

109TH CONGRESS
2^D SESSION

H. R. 1554

AN ACT

To enhance and further research into paralysis and to improve rehabilitation and the quality of life for persons living with paralysis and other physical disabilities, 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,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Christopher and Dana
3 Reeve Quality of Life for Persons with Paralysis Act”.

4 **SEC. 2. PROGRAMS TO IMPROVE QUALITY OF LIFE FOR**
5 **PERSONS WITH PARALYSIS AND OTHER**
6 **PHYSICAL DISABILITIES.**

7 (a) IN GENERAL.—The Secretary of Health and
8 Human Services (in this Act referred to as the “Sec-
9 retary”), acting through the Director of the Centers for
10 Disease Control and Prevention, may study the unique
11 health challenges associated with paralysis and other phys-
12 ical disabilities and carry out projects and interventions
13 to improve the quality of life and long-term health status
14 of persons with paralysis and other physical disabilities.
15 The Secretary may carry out such projects directly and
16 through awards of grants or contracts.

17 (b) CERTAIN ACTIVITIES.—Activities under sub-
18 section (a) may include—

19 (1) the development of a national paralysis and
20 physical disability quality-of-life action plan, to pro-
21 mote health and wellness in order to enhance full
22 participation, independent living, self-sufficiency,
23 and equality of opportunity in partnership with vol-
24 untary health agencies focused on paralysis and
25 other physical disabilities, to be carried out in co-
26 ordination with the State-based Comprehensive Pa-

1 ralysis and Other Physical Disability Quality of Life
2 Program of the Centers for Disease Control and
3 Prevention;

4 (2) support for programs to disseminate infor-
5 mation involving care and rehabilitation options and
6 quality-of-life grant programs supportive of commu-
7 nity-based programs and support systems for per-
8 sons with paralysis and other physical disabilities;

9 (3) in collaboration with other centers and na-
10 tional voluntary health agencies, the establishment
11 of a hospital-based registry, and the conduct of rel-
12 evant population-based research, on motor disability
13 (including paralysis); and

14 (4) the development of comprehensive, unique,
15 and innovative programs, services, and demonstra-
16 tions within existing State-based disability and
17 health programs of the Centers for Disease Control
18 and Prevention which are designed to support and
19 advance quality-of-life programs for persons living
20 with paralysis and other physical disabilities focus-
21 ing on—

22 (A) caregiver education;

23 (B) physical activity;

24 (C) education and awareness programs for
25 health care providers;

1 (D) prevention of secondary complications;

2 (E) home- and community-based interven-
3 tions;

4 (F) coordination of services and removal of
5 barriers that prevent full participation and inte-
6 gration into the community; and

7 (G) recognition of the unique needs of un-
8 derserved populations.

9 (c) GRANTS.—In carrying out subsection (a), the Sec-
10 retary may award grants in accordance with the following:

11 (1) To State and local health and disability
12 agencies for the purpose of—

13 (A) establishing paralysis registries for the
14 support of relevant population-based research;

15 (B) developing comprehensive paralysis
16 and other physical disability action plans and
17 activities focused on the items listed in sub-
18 section (b)(4);

19 (C) assisting State-based programs in es-
20 tablishing and implementing partnerships and
21 collaborations that maximize the input and sup-
22 port of people with paralysis and other physical
23 disabilities and their constituent organizations;

1 (D) coordinating paralysis and physical
2 disability activities with existing State-based
3 disability and health programs;

4 (E) providing education and training op-
5 portunities and programs for health profes-
6 sionals and allied caregivers; and

7 (F) developing, testing, evaluating, and
8 replicating effective intervention programs to
9 maintain or improve health and quality of life.

10 (2) To nonprofit private health and disability
11 organizations for the purpose of—

12 (A) disseminating information to the pub-
13 lic;

14 (B) improving access to services for per-
15 sons living with paralysis and other physical
16 disabilities and their caregivers;

17 (C) testing model intervention programs to
18 improve health and quality of life; and

19 (D) coordinating existing services with
20 State-based disability and health programs.

21 (d) COORDINATION OF ACTIVITIES.—The Secretary
22 shall ensure that activities under this section are coordi-
23 nated as appropriate with other activities of the Public
24 Health Service.

1 (e) REPORT TO CONGRESS.—Not later than Decem-
2 ber 1, 2007, the Secretary shall submit to the Congress
3 a report describing the results of the study under sub-
4 section (a) and, as applicable, the national plan developed
5 under subsection (b)(1).

6 (f) AUTHORIZATION OF APPROPRIATIONS.—For the
7 purpose of carrying out this section, there is authorized
8 to be appropriated in the aggregate \$25,000,000 for the
9 fiscal years 2007 through 2010.

10 **SEC. 3. SENSE OF CONGRESS.**

11 It is the sense of the Congress that—

12 (1) as science and research have advanced, so
13 too has the need to increase strategic planning
14 across the National Institutes of Health to identify
15 research that is important to the advancement of
16 biomedical science; and

17 (2) research involving collaboration among the
18 national research institutes and national centers of
19 the National Institutes of Health is crucial for ad-
20 vancing research on paralysis and thereby improving

- 1 rehabilitation and the quality of life for persons liv-
- 2 ing with paralysis and other physical disabilities.

Passed the House of Representatives December 9
(legislative day, December 8), 2006.

Attest:

Clerk.

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