

114TH CONGRESS
1ST SESSION

H. R. 1631

To improve, coordinate, and enhance rehabilitation research at the National
Institutes of Health.

IN THE HOUSE OF REPRESENTATIVES

MARCH 25, 2015

Mr. LANGEVIN (for himself and Mr. HARPER) introduced the following bill;
which was referred to the Committee on Energy and Commerce

A BILL

To improve, coordinate, and enhance rehabilitation research
at the National Institutes of Health.

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 “Enhancing the Stature
5 and Visibility of Medical Rehabilitation Research at NIH
6 Act”.

7 **SEC. 2. IMPROVING MEDICAL REHABILITATION RESEARCH**

8 **AT THE NATIONAL INSTITUTES OF HEALTH.**

9 Section 452 of the Public Health Service Act (42
10 U.S.C. 285g-4) is amended—

1 (1) in subsection (b), by striking “conduct and
2 support” and inserting “conduct, support, and co-
3 ordination”;

4 (2) in subsection (c)(1)(C), by striking “of the
5 Center” and inserting “within the Center”;

6 (3) in subsection (d)—

7 (A) by striking paragraph (1) and insert-
8 ing the following: “(1) The Director of the Cen-
9 ter, on behalf of the Director of NIH and the
10 Director of the Institute and in consultation
11 with the coordinating committee established
12 under subsection (e) and the advisory board es-
13 tablished under subsection (f), shall develop a
14 comprehensive plan (referred to in this section
15 as the ‘Research Plan’) for the conduct, sup-
16 port, and coordination of medical rehabilitation
17 research.”;

18 (B) in paragraph (2)—

19 (i) in subparagraph (A), by striking
20 “and priorities for such research; and” and
21 inserting “priorities for such research, and
22 existing resources to support the purpose
23 described in subsection (b);”;

24 (ii) in subparagraph (B), by striking
25 the period and inserting “; and”; and

1 (iii) by adding at the end the fol-
2 lowing:

3 “(C) include objectives, benchmarks, and
4 guiding principles for conducting, supporting,
5 and coordinating medical rehabilitation re-
6 search, consistent with the purpose described in
7 subsection (b).”;

8 (C) in paragraph (4)—

9 (i) by striking the first sentence and
10 inserting the following: “The Director of
11 the Center, in consultation with the Direc-
12 tor of the Institute, the coordinating com-
13 mittee established under subsection (e),
14 and the advisory board established under
15 subsection (f), shall periodically, or not less
16 than every 5 years, revise and update the
17 Research Plan, as appropriate. Not later
18 than 30 days after the Research Plan is so
19 revised and updated, the Director of the
20 Center shall transmit the revised and up-
21 dated Research Plan to the President and
22 the appropriate committees of Congress.”;
23 and

24 (D) by adding at the end the following:

1 “(5) The Director of the Center, in consultation with
2 the Director of the Institute, shall annually prepare a re-
3 port for the coordinating committee established under sub-
4 section (e) and the advisory board established under sub-
5 section (f) that describes and analyzes the progress during
6 the preceding fiscal year in achieving the objectives,
7 benchmarks, and guiding principles described in para-
8 graph (2)(C) and includes expenditures of the Center and
9 other agencies of the National Institutes of Health for car-
10 rying out the Research Plan. The report shall include rec-
11 ommendations for revising and updating the Research
12 Plan, and such initiatives as the Director of the Center
13 and the Director of the Institute determine appropriate.
14 In preparing the report, the Director of the Center and
15 the Director of the Institute shall consult with the Direc-
16 tor of NIH, and the report shall reflect an assessment of
17 the Research Plan by the Director of NIH.”;

18 (4) in subsection (e)—

19 (A) in paragraph (2), by inserting “peri-
20 odically, or not less than every 5 years, host a
21 scientific conference or workshop on medical re-
22 habilitation research and” after “The Coordi-
23 nating Committee shall”;

24 (B) in paragraph (3), by inserting “the Di-
25 rector of the Division of Program Coordination,

1 Planning, and Strategic Initiatives within the
2 Office of the Director of NIH,” after “shall be
3 composed of”; and

4 (C) in paragraph (4), by striking “Director
5 of the Center” and inserting “Director of the
6 Center, acting in the capacity of a designee of
7 the Director of NIH”;

8 (5) in subsection (f)(3)(B), by adding at the
9 end the following:

10 “(xii) The Director of the Division of
11 Program Coordination, Planning, and
12 Strategic Initiatives.”; and

13 (6) by adding at the end the following:

14 “(g) The Director of the Center, in consultation with
15 the Director of the Institute, the Coordinating Committee,
16 and the Advisory Board, shall develop guidelines gov-
17 erning the funding for medical rehabilitation research by
18 the Center and other agencies of the National Institutes
19 of Health. At a minimum, such guidelines shall reflect the
20 purpose of the Center described in subsection (b) and be
21 consistent with the Research Plan.

22 “(h)(1) The Secretary and the heads of other Federal
23 agencies shall jointly review the programs carried out (or
24 proposed to be carried out) by each such official with re-
25 spect to medical rehabilitation research and, as appro-

1 priate, enter into agreements preventing duplication
 2 among such programs.

3 “(2) The Secretary shall enter into inter-agency
 4 agreements relating to the coordination of medical reha-
 5 bilitation research conducted by agencies of the National
 6 Institutes of Health and other agencies of the Federal
 7 Government.

8 “(i) For purposes of this section, the term ‘medical
 9 rehabilitation research’ means the science of mechanisms
 10 and interventions that prevent, improve, restore, or re-
 11 place lost, underdeveloped, or deteriorating function (de-
 12 fined at the level of impairment, activity, and participa-
 13 tion, according to the World Health Organization in the
 14 International Classification of Functioning, Disability and
 15 Health (2001)).”.

16 **SEC. 3. REQUIREMENTS OF CERTAIN AGREEMENTS FOR**
 17 **ENHANCING COORDINATION AND PRE-**
 18 **VENTING DUPLICATIVE PROGRAMS OF MED-**
 19 **ICAL REHABILITATION RESEARCH.**

20 Section 3 of the National Institutes of Health
 21 Amendments of 1990 (42 U.S.C. 285g–4 note) is amend-
 22 ed—

23 (1) in subsection (a), by striking “(a) IN GEN-
 24 ERAL.—”; and

1 (2) by striking subsection (b).

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