## Suspend the Rules and Pass the Bill, H. R. 7213, With an Amendment

(The amendment strikes all after the enacting clause and inserts a new text)

118TH CONGRESS 2D SESSION	H. R
	Health Service Act to enhance and reauthorize activities g to autism spectrum disorder, and for other purposes.
IN THE	HOUSE OF REPRESENTATIVES
	introduced the following bill; which was referred to the tee on
_	A BILL
	Public Health Service Act to enhance and ctivities and programs relating to autism

- 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 "Autism Collaboration,
- 5 Accountability, Research, Education, and Support Act of
- 6 2024" or the "Autism CARES Act of 2024".

spectrum disorder, and for other purposes.

1	SEC. 2. NATIONAL INSTITUTES OF HEALTH ACTIVITIES.
2	(a) Expansion of Activities.—Section 409C(a)(1)
3	of the Public Health Service Act (42 U.S.C. 284g(a)(1))
4	is amended—
5	(1) by striking ") shall, subject to the avail-
6	ability" and inserting the following: "), in consulta-
7	tion with relevant Federal departments and agen-
8	cies, as appropriate, shall—
9	"(A) subject to the availability";
10	(2) by striking "basic and clinical research in
11	fields including pathology" and inserting the fol-
12	lowing: "basic and clinical research—
13	"(i) in fields, such as pathology";
14	(3) by striking "toxicology, and interventions"
15	and inserting the following: "toxicology, psychiatry,
16	psychology, developmental behavioral pediatrics,
17	audiology, and gerontology; and
18	"(ii) on interventions";
19	(4) by striking "disorder. Such research shall
20	investigate" and inserting the following: "disorder;
21	and
22	"(B) ensure that research referred to in
23	subparagraph (A)—
24	"(i) investigates";
25	(5) by striking "prevention, services across the
26	lifespan, supports, intervention, and treatment of

1	autism spectrum disorder" and inserting "preven-
2	tion, services and supports across the lifespan, inter-
3	vention, and treatment of autism spectrum disorder
4	and co-occurring conditions"; and
5	(6) by striking "treatments." and inserting the
6	following: "treatments;
7	"(ii) examines supports for caregivers;
8	and
9	"(iii) reflects the entire population of
10	individuals with autism spectrum disorder,
11	including those individuals with co-occur-
12	ring conditions and the full range of needs
13	for supports and services, including such
14	supports and services to ensure the safety,
15	and promote the well-being, of such indi-
16	viduals.".
17	(b) Centers of Excellence.—Section 409C(b) of
18	the Public Health Service Act (42 U.S.C. 284g(b)) is
19	amended—
20	(1) in paragraph (2)—
21	(A) by striking "including the fields of"
22	and inserting "in fields such as"; and
23	(B) by striking "behavioral psychology,
24	and clinical psychology" and inserting "behav-

1	ioral psychology, clinical psychology, and geron-
2	tology'';
3	(2) in paragraph (5)(A), by striking "five" and
4	inserting "seven"; and
5	(3) in paragraph (5)(B), by striking "period of
6	not to exceed" and inserting "period not to exceed".
7	(c) Public Input.—Section 409C(d) of the Public
8	Health Service Act (42 U.S.C. 284g(d)) is amended to
9	read as follows:
10	"(d) Public Input.—
11	"(1) In General.—The Director shall under
12	subsection (a)(1) provide for means through which
13	the public can obtain information on the existing
14	and planned programs and activities of the National
15	Institutes of Health with respect to autism spectrum
16	disorder and through which the Director can receive
17	comments from the public regarding such programs
18	and activities.
19	"(2) Guidance.—The Director may provide
20	guidance to centers under subsection $(b)(1)$ on strat-
21	egies, activities, and opportunities to promote en-
22	gagement with, and solicit input from, individuals
23	with autism spectrum disorder and their family
24	members, guardians, advocates or authorized rep-
25	resentatives, providers, or other appropriate individ-

