

119TH CONGRESS  
1ST SESSION

# S. 3271

To authorize grants for the support of family caregivers.

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IN THE SENATE OF THE UNITED STATES

NOVEMBER 20, 2025

Mr. BOOKER (for himself and Mr. KIM) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

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## A BILL

To authorize grants for the support of family caregivers.

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 “In-Home Caregiver  
5       Assessment Resources and Education Act” or the “In-  
6       Home CARE Act”.

7       **SEC. 2. PURPOSES.**

8       The purposes of this Act are—

9               (1) to improve the ability of family caregivers to  
10       care for individuals in the home; and

1           (2) to increase opportunities for individuals who  
 2           are in need of care to remain at home and reduce  
 3           or postpone the need for such individuals to receive  
 4           care at an institution or hospital.

5 **SEC. 3. FAMILY CAREGIVER GRANTS.**

6           Subpart IV of part D of title III of the Public Health  
 7 Service Act (42 U.S.C. 255 et seq.) is amended by adding  
 8 at the end the following:

9 **“SEC. 339A. FAMILY CAREGIVER GRANTS.**

10           “(a) IN GENERAL.—The Secretary, acting through  
 11 the Administrator of the Administration for Community  
 12 Living, shall award 3-year grants, on a competitive basis,  
 13 to eligible organizations to carry out home visiting pro-  
 14 grams for family caregivers.

15           “(b) DEFINITIONS.—In this section:

16           “(1) CAREGIVER ASSESSMENT.—The term  
 17 ‘caregiver assessment’ means a defined process of  
 18 gathering information from a family caregiver,  
 19 through direct contact, which may include contact  
 20 through a home visit, the internet, telephone or tele-  
 21 conference, or in-person interaction, to identify the  
 22 specific needs, barriers to carrying out caregiving re-  
 23 sponsibilities, and existing supports of the family  
 24 caregiver, to appropriately target recommendations  
 25 for support services for the family caregiver.

1           “(2) ELIGIBLE ORGANIZATION.—The term ‘eli-  
 2           gible organization’ means any of the following that  
 3           has experience providing the services described in  
 4           subsection (f):

5                   “(A) A local government agency.

6                   “(B) A health care entity.

7                   “(C) Any other nonprofit or community or-  
 8           ganization.

9           “(3) FAMILY CAREGIVER.—The term ‘family  
 10          caregiver’ means an adult family member or other  
 11          individual who has a significant relationship with,  
 12          and who provides in-home assistance with moni-  
 13          toring, management, supervision, or treatment of an  
 14          individual with a chronic or other health condition,  
 15          disability, or functional limitation.

16          “(c) COORDINATION.—In carrying out this section,  
 17          the Secretary shall coordinate with—

18                   “(1) the heads of the National Family Care-  
 19          giver Support Program of the Administration on  
 20          Aging and other programs within the Department of  
 21          Health and Human Services (such as the Lifespan  
 22          Respite Care Program) and the Secretary of Vet-  
 23          erans Affairs, to ensure coordination of caregiver  
 24          services for family caregivers; and

1           “(2) the Administrator of the Centers for Medi-  
 2           care & Medicaid Services, to avoid duplicative serv-  
 3           ices and payments.

4           “(d) APPLICATION.—An eligible organization that de-  
 5           sires a grant under this section shall submit an application  
 6           at such time, in such manner, and containing such infor-  
 7           mation as the Secretary may require, including, at a min-  
 8           imum—

9           “(1) an outreach plan that identifies how the el-  
 10          igible organization will ascertain which family care-  
 11          givers in the community—

12                 “(A) are most in need of support and edu-  
 13                 cation, particularly caregivers who have had no  
 14                 training and provide complex chronic care ac-  
 15                 tivities or perform medical or nursing tasks in  
 16                 addition to assisting with activities of daily liv-  
 17                 ing;

18                 “(B) are caring for individuals who are at  
 19                 the greatest risk of needing institutional care;  
 20                 and

21                 “(C) desire to participate in the family  
 22                 caregiver home visiting program;

