

# Calendar No. 503

118TH CONGRESS  
2D SESSION

# S. 4755

To reauthorize traumatic brain injury programs, and for other purposes.

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## IN THE SENATE OF THE UNITED STATES

JULY 23, 2024

Mr. MULLIN (for himself, Mr. CASEY, Mr. CORNYN, Ms. CORTEZ MASTO, and Ms. ERNST) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

SEPTEMBER 12, 2024

Reported by Mr. SANDERS, with an amendment

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

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# A BILL

To reauthorize traumatic brain injury programs, and for other purposes.

- 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 “Traumatic Brain In-*
- 5       *jury Program Reauthorization Act of 2024”.*

1   **SEC. 2. PREVENTION AND CONTROL OF TRAUMATIC BRAIN**

2                   **INJURY.**

3                   (a) **PREVENTION OF TRAUMATIC BRAIN INJURY.—**

4   Section ~~393B~~ of the Public Health Service Act (~~42 U.S.C.~~

5 ~~280b-1e~~) is amended—

6                   (1) in subsection (a), by inserting “and preva-  
7                   lence” after “incidence”;

8                   (2) in subsection (b)—

9                   (A) in paragraph (1), by inserting “and re-  
10                  duction of associated injuries and fatalities” be-  
11                  fore the semicolon;

12                  (B) in paragraph (2), by inserting “and re-  
13                  lated risk factors” before the semicolon; and

14                  (C) in paragraph (3)—

15                   (i) in the matter preceding subparagraph (A), by striking “2020” each place  
16                  it appears and inserting “2030”; and

17                   (ii) in subparagraph (A)—

18                   (I) in clause (i), by striking “;  
19                  and” and inserting a semicolon;

20                   (II) by redesignating clause (ii)  
21                  as clause (iv); and

22                   (III) by inserting after clause (i)  
23                  the following:

24                   “(ii) populations at higher risk of  
25                  traumatic brain injury;

1               “(iii) causes of, and risk factors for,  
2               traumatic brain injury, and”; and  
3               (3) in subsection (e), by inserting “, and other  
4               relevant Federal departments and agencies” before  
5               the period at the end.

6               (b) NATIONAL PROGRAM FOR TRAUMATIC BRAIN IN-  
7 JURY SURVEILLANCE AND REGISTRIES.—Section 393C of  
8 the Public Health Service Act (42 U.S.C. 280b-1d) is  
9 amended—

10               (1) in subsection (a)—

11               (A) in the matter preceding paragraph (1),  
12               by inserting “to identify populations that may  
13               be at higher risk for traumatic brain injuries, to  
14               collect data on the causes of, and risk factors  
15               for, traumatic brain injuries,” after “related  
16               disability,”; and

17               (B) in paragraph (4), by inserting “short-  
18               and long-term” before “outcomes”;

19               (2) by striking subsection (b);

20               (3) by redesignating subsection (e) as sub-  
21               section (b); and

22               (4) by adding at the end the following:

23               “(e) AVAILABILITY OF INFORMATION.—The Sec-  
24               retary, acting through the Director of the Centers for Dis-  
25               ease Control and Prevention, shall make publicly available

1 aggregated information on traumatic brain injury de-  
2 scribed in this section, including on the website of the Cen-  
3 ters for Disease Control and Prevention. Such website, to  
4 the extent feasible, shall include aggregated information  
5 on populations that may be at higher risk for traumatic  
6 brain injuries and strategies for preventing or reducing  
7 risk of traumatic brain injury that are tailored to such  
8 populations.”.

9           (e) AUTHORIZATION OF APPROPRIATIONS.—Section  
10 394A of the Public Health Service Act (42 U.S.C. 280b-  
11 3) is amended—

12           (1) in subsection (a), by striking “1994, and”  
13 and inserting “1994,”; and  
14           (2) in subsection (b), by striking “2020 through  
15 2024” and inserting “2025 through 2029”.