1	uals to inform the activities of the center. Such
2	strategies, activities, and opportunities should con-
3	sider including, as appropriate, individuals, family
4	members, and caregivers of individuals with autism
5	spectrum disorder who represent the entire popu-
6	lation of individuals with autism spectrum disorder,
7	including those individuals with co-occurring condi-
8	tions and the full range of needs for supports and
9	services, including such supports and services to en-
10	sure the safety, and promote the well-being, of such
11	individuals, to inform the activities of the center.".
12	(d) Budget Estimate.—Section 409C of the Public
13	Health Service Act (42 U.S.C. 284g) is amended by add-
14	ing at the end the following:
15	"(e) Budget Estimate.—For each of fiscal years
16	2026 through 2029, the Director shall prepare and sub-
17	mit, directly to the President for review and transmittal
18	to Congress, an annual budget estimate for the initiatives
19	of the National Institutes of Health pursuant to the stra-
20	tegic plan developed under section 399CC(b)(5) and up-
21	dated under section 399CC(b)(6)(B), after reasonable op-
22	portunity for comment (but without change) by the Sec-
23	retary and the Interagency Autism Coordinating Com-
24	mittee established under section 399CC.".

2	(a) Developmental Disabilities Surveillance
3	AND RESEARCH PROGRAM.—Section 399AA of the Public
4	Health Service Act (42 U.S.C. 280i) is amended—
5	(1) in subsection (a)(3), by striking "an Indian
6	tribe, or a tribal organization" and inserting "an In-
7	dian Tribe, or a Tribal organization";
8	(2) in subsection (b)(1), by inserting "across
9	the lifespan" before the period at the end;
10	(3) in subsection $(d)(1)$ —
11	(A) in the paragraph heading, by striking
12	"TRIBE; TRIBAL" and inserting "TRIBE; TRIB-
13	$\mathrm{AL}^{\prime\prime};$
14	(B) by striking "tribe" and inserting
15	"Tribe"; and
16	(C) by striking "tribal" and inserting
17	"Tribal"; and
18	(4) in subsection (e), by striking "2024" and
19	inserting "2029".
20	(b) Autism Education, Early Detection, and
21	Intervention.—Section 399BB of the Public Health
22	Service Act (42 U.S.C. 280i–1) is amended—
23	(1) in subsection (b)(1), by striking "culturally
24	competent information" and inserting "culturally
25	and linguistically appropriate information";
26	(2) in subsection $(b)(2)$ —

1	(A) by striking "promote research" and in-
2	serting "promote research, which may include
3	research that takes a community-based ap-
4	proach,"; and
5	(B) by striking "screening tools" each
6	place it appears and inserting "screening and
7	diagnostic tools";
8	(3) in subsection (b)(3), by striking "at higher
9	risk" and inserting "at increased likelihood";
10	(4) in subsection (b)(4), by inserting ", which
11	may give consideration to the perspectives of parents
12	and guardians" before the semicolon at the end;
13	(5) in subsection (b)(7), by striking "at higher
14	risk" and inserting "at increased likelihood";
15	(6) in subsection (c)(1), by striking "culturally
16	competent information" and inserting "culturally
17	and linguistically appropriate information";
18	(7) in subsection (c)(2)(A)(ii), by striking "cul-
19	turally competent information" and inserting "cul-
20	turally and linguistically appropriate information";
21	(8) by amending paragraph (1) of subsection
22	(e) to read as follows:
23	(9) in subsection (e)(1)—

1	(A) in the matter preceding subparagraph
2	(A), by inserting ", and strengthen the capacity
3	of," after "expand"; and
4	(B) in subparagraph (A)—
5	(i) by striking "expand existing or de-
6	velop new" and inserting "expand and
7	strengthen the capacity of existing, or, in
8	States that do not have such a program,
9	develop new,"; and
10	(ii) by striking "Act) in States that do
11	not have such a program" and inserting
12	"Act)";
13	(C) in subparagraph (B)(v), by inserting
14	"or other providers, as applicable" before the
15	semicolon at the end; and
16	(D) by amending subparagraph (C) to read
17	as follows:
18	"(C) program sites—
19	"(i) provide culturally and linguis-
20	tically appropriate services;
21	"(ii) take a multidisciplinary approach
22	and have experience working with under-
23	served populations; and
24	"(iii) identify opportunities to partner
25	with community-based organizations to ex-