23           “(2) a description of the services that the eligi-  
 24           ble organization will provide directly using grant  
 25           funds, and a description of the services that the eli-

1       gible organization will use grant funds to provide  
2       through contracts or referrals;

3           “(3) a description of how the eligible organiza-  
4       tion will identify gaps in the services that family  
5       caregivers and individuals with a chronic or other  
6       health condition, disability, or functional limitation  
7       who receive care from a family caregiver in the com-  
8       munity are receiving;

9           “(4) a description of how the eligible organiza-  
10      tion can provide—

11           “(A) an initial visit to family caregivers in  
12      order to complete a caregiver assessment, in-  
13      cluding a description of the eligible organiza-  
14      tion’s expertise in conducting caregiver assess-  
15      ments;

16           “(B) education and training, based on evi-  
17      dence-based models, to help the family caregiver  
18      learn how to best care for an individual with a  
19      chronic or other health condition, disability, or  
20      functional limitation, by an individual with ex-  
21      pertise in the tasks for which the caregiver re-  
22      quires education and training, including edu-  
23      cation and training regarding, as applicable—

24                   “(i) medication management;

25                   “(ii) wound care;

1 “(iii) nutrition and food preparation  
2 for special diets;

3 “(iv) fall prevention;

4 “(v) management of depression, anx-  
5 iety, stress, trauma, and other behavioral  
6 health conditions, including ways to mini-  
7 mize negative mental health effects;

8 “(vi) assistance with activities of daily  
9 living;

10 “(vii) ways to engage other family  
11 members in providing care;

12 “(viii) ways to identify and utilize  
13 available community resources; and

14 “(ix) self-care; and

15 “(C) recommendations for home modifica-  
16 tions or physical environmental changes that  
17 could improve the health or quality of life of an  
18 individual with a chronic or other health condi-  
19 tion, disability, or functional limitation who is  
20 receiving care from a family caregiver;

21 “(5) a description of the eligible organization’s  
22 ability to provide, or refer family caregivers to local  
23 resources or appropriate programs of the Depart-  
24 ment of Health and Human Services or the Depart-  
25 ment of Veterans Affairs that will provide—

1           “(A) physical and mental health care, in-  
 2           cluding home health care and long-term support  
 3           services;

4           “(B) transportation;

5           “(C) home modification services;

6           “(D) respite care;

7           “(E) adult day services;

8           “(F) support groups; and

9           “(G) legal assistance;

10          “(6) a description of the eligible organization’s  
 11          ability to coordinate with other State and commu-  
 12          nity-based agencies;

13          “(7) a description of the eligible organization’s  
 14          understanding of family caregiver issues—

15               “(A) across demographic groups, including  
 16               age, gender, race and ethnicity, socioeconomic  
 17               status, sexual orientation, military status, and  
 18               geographical region; and

19               “(B) including disabilities and chronic con-  
 20               ditions that affect the populations that the eli-  
 21               gible organization will serve;

22          “(8) a description of the capacity of the eligible  
 23          organization to engage family caregivers, family  
 24          members, and individuals with a chronic or other

1 health condition, disability, or functional limitation  
 2 who receive care from a family caregiver; and

3 “(9) with respect to the population of family  
 4 caregivers to whom caregiver visits or services will be  
 5 provided, or for whom workers and volunteers will be  
 6 recruited and trained, a description of—

7 “(A) the population of family caregivers;

8 “(B) the extent and nature of the needs of  
 9 that population; and

10 “(C) existing caregiver services for that  
 11 population, including the number of caregivers  
 12 served and the extent of unmet need.

13 “(e) PRIORITY.—In awarding grants under this sec-  
 14 tion, the Secretary shall give priority to eligible organiza-  
 15 tions that—

16 “(1) the Secretary determines show the greatest  
 17 likelihood of implementing or enhancing family care-  
 18 giver home visiting services that best meet the needs  
 19 of the community;

20 “(2) will allow family caregivers to contact the  
 21 eligible organization by phone, email, or 2-way inter-  
 22 active video for up to 6 months after home visits  
 23 have ended, or to otherwise contact the organization  
 24 at any time if a caregiver has questions or concerns;

1           “(3) have a proven record of family caregiver  
2 support;

3           “(4) will use evidence-based programs; or

4           “(5) will provide matching funds or can dem-  
5 onstrate that the program funded by a grant under  
6 this section will be sustainable after grant funds are  
7 no longer provided.