16 **SEC. 3. STATE GRANT PROGRAMS.**

17           (a) STATE GRANTS FOR PROJECTS REGARDING  
18 TRAUMATIC BRAIN INJURY.—Section 1252 of the Public  
19 Health Service Act (42 U.S.C. 300d-52) is amended—

20           (1) in subsection (b)(2)—

21               (A) by inserting “, taking into consider-  
22 ation populations that may be at higher risk for  
23 traumatic brain injuries” after “outreach pro-  
24 grams”; and

25               (B) by inserting “Tribal,” after “State,”;

1                             (2) in subsection (h), by striking paragraphs  
2                             (1) and (2) and inserting the following:

3                             “(1) AMERICAN INDIAN CONSORTIUM; STATE.—

4                             The terms ‘American Indian consortium’ and ‘State’  
5                             have the meanings given such terms in section 1253.

6                             “(2) TRAUMATIC BRAIN INJURY.—

7                             “(A) IN GENERAL.—Subject to subparagraph (B), the term ‘traumatic brain injury’—

8                             “(i) means an acquired injury to the  
9                             brain;

10                             “(ii) may include—

11                             “(I) brain injuries caused by anoxia due to trauma; and

12                             “(II) damage to the brain from  
13                             an internal or external source that results in infection, toxicity, surgery, or  
14                             vascular disorders not associated with  
15                             aging; and

16                             “(iii) does not include brain dysfunction caused by congenital or degenerative  
17                             disorders, or birth trauma.

18                             “(B) REVISIONS TO DEFINITION.—The  
19                             Secretary may revise the definition of the term  
20                             ‘traumatic brain injury’ under this paragraph,  
21                             as the Secretary determines necessary, after

1           consultation with States and other appropriate  
2           public or nonprofit private entities.”; and

3           (3) in subsection (i), by striking “2020 through  
4           2024” and inserting “2025 through 2029”.

5           **(b) STATE GRANTS FOR PROTECTION AND ADVO-**  
6           **CACY SERVICES.**—Section 1253(l) of the Public Health  
7           Service Act (42 U.S.C. 300d–53(l)) is amended by striking  
8           “2020 through 2024” and inserting “2025 through  
9           2029”.

10 **SEC. 4. REPORT TO CONGRESS.**

11           Not later than 1 year after the date of enactment  
12           of this Act, the Secretary of Health and Human Services  
13           shall submit to the Committee on Health, Education,  
14           Labor, and Pensions of the Senate and the Committee on  
15           Energy and Commerce of the House of Representatives  
16           a report that contains—

17           (1) an overview of populations who may be at  
18           higher risk for traumatic brain injury, such as indi-  
19           viduals affected by domestic violence or sexual as-  
20           sault and public safety officers as defined in section  
21           1204 of the Omnibus Crime Control and Safe  
22           Streets Act of 1968 (42 U.S.C. 10284);

23           (2) an outline of existing surveys and activities  
24           of the Centers for Disease Control and Prevention  
25           on traumatic brain injuries and any steps the agency

1 has taken to address gaps in data collection related  
2 to such higher risk populations;  
3 (3) an overview of any outreach or education ef-  
4 forts to reach such higher risk populations; and  
5 (4) any challenges associated with reaching  
6 such higher risk populations.

7 **SECTION 1. SHORT TITLE.**

8 This Act may be cited as the “Traumatic Brain Injury  
9 Program Reauthorization Act of 2024”.

10 **SEC. 2. PREVENTION AND CONTROL OF TRAUMATIC BRAIN  
11 INJURY.**

12 (a) *PREVENTION OF TRAUMATIC BRAIN INJURY.*—Sec-  
13 tion 393B of the Public Health Service Act (42 U.S.C.  
14 280b–1c) is amended—

15 (1) in subsection (a), by inserting “and preva-  
16 lence” after “incidence”;

17 (2) in subsection (b)—

18 (A) in paragraph (1), by inserting “and re-  
19 duction of associated injuries and fatalities” be-  
20 fore the semicolon;

21 (B) in paragraph (2), by inserting “and re-  
22 lated risk factors” before the semicolon; and

