

Calendar No. 407

114TH CONGRESS
2D SESSION

S. 800

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

IN THE SENATE OF THE UNITED STATES

MARCH 19, 2015

Mr. KIRK (for himself, Mr. BENNET, Mr. HATCH, Ms. MURKOWSKI, Mr. ISAKSON, Ms. COLLINS, Mr. ENZI, and Mr. ALEXANDER) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

APRIL 4, 2016

Reported by Mr. ALEXANDER, with an amendment

[Strike out all after the enacting clause and insert the part printed in italic]

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 the
6 NIH Act”.

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

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

3 Section 452 of the Public Health Service Act (42

4 U.S.C. 285g-4) is amended—

5 (1) in subsection (b), by striking “conduct and
6 support” and inserting “conduct, support, and co-
7 ordination”;

8 (2) in subsection (e)(1)(C), by striking “of the
9 Center” and inserting “within the Center”;

10 (3) in subsection (d)—

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

22 (B) in paragraph (2)—

23 (i) in subparagraph (A), by striking
24 “and priorities for such research; and” and
25 inserting “priorities for such research; and

1 existing resources to support the purpose
2 described in subsection (b);",

3 (ii) in subparagraph (B), by striking
4 the period and inserting "and"; and

5 (iii) by adding at the end the fol-
6 lowing:

7 "(C) include objectives, benchmarks, and guid-
8 ing principles for conducting, supporting, and co-
9 ordinating medical rehabilitation research, consistent
10 with the purpose described in subsection (b).";

11 (C) in paragraph (4)—

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

1 the appropriate committees of Congress.”;

2 and

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

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

17 In preparing the report, the Director of the Center and
18 the Director of the Institute shall consult with the Direc-
19 tor of NIH, and the report shall reflect an assessment of
20 the Research Plan by the Director of NIH.”;

21 (4) in subsection (e)—

22 (A) in paragraph (2), by inserting “peri-
23 odically, or not less than every 5 years, host a
24 scientific conference or workshop on medical re-

1 habilitation research and” after “The Coordinating Committee shall”,

3 (B) in paragraph (3), by inserting “the Director of the Division of Program Coordination, Planning, and Strategic Initiatives within the Office of the Director of NIH,” after “shall be composed of”, and

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

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

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

16 and

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

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

1 “(h)(1) The Secretary and the heads of other Federal
2 agencies shall jointly review the programs carried out (or
3 proposed to be carried out) by each such official with re-
4 spect to medical rehabilitation research and, as appro-
5 priate, enter into agreements preventing duplication
6 among such programs.

7 “(2) The Secretary shall enter into interagency agree-
8 ments relating to the coordination of medical rehabilita-
9 tion research conducted by agencies of the National Insti-
10 tutes of Health and other agencies of the Federal Govern-
11 ment.

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

1 **SEC. 3. REQUIREMENTS OF CERTAIN AGREEMENTS FOR**
2 **ENHANCING COORDINATION AND PRE-**
3 **VENTING DUPLICATIVE PROGRAMS OF MED-**
4 **ICAL REHABILITATION RESEARCH.**

5 Section 3 of the National Institutes of Health
6 Amendments of 1990 (42 U.S.C. 285g-4 note) is amend-
7 ed—

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

10 (2) by striking subsection (b).

11 **SECTION 1. SHORT TITLE.**

12 *This Act may be cited as the “Enhancing the Stature
13 and Visibility of Medical Rehabilitation Research at the
14 NIH Act”.*

15 **SEC. 2. IMPROVING MEDICAL REHABILITATION RESEARCH
16 AT THE NATIONAL INSTITUTES OF HEALTH.**

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

19 (1) in subsection (b), by striking “conduct and
20 support” and inserting “conduct, support, and co-
21 ordination”;

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

24 (3) in subsection (d)—

25 (A) by striking paragraph (1) and inserting
26 the following: “(1) *The Director of the Center, in*