8           “(f) AUTHORIZED ACTIVITIES.—An eligible organiza-  
9 tion receiving a grant under this section shall use grant  
10 funds to—

11           “(1) conduct an initial home visit for each fam-  
12 ily caregiver participating in the program, during  
13 which a representative from the eligible organization  
14 who has expertise in care management in the home  
15 and caregiving will perform a caregiver assessment  
16 and determine what follow-up services may benefit  
17 the caregiver and the individual with a chronic or  
18 other health condition, disability, or functional limi-  
19 tation who receives care from the family caregiver;

20           “(2) conduct home visits for the purpose of  
21 family caregiver education and training;

22           “(3) provide, or provide referrals for, the serv-  
23 ices described in subsection (d)(5);

24           “(4) provide an assessment and referral for  
25 physical and mental health services for the family

1 caregiver and for the individual with a chronic or  
 2 other health condition, disability, or functional limi-  
 3 tation who receives care from the family caregiver,  
 4 as needed; and

5 “(5) carry out any other activities that are de-  
 6 scribed in the grant application submitted under  
 7 subsection (d).

8 “(g) TECHNICAL ASSISTANCE CENTER.—The Sec-  
 9 retary shall establish, or contract to establish, a technical  
 10 assistance center, to be carried out by the National Care-  
 11 giver Support Collaborative Technical Assistance and Co-  
 12 ordinating Center, through which the Secretary shall—

13 “(1) provide evidence-based models for pro-  
 14 grams funded by grants under this section;

15 “(2) provide training for grantees;

16 “(3) answer questions from grantees; and

17 “(4) facilitate an exchange of information  
 18 among grantees, and between grantees and other  
 19 programs within the Department of Health and  
 20 Human Services, in order to maximize the use of ex-  
 21 isting resources and services for family caregivers  
 22 and to avoid the duplication of such services.

23 “(h) EVALUATION.—

24 “(1) IN GENERAL.—Not later than 2 years  
 25 after the date of enactment of this section, and an-

1 nually thereafter, the Secretary shall evaluate the  
 2 success of the grant program carried out under this  
 3 section, based on criteria that the Secretary may de-  
 4 velop for such evaluation.

5 “(2) OPTIONAL CONTENTS OF EVALUATION.—

6 The evaluation described in paragraph (1) may in-  
 7 clude an evaluation of—

8 “(A) the extent to which individuals with a  
 9 chronic or other health condition, disability, or  
 10 functional limitation who are cared for by a  
 11 participating family caregiver have—

12 “(i) a reduction in the potential num-  
 13 ber of hospitalizations;

14 “(ii) a reduction in the potential num-  
 15 ber of institutionalizations;

16 “(iii) cost reductions across the health  
 17 care system;

18 “(iv) improved connection to commu-  
 19 nity resources;

20 “(v) improved care; and

21 “(vi) improved quality of life (includ-  
 22 ing a reduction of stress and anxiety and  
 23 improved relationships and mood); and

24 “(B) the extent to which participating  
 25 family caregivers have improved quality of life

1 (including a reduction of stress and anxiety and  
2 improved health, relationships, mood, and con-  
3 nection to community resources).

4 “(i) REPORTS AND RECOMMENDATIONS.—Not later  
5 than 1 year before the expiration of the grants awarded  
6 under this section, the Secretary shall prepare and submit  
7 a report to Congress that includes recommendations,  
8 based on the evaluation described in subsection (h),  
9 about—

10 “(1) changes to the grant program under this  
11 section;

12 “(2) the potential for expanding the number  
13 and scope of family caregiver home visiting program  
14 grants distributed by the Secretary; and

15 “(3) extending the length of the grant program.

16 “(j) AUTHORIZATION OF APPROPRIATIONS.—There  
17 are authorized to be appropriated to carry out this section  
18 such sums as may be necessary.”.

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