23 (C) in paragraph (3)—

1                             (i) in the matter preceding subparagraph (A), by striking “2020” each place it  
2 appears and inserting “2030”; and  
3  
4                             (ii) in subparagraph (A)—  
5                                 (I) in clause (i), by striking “;  
6 and” and inserting a semicolon;  
7                                 (II) by redesignating clause (ii)  
8 as clause (iv);  
9                                 (III) by inserting after clause (i)  
10 the following:  
11                                 “(ii) populations at higher risk of  
12 traumatic brain injury, including popu-  
13 lations whose increased risk is due to occu-  
14 pational or circumstantial factors;  
15                                 “(iii) causes of, and risk factors for,  
16 traumatic brain injury; and”; and  
17                                 (IV) in clause (iv), as so redesi-  
18 ginated, by striking “arising from trau-  
19 matic brain injury” and inserting “;  
20 which may include related mental  
21 health and other conditions, arising  
22 from traumatic brain injury, includ-  
23 ing”; and

1                             (3) in subsection (c), by inserting “; and other  
2                             relevant Federal departments and agencies” before the  
3                             period at the end.

4                             (b) NATIONAL PROGRAM FOR TRAUMATIC BRAIN IN-  
5                             JURY SURVEILLANCE AND REGISTRIES.—Section 393C of  
6                             the Public Health Service Act (42 U.S.C. 280b-1d) is  
7                             amended—

8                             (1) in subsection (a)—

9                                 (A) in the matter preceding paragraph (1),  
10                             by inserting “to identify populations that may  
11                             be at higher risk for traumatic brain injuries, to  
12                             collect data on the causes of, and risk factors for,  
13                             traumatic brain injuries,” after “related dis-  
14                             ability,”;

15                                 (B) in paragraph (1), by inserting “, in-  
16                             cluding the occupation of the individual, when  
17                             relevant to the circumstances surrounding the in-  
18                             jury” before the semicolon; and

19                                 (C) in paragraph (4), by inserting “short-  
20                             and long-term” before “outcomes”;

21                             (2) by striking subsection (b);

22                             (3) by redesignating subsection (c) as subsection  
23                             (b);

1                   (4) in subsection (b), as so redesignated, by inserting “and evidence-based practices to identify and address concussion” before the period at the end; and

4                   (5) by adding at the end the following:

5                 “(c) AVAILABILITY OF INFORMATION.—The Secretary,  
6 acting through the Director of the Centers for Disease Con-  
7 trol and Prevention, shall make publicly available aggre-  
8 gated information on traumatic brain injury and concus-  
9 sion described in this section, including on the website of  
10 the Centers for Disease Control and Prevention. Such  
11 website, to the extent feasible, shall include aggregated infor-  
12 mation on populations that may be at higher risk for tra-  
13 matic brain injuries and strategies for preventing or reduc-  
14 ing risk of traumatic brain injury that are tailored to such  
15 populations.”.

16                 (c) AUTHORIZATION OF APPROPRIATIONS.—Section  
17 394A of the Public Health Service Act (42 U.S.C. 280b-  
18 3) is amended—

19                 (1) in subsection (a), by striking “1994, and”  
20 and inserting “1994,”; and

21                 (2) in subsection (b), by striking “2020 through  
22 2024” and inserting “2025 through 2029”.

1 **SEC. 3. STATE GRANT PROGRAMS.**2       (a) *STATE GRANTS FOR PROJECTS REGARDING TRAU-*3 *MATIC BRAIN INJURY.*—Section 1252 of the Public Health

4 Service Act (42 U.S.C. 300d–52) is amended—

5           (1) in subsection (b)(2)—

6              (A) by inserting “, taking into consider-  
7              ation populations that may be at higher risk for  
8              traumatic brain injuries” after “outreach pro-  
9              grams”; and

10             (B) by inserting “Tribal,” after “State,”;

11           (2) in subsection (e)(3)(B)—

12              (A) by striking “(such as third party pay-  
13              ers, State agencies, community-based providers,  
14              schools, and educators)”;  
and15              (B) by inserting “(such as third party pay-  
16              ers, State agencies, community-based providers,  
17              schools, and educators” after “professionals”;18           (3) in subsection (h), by striking paragraphs (1)  
19           and (2) and inserting the following:20              “(1) *AMERICAN INDIAN CONSORTIUM; STATE.*—21              *The terms ‘American Indian consortium’ and ‘State’*  
22              *have the meanings given such terms in section 1253.*23              “(2) *TRAUMATIC BRAIN INJURY.*—24              “(A) *IN GENERAL.*—Subject to subparagraph

