Calendar No. 317

110TH CONGRESS 1ST SESSION



[Report No. 110-140]

To provide for the expansion and improvement of traumatic brain injury programs.

IN THE SENATE OF THE UNITED STATES

March 7, 2007

Mr. HATCH (for himself, Mr. KENNEDY, Mr. DURBIN, Mrs. CLINTON, Mr. BROWN, Mr. CRAIG, Mr. WHITEHOUSE, Mr. INOUYE, Mr. REED, Mr. HARKIN, Mr. DODD, Mr. LAUTENBERG, Mr. OBAMA, Mr. BINGAMAN, Mr. JOHNSON, Mrs. MURRAY, Mr. BIDEN, Mr. ENZI, Ms. MIKULSKI, and Mr. SANDERS) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

August 1, 2007

Reported by Mr. KENNEDY, with an amendment

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

A BILL

To provide for the expansion and improvement of traumatic brain injury programs.

- 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 eited as the "Reauthorization of the Traumatic Brain Injury Act". 3 4 SEC. 2. CONFORMING AMENDMENTS RELATING TO RE-5 STRUCTURING. 6 Part J of title III of the Public Health Service Act (42 U.S.C. 280b et seq.) is amended— 7 8 (1) by redesignating the section 393B (42) 9 U.S.C. 280b-1c) relating to the use of allotments for 10 rape prevention education, as section 393A and mov-11 ing such section so that it follows section 393; 12 (2) by redesignating existing section 393A (42) 13 U.S.C. 280b-1b) relating to prevention of traumatic 14 brain injury, as section 393B; and 15 (3) by redesignating the section 393B (42) 16 U.S.C. 280b-1d) relating to traumatic brain injury 17 registries, as section 393C. 18 SEC. 3. TRAUMATIC BRAIN INJURY PROGRAMS OF THE 19 **CENTERS FOR DISEASE CONTROL AND PRE-**20 **VENTION.** 21 (a) PREVENTION OF TRAUMATIC BRAIN INJURY. 22 Clause (ii) of section 393B(b)(3)(A) of the Public Health Service Act, as so redesignated, (42 U.S.C. 280b-1b) is 23 amended by striking "from hospitals and trauma centers" 24 and inserting "from hospitals and emergency depart-25 26 ments".

•S 793 RS

2

(b) NATIONAL PROGRAM FOR TRAUMATIC BRAIN IN JURY SURVEILLANCE AND REGISTRIES.—Section 393C of
 the Public Health Service Act, as so redesignated, (42
 U.S.C. 280b et seq.) is amended—

5 (1) in the section heading, by inserting "SUR6 VEILLANCE AND" after "NATIONAL PROGRAM
7 FOR TRAUMATIC BRAIN INJURY";

(2) by striking "(a) IN GENERAL.—"; and 8 9 (3) in the matter preceding paragraph (1), by striking "may make grants" and all that follows 10 through "to collect data concerning-" and inserting 11 12 "may make grants to States or their designees to 13 develop or operate the State's traumatic brain injury 14 surveillance system or registry to determine the inci-15 dence and prevalence of traumatic brain injury and 16 related disability, to ensure the uniformity of report-17 ing under such system or registry, to link individuals 18 with traumatic brain injury to services and supports, 19 and to link such individuals with academic institu-20 tions to conduct applied research that will support 21 the development of such surveillance systems and 22 registries as may be necessary. A surveillance system 23 or registry under this section shall provide for the collection of data concerning-". 24

1 SEC. 4. STUDY ON TRAUMATIC BRAIN INJURY.

2 Part J of title III of the Public Health Service Act
3 (42 U.S.C. 280b et seq.) is amended by inserting after
4 section 393C the following:

5 "SEC. 393C-1. STUDY ON TRAUMATIC BRAIN INJURY.

6 "(a) STUDY.—The Secretary, acting through the Di-7 rector of the Centers for Disease Control and Prevention 8 with respect to paragraph (1) and the Director of the Na-9 tional Institutes of Health with respect to paragraphs (2) 10 and (3), shall conduct a study with respect to traumatic 11 brain injury for the purpose of carrying out the following: 12 "(1) In collaboration with appropriate State

- 13 and local health-related agencies—
- "(A) determining the incidence of trau-14 matie brain injury and prevalence of traumatie 15 16 brain injury related disability and the elinical 17 aspects of the disability in all age groups and 18 racial and ethnic minority groups in the general 19 population of the United States, including insti-20 tutional settings, such as nursing homes, cor-21 rectional facilities, psychiatric hospitals, child 22 eare facilities, and residential institutes for peo-23 ple with developmental disabilities; and

24 <u>"(B) reporting national trends in trau-</u>
25 matic brain injury.

