff benefits.

ADVISORY COMMITTEE STATEMENT

No advisory committees within the meaning of section 5(b) of the Federal Advisory Committee Act were created by this legislation.

APPLICABILITY TO LEGISLATIVE BRANCH

The Committee finds that the legislation does not relate to the terms and conditions of employment or access to public services or accommodations within the meaning of section 102(b)(3) of the Congressional Accountability Act.

SECTION-BY-SECTION ANALYSIS OF THE LEGISLATION

Section 1. Short title

Section 1 provides that the Act may be cited as the “BOLD Infrastructure for Alzheimer’s Reauthorization Act of 2024.”

Section 2. Extension of program for promotion of public health knowledge and awareness of Alzheimer’s disease and related dementias

Section 2 reauthorizes the “BOLD Infrastructure Act” for five years from fiscal year 2025 through fiscal year 2029.

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (new matter is printed in italics and existing law in which no change is proposed is shown in roman):

PUBLIC HEALTH SERVICE ACT

* * * * *

TITLE III—GENERAL POWERS AND DUTIES OF PUBLIC HEALTH SERVICE

* * * * *

PART K—HEALTH CARE SERVICES IN THE HOME AND PUBLIC HEALTH PROGRAMS FOR DEMENTIA

* * * * *

Subpart II—Programs With Respect to Alzheimer’s Disease and Related Dementias

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SEC. 398B. GENERAL PROVISIONS.

(a) LIMITATION ON ADMINISTRATIVE EXPENSES.—The Secretary may not make a grant or cooperative agreement under sections 398 or 398A to an entity unless the entity agrees that not more than 5 percent of the grant or cooperative agreement will be expended for administrative expenses with respect to the grant or cooperative agreement.

(b) REQUIREMENT OF APPLICATION.—The Secretary may not make a grant under sections 398 or 398A to an entity unless the entity has submitted to the Secretary an application for the grant. The application shall—

- (1) contain the description of intended expenditures;
- (2) with respect to carrying out the purpose for which the grant is to be made, provide assurances of compliance satisfactory to the Secretary; and
- (3) otherwise be in such form, be made in such manner, and contain such information and agreements as the Secretary determines to be necessary to carry out this subpart.

(c) EVALUATIONS AND REPORT BY SECRETARY.—The Secretary shall—

- (1) provide for an evaluation of the activities for which an award is made under sections 398 or 398A; and
- (2) not later than 1 year after the completion of such evaluations, submit to the Congress a report describing the findings made as a result of the evaluations.

(d) DEFINITION.—In this subpart, the terms “Indian tribe” and “tribal organization” have the meanings given such terms in section 4 of the Indian Health Care Improvement Act.

(e) AUTHORIZATIONS OF APPROPRIATIONS.—For the purpose of carrying out this subpart, there are authorized to be appropriated \$20,000,000 for each of fiscal years 2020 through 2024 and \$33,000,000 for each of fiscal years 2025 through 2029.

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