25              (B), the term ‘traumatic brain injury’—

1                 “(i) means an acquired injury to the  
2                 brain;

3                 “(ii) may include—

4                         “(I) brain injuries caused by an-  
5                 oxia due to trauma; and

6                         “(II) damage to the brain from  
7                 an internal or external source that re-  
8                 sults in infection, toxicity, surgery, or  
9                 vascular disorders not associated with  
10                 aging; and

11                 “(iii) does not include brain dysfunc-  
12                 tion caused by congenital or degenerative  
13                 disorders, or birth trauma.

14                 “(B) REVISIONS TO DEFINITION.—The Sec-  
15                 retary may revise the definition of the term  
16                 ‘traumatic brain injury’ under this paragraph,  
17                 as the Secretary determines necessary, after con-  
18                 sultation with States and other appropriate pub-  
19                 lic or nonprofit private entities.”; and

20                 (4) in subsection (i), by striking “2020 through  
21                 2024” and inserting “2025 through 2029”.

22                 (b) STATE GRANTS FOR PROTECTION AND ADVOCACY  
23     SERVICES.—Section 1253(l) of the Public Health Service  
24     Act (42 U.S.C. 300d-53(l)) is amended by striking “2020  
25     through 2024” and inserting “2025 through 2029”.

1 **SEC. 4. REPORT TO CONGRESS.**

2       Not later than 2 years after the date of enactment of  
3 this Act, the Secretary of Health and Human Services (re-  
4 ferred to in this Act as the “Secretary”) shall submit to  
5 the Committee on Health, Education, Labor, and Pensions  
6 of the Senate and the Committee on Energy and Commerce  
7 of the House of Representatives a report that contains—

8             (1) an overview of populations who may be at  
9 higher risk for traumatic brain injury, such as indi-  
10 viduals affected by domestic violence or sexual assault  
11 and public safety officers as defined in section 1204  
12 of the Omnibus Crime Control and Safe Streets Act  
13 of 1968 (34 U.S.C. 10284);

14             (2) an outline of existing surveys and activities  
15 of the Centers for Disease Control and Prevention on  
16 traumatic brain injuries and any steps the agency  
17 has taken to address gaps in data collection related  
18 to such higher risk populations, which may include  
19 leveraging surveys such as the National Intimate  
20 Partner and Sexual Violence Survey to collect data on  
21 traumatic brain injuries;

22             (3) an overview of any outreach or education ef-  
23 forts to reach such higher risk populations; and

24             (4) any challenges associated with reaching such  
25 higher risk populations.

1   **SEC. 5. STUDY ON LONG-TERM SYMPTOMS OR CONDITIONS**2                   **RELATED TO TRAUMATIC BRAIN INJURY.**

3         (a) *IN GENERAL.*—The Secretary, in consultation with  
4   stakeholders and the heads of other relevant Federal depart-  
5   ments and agencies, as appropriate, shall conduct, either  
6   directly or through a contract with a nonprofit private enti-  
7   ty, a study to—

8                   (1) examine the incidence and prevalence of  
9   long-term symptoms or conditions in individuals who  
10   have experienced a traumatic brain injury;

11                  (2) examine any correlations between traumatic  
12   brain injury and increased risk of other conditions,  
13   such as dementia and mental health conditions;

14                  (3) assess existing services available for individ-  
15   uals with such long-term symptoms or conditions;  
16   and

17                  (4) identify any gaps in research related to such  
18   long-term symptoms or conditions of individuals who  
19   have experienced a traumatic brain injury.

20         (b) *PUBLIC REPORT.*—Not later than 2 years after the  
21   date of enactment of this Act, the Secretary shall make pub-  
22   licly available a report on the study conducted under sub-  
23   section (a).



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**A BILL**

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SEPTEMBER 12, 2024

Reported with an amendment