4

1	${(2)}$ Identifying common therapeutic interven-
2	tions which are used for the rehabilitation of individ-
3	uals with such injuries, and, subject to the avail-
4	ability of information, including an analysis of—
5	${(A)}$ the effectiveness of each such inter-
6	vention in improving the functioning, including
7	return to work or school and community par-
8	ticipation, of individuals with brain injuries;
9	"(B) the comparative effectiveness of inter-
10	ventions employed in the course of rehabilita-
11	tion of individuals with brain injuries to achieve
12	the same or similar elinical outcome; and
13	${(C)}$ the adequacy of existing measures of
14	outcomes and knowledge of factors influencing
15	differential outcomes.
16	"(3) Identifying interventions and therapies
17	that can prevent or remediate the development of
18	secondary neurologic conditions related to traumatic
19	brain injury.
20	${}$ (4) Developing practice guidelines for the re-
21	habilitation of traumatic brain injury at such time
22	as appropriate scientific research becomes available.
23	"(b) DATES CERTAIN FOR REPORTS.—Not later than
24	3 years after the date of the enactment of the Reauthor-
25	ization of the Traumatic Brain Injury Act, the Secretary

shall submit to the Congress a report describing findings
 made as a result of carrying out subsection (a).

3 "(c) DEFINITION. For purposes of this section, the 4 term 'traumatic brain injury' means an acquired injury 5 to the brain. Such term does not include brain dysfunction 6 caused by congenital or degenerative disorders, nor birth 7 trauma, but may include brain injuries caused by anoxia 8 due to trauma. The Secretary may revise the definition 9 of such term as the Secretary determines necessary.".

10 SEC. 5. TRAUMATIC BRAIN INJURY PROGRAMS OF THE NA 11 TIONAL INSTITUTES OF HEALTH.

12 Section 1261 of the Public Health Service Act (42)
13 U.S.C. 300d-61) is amended—

14 (1) in subparagraph (D) of subsection (d)(4),
15 by striking "head brain injury" and inserting "brain
16 injury"; and

17 (2) in subsection (i), by inserting ", and such
18 sums as may be necessary for each of fiscal years
19 2008 through 2011" before the period at the end.

 20
 SEC. 6. TRAUMATIC BRAIN INJURY PROGRAMS OF THE

 21
 HEALTH RESOURCES AND SERVICES ADMIN

 22
 ISTRATION.

23 (a) STATE GRANTS FOR DEMONSTRATION PROJECTS
24 REGARDING TRAUMATIC BRAIN INJURY.—Section 1252

of the Public Health Service Act (42 U.S.C. 300d-52) is
 amended—

- 3 (1) in subsection (a)—
- 4(A) by striking "may make grants to5States" and inserting "may make grants to6States and American Indian consortia"; and

7 (B) by striking "health and other services"
8 and inserting "rehabilitation and other serv9 ices";

10 (2) in subsection (b)—

11(A) in paragraphs(1), (3)(A)(i),12(3)(A)(iii), and (3)(A)(iv), by striking the term13"State" each place such term appears and in-14serting the term "State or American Indian15consortium"; and

16 (B) in paragraph (2), by striking "ree17 ommendations to the State" and inserting "ree18 ommendations to the State or American Indian
19 consortium";

20 (3) in subsection (c), by striking the term
21 "State" each place such term appears and inserting
22 "State or American Indian consortium";

23 (4) in subsection (e), by striking "A State that
24 received" and all that follows through the period and
25 inserting "A State or American Indian consortium

1	that received a grant under this section prior to the
2	date of the enactment of the Reauthorization of the
3	Traumatic Brain Injury Act may complete the ac-
4	tivities funded by the grant.";
5	(5) in subsection (f) —
6	(A) in the subsection heading, by inserting
7	"AND AMERICAN INDIAN CONSORTIUM" after
8	"STATE";
9	(B) in paragraph (1) in the matter pre-
10	$\frac{\text{ceding subparagraph }(A)}{(A)}$, paragraph $(1)(E)$,
11	paragraph (2)(A), paragraph (2)(B), paragraph
12	(3) in the matter preceding subparagraph (A) ,
13	paragraph (3)(E), and paragraph (3)(F), by
14	striking the term "State" each place such term
15	appears and inserting "State or American In-
16	dian consortium'';
17	(C) in clause (ii) of paragraph (1)(A), by
18	striking "children and other individuals" and
19	inserting "children, youth, and adults"; and
20	(D) in subsection (h)—
21	(i) by striking "Not later than 2 years
22	after the date of the enactment of this sec-
23	tion, the Secretary" and inserting "Not
24	less than bi-annually, the Secretary"; and

1	(ii) by inserting "section 1253, and
2	section 1254," after "programs established
3	under this section,";
4	(6) by amending subsection (i) to read as fol-
5	lows:
6	"(i) DEFINITIONS.—For purposes of this section:
7	"(1) The terms 'American Indian consortium'
8	and 'State' have the meanings given to those terms
9	in section 1253.
10	${}$ (2) The term 'traumatic brain injury' means
11	an acquired injury to the brain. Such term does not
12	include brain dysfunction caused by congenital or
13	degenerative disorders, nor birth trauma, but may
14	include brain injuries caused by anoxia due to near
15	drowning. The Secretary may revise the definition of
16	such term as the Secretary determines necessary,
17	after consultation with States and other appropriate
18	public or nonprofit private entities."; and
19	(7) in subsection (j), by inserting ", and such
20	sums as may be necessary for each of the fiscal
21	years 2008 through 2011" before the period.
22	(b) STATE GRANTS FOR PROTECTION AND ADVO-
23	CACY SERVICES.—Section 1253 of the Public Health Serv-
24	ice Act (42 U.S.C. 300d–53) is amended—