1 *consultation with the Director of the Institute,*
2 *the coordinating committee established under*
3 *subsection (e), and the advisory board established*
4 *under subsection (f), shall develop a comprehen-*
5 *sive plan (referred to in this section as the ‘Re-*
6 *search Plan’) for the conduct, support, and co-*
7 *ordination of medical rehabilitation research.”;*

8 (B) in paragraph (2)—

9 (i) in subparagraph (A), by striking “;
10 and” and inserting a semicolon;
11 (ii) in subparagraph (B), by striking
12 the period and inserting “; and”; and
13 (iii) by adding at the end the fol-
14 lowing:

15 “(C) include goals and objectives for conducting,
16 supporting, and coordinating medical rehabilitation
17 research, consistent with the purpose described in sub-
18 section (b).”;

19 (C) by striking paragraph (4) and inserting
20 the following:

21 “(4) The Director of the Center, in consultation with
22 the Director of the Institute, the coordinating committee es-
23 tablished under subsection (e), and the advisory board es-
24 tablished under subsection (f), shall revise and update the
25 Research Plan periodically, as appropriate, or not less than

1 every 5 years. Not later than 30 days after the Research
2 Plan is so revised and updated, the Director of the Center
3 shall transmit the revised and updated Research Plan to
4 the President, the Committee on Health, Education, Labor,
5 and Pensions of the Senate, and the Committee on Energy
6 and Commerce of the House of Representatives.”; and

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

8 “(5) The Director of the Center, in consultation with
9 the Director of the Institute, shall, prior to revising and
10 updating the Research Plan, prepare a report for the co-
11 ordinating committee established under subsection (e) and
12 the advisory board established under subsection (f) that de-
13 scribes and analyzes the progress during the preceding fiscal
14 year in achieving the goals and objectives described in para-
15 graph (2)(C) and includes expenditures for rehabilitation
16 research at the National Institutes of Health. The report
17 shall include recommendations for revising and updating
18 the Research Plan, and such initiatives as the Director of
19 the Center and the Director of the Institute determine ap-
20 propriate. In preparing the report, the Director of the Cen-
21 ter and the Director of the Institute shall consult with the
22 Director of NIH.”;

23 (4) in subsection (e)—

24 (A) in paragraph (2), by inserting “peri-
25 odically host a scientific conference or workshop

1 on medical rehabilitation research and” after
2 “The Coordinating Committee shall”; and

3 (B) in paragraph (3), by inserting “the Di-
4 rector of the Division of Program Coordination,
5 Planning, and Strategic Initiatives within the
6 Office of the Director of NIH,” after “shall be
7 composed of”;

8 (5) in subsection (f)(3)(B)—

9 (A) by redesignating clauses (ix) through
10 (xi) as clauses (x) through (xii), respectively; and
11 (B) by inserting after clause (viii) the fol-
12 lowing:

13 “(ix) The Director of the Division of Program
14 Coordination, Planning, and Strategic Initiatives.”;
15 and

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

17 “(g)(1) The Secretary and the heads of other Federal
18 agencies shall jointly review the programs carried out (or
19 proposed to be carried out) by each such official with respect
20 to medical rehabilitation research and, as appropriate,
21 enter into agreements preventing duplication among such
22 programs.

23 “(2) The Secretary shall, as appropriate, enter into
24 interagency agreements relating to the coordination of med-
25 ical rehabilitation research conducted by agencies of the Na-

1 *tional Institutes of Health and other agencies of the Federal*
2 *Government.*

3 “(h) For purposes of this section, the term ‘medical re-
4 habilitation research’ means the science of mechanisms and
5 interventions that prevent, improve, restore, or replace lost,
6 underdeveloped, or deteriorating function.”.

7 **SEC. 3. REQUIREMENTS OF CERTAIN AGREEMENTS FOR EN-**
8 **HANCING COORDINATION AND PREVENTING**
9 **DUPLICATIVE PROGRAMS OF MEDICAL REHA-**
10 **BILITATION RESEARCH.**

11 Section 3 of the National Institutes of Health Amend-
12 ments of 1990 (42 U.S.C. 285g–4 note) is amended—

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

15 (2) by striking subsection (b).

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