1	pand the capacity of communities to serve
2	individuals with autism spectrum disorder
3	or other developmental disabilities.";
4	(10) in subsection (e)(2), by adding at the end
5	the following new subparagraph:
6	"(C) Report.—Not later than 2 years
7	after the date of the enactment of the Autism
8	CARES Act of 2024, the Secretary shall submit
9	to the Committee on Energy and Commerce of
10	the House of Representatives and the Com-
11	mittee on Health, Education, Labor, and Pen-
12	sions of the Senate a report that examines the
13	need for, and feasibility of, expanding the devel-
14	opmental-behavioral pediatrician training pro-
15	grams described in subparagraph (A).";
16	(11) by amending subsection (f) to read as fol-
17	lows:
18	"(f) Intervention.—The Secretary shall promote
19	research through grants or contracts, which may include
20	grants or contracts to research centers or networks, to—
21	"(1) develop and evaluate evidence-based prac-
22	tices and interventions to improve outcomes for indi-
23	viduals with autism spectrum disorder or other de-
24	velopmental disabilities by addressing physical and

1	behavioral health and communication needs of such
2	individuals across the lifespan;
3	"(2) develop guidelines for such evidence-based
4	practices and interventions; and
5	"(3) disseminate information related to such
6	evidence-based practices and interventions and
7	guidelines."; and
8	(12) in subsection (g), by striking "2024" and
9	inserting "2029".
10	(c) Interagency Autism Coordinating Com-
11	MITTEE.—Section 399CC of the Public Health Service Act
12	(42 U.S.C. 280i–2) is amended—
13	(1) in subsection (b)—
14	(A) in the matter preceding paragraph (1),
15	by inserting ", on a regular basis" after
16	"shall";
17	(B) in paragraph (2), by striking "develop
18	a summary" and inserting "summarize"; and
19	(C) by striking paragraphs (5) and (6) and
20	inserting the following:
21	"(5) develop a strategic plan for the conduct of,
22	and support for, autism spectrum disorder research,
23	as described in section 409C(a)(1), which shall in-
24	elude—

1	"(A) proposed budgetary requirements;
2	and
3	"(B) recommendations to ensure that au-
4	tism spectrum disorder research, and services
5	and support activities to the extent practicable,
6	of the Department of Health and Human Serv-
7	ices and of other Federal departments and
8	agencies are not unnecessarily duplicative; and
9	"(6) submit to the Congress and the Presi-
10	dent—
11	"(A) an annual update on the summary of
12	advances described in paragraph (2); and
13	"(B) a biennial update on the strategic
14	plan described in paragraph (5), including
15	progress made in achieving the goals outlined in
16	such strategic plan and any specific measures
17	taken pursuant to such strategic plan."; and
18	(2) in subsection (f), by striking "2024" and
19	inserting "2029".
20	(d) Reports to Congress.—Section 399DD of the
21	Public Health Service Act (42 U.S.C. 280i-3) is amend-
22	ed—
23	(1) by striking "2019" each place it appears
24	and inserting "2024": and

1	(2) in subsection (a), by amending paragraph
2	(1) to read as follows:
3	"(1) In General.—Not later than 4 years
4	after September 30, 2024, the Secretary, in con-
5	sultation with other relevant Federal departments
6	and agencies, shall prepare and submit to the Com-
7	mittee on Health, Education, Labor, and Pensions
8	of the Senate and the Committee on Energy and
9	Commerce of the House of Representatives, and
10	make publicly available, including through posting
11	on the website of the Department of Health and
12	Human Services, a progress report on activities re-
13	lated to autism spectrum disorder and other develop-
14	mental disabilities. Such report shall include activi-
15	ties and research related to the entire population of
16	individuals with autism spectrum disorder, including
17	those individuals with co-occurring conditions and
18	the full range of needs for supports and services, in-
19	cluding such supports and services to ensure the
20	safety, and promote the well-being, of such individ-
21	uals.";
22	(3) in subsection (b)—
23	(A) in the heading of subsection (b), by
24	striking "HEALTH AND WELL-BEING" and in-
25	serting "Mental Health Needs";

1	(B) in paragraph (1), by striking "health
2	and well-being" and inserting "mental health
3	needs"; and
4	(C) by amending paragraph (2) to read as
5	follows:
6	"(2) Contents.—The report submitted under
7	paragraph (1) shall contain—
8	"(A) an overview of policies and programs
9	relevant to the mental health of individuals with
10	autism spectrum disorder across their lifespan,
11	including an identification of existing Federal
12	laws, regulations, policies, research, and pro-
13	grams; and
14	"(B) recommendations to improve mental
15	health outcomes and address related disparities
16	in mental health care for individuals with au-
17	tism spectrum disorder, including prevention,
18	care coordination, and community-based serv-
19	ices.";
20	(4) by adding at the end the following:
21	"(c) Update on Young Adults and Youth
22	Transitioning to Adulthood.—Not later than 2 years
23	after the date of enactment of the Autism CARES Act
24	of 2024, the Secretary, in coordination with other relevant
25	Federal departments and agencies, as appropriate, shall

1	prepare and submit to the Committee on Energy and
2	Commerce of the House of Representatives and the Com-
3	mittee on Health, Education, Labor, and Pensions of the
4	Senate an update to the report required pursuant to sub-
5	section (b) of this section, as added by section 6 of the
6	Autism Cares Act of 2014 (Public Law 113–157), and in
7	effect before the date of enactment of the Autism CARES
8	Act of 2019 (Public Law 116–60), concerning young
9	adults with autism spectrum disorder and the challenges
10	related to the transition from existing school-based serv-
11	ices to those services available during adulthood.".
12	(e) Authorization of Appropriations.—Section
13	399EE of the Public Health Service Act (42 U.S.C. 280i-
14	4) is amended—
15	(1) in subsection (a), by striking "\$23,100,000
16	for each of fiscal years 2020 through 2024" and in-
17	serting "\$28,100,000 for each of fiscal years 2025
18	through 2029";
19	(2) in subsection (b), by striking "\$50,599,000
20	for each of fiscal years 2020 through 2024" and in-
21	serting "\$56,344,000 for each of fiscal years 2025
22	through 2029"; and
23	(3) in subsection (c), by striking "there are au-
24	thorized to be appropriated \$296,000,000 for each
25	of fiscal years 2020 through 2024" and inserting

- 1 "there is authorized to be appropriated
- 2 \$306,000,000 for each of fiscal years 2025 through
- 3 2029".
- 4 SEC. 4. TECHNICAL ASSISTANCE TO IMPROVE ACCESS TO
- 5 COMMUNICATION TOOLS.
- 6 (a) In General.—The Secretary of Health and
- 7 Human Services (referred to in this section as the "Sec-
- 8 retary") may, at the request of a State, Indian Tribe,
- 9 Tribal organization, locality, or territory, provide training
- 10 and technical assistance to such jurisdiction on the man-
- 11 ner in which Federal funding administered by the Sec-
- 12 retary may be used to provide individuals with autism
- 13 spectrum disorder and other developmental disabilities
- 14 with access to evidence-based services, tools, and tech-
- 15 nologies that support communication needs.
- 16 (b) Annual Report.—The Secretary shall annually
- 17 prepare and submit to the Committee on Health, Edu-
- 18 cation, Labor, and Pensions of the Senate and the Com-
- 19 mittee on Energy and Commerce of the House of Rep-
- 20 resentatives a report summarizing any technical assistance
- 21 provided by the Secretary in the preceding fiscal year
- 22 under subsection (a) and any advancements in the devel-
- 23 opment or evaluation of such evidence-based services,
- 24 tools, and technologies.