9

1	(1) in subsections (d) and (e), by striking the
2	term "subsection (i)" each place such term appears
3	and inserting "subsection (1)";
4	(2) in subsection (g) , by inserting "each fiscal
5	year not later than October 1," before "the Adminis-
6	trator shall pay'';
7	(3) by redesignating subsections (i) and (j) as
8	subsections (1) and (m), respectively;
9	(4) by inserting after subsection (h) the fol-
10	lowing:
11	"(i) DATA COLLECTION.—The Administrator of the
12	Health Resources and Services Administration and the
13	Commissioner of the Administration on Developmental
14	Disabilities shall enter into an agreement to coordinate the
15	collection of data by the Administrator and the Commis-
16	sioner regarding protection and advocacy services.
17	"(j) TRAINING AND TECHNICAL ASSISTANCE.—
18	"(1) GRANTS.—For any fiscal year for which
19	the amount appropriated to carry out this section is
20	\$6,000,000 or greater, the Administrator shall use 2
21	percent of such amount to make a grant to an eligi-
22	ble national association for providing for training
23	and technical assistance to protection and advocacy
24	systems.

1 <u>"(2) DEFINITION.</u>—In this subsection, the term 2 <u>'eligible national association' means a national asso-</u> 3 <u>ciation with demonstrated experience in providing</u> 4 <u>training and technical assistance to protection and</u> 5 <u>advocacy systems.</u>

6 "(k) SYSTEM AUTHORITY.—In providing services 7 under this section, a protection and advocacy system shall 8 have the same authorities, including access to records, as 9 such system would have for purposes of providing services 10 under subtitle C of the Developmental Disabilities Assist-11 ance and Bill of Rights Act of 2000."; and

12 (5) in subsection (l) (as redesignated by this
13 subsection) by striking "2005" and inserting
14 "2011".

15 SECTION 1. SHORT TITLE.

16 This Act may be cited as the "Reauthorization of the
17 Traumatic Brain Injury Act".

18 SEC. 2. CONFORMING AMENDMENTS RELATING TO RE-19STRUCTURING.

20 Part J of title III of the Public Health Service Act
21 (42 U.S.C. 280b et seq.) is amended—

(1) by redesignating the section 393B (42 U.S.C.
23 280b-1c) relating to the use of allotments for rape
24 prevention education, as section 393A and moving
25 such section so that it follows section 393;

	1Z
1	(2) by redesignating existing section $393A$ (42)
2	U.S.C. 280b–1b) relating to prevention of traumatic
3	brain injury, as section 393B; and
4	(3) by redesignating the section $393B$ (42 U.S.C.
5	280b–1d) relating to traumatic brain injury reg-
6	istries, as section 393C.
7	SEC. 3. TRAUMATIC BRAIN INJURY PROGRAMS OF THE CEN-
8	TERS FOR DISEASE CONTROL AND PREVEN-
9	TION.
10	(a) Prevention of Traumatic Brain Injury.—
11	Clause (ii) of section $393B(b)(3)(A)$ of the Public Health
12	Service Act, as so redesignated, (42 U.S.C. 280b–1b) is
13	amended by striking "from hospitals and trauma centers"
14	and inserting "from hospitals and emergency departments".
15	(b) NATIONAL PROGRAM FOR TRAUMATIC BRAIN IN-
16	JURY SURVEILLANCE AND REGISTRIES.—Section 393C of
17	the Public Health Service Act, as so redesignated, (42
18	U.S.C. 280b et seq.) is amended—
19	(1) in the section heading, by inserting "SUR-
20	VEILLANCE AND" after "NATIONAL PROGRAM
21	FOR TRAUMATIC BRAIN INJURY"; and
22	(2) in subsection (a), in the matter preceding
23	paragraph (1), by striking "may make grants" and
24	all that follows through "to collect data concerning—
25	" and inserting "may make grants to States or their

1 designees to develop or operate the State's traumatic 2 brain injury surveillance system or registry to determine the incidence and prevalence of traumatic brain 3 4 injury and related disability, to ensure the uni-5 formity of reporting under such system or registry, to 6 link individuals with traumatic brain injury to serv-7 ices and supports, and to link such individuals with 8 academic institutions to conduct applied research that 9 will support the development of such surveillance sys-10 tems and registries as may be necessary. A surveil-11 lance system or registry under this section shall pro-12 vide for the collection of data concerning—".

(c) REPORT.—Section 393C of the Public Health Service Act (as so redesignated) is amended by adding at the
end the following:

16 "(b) Not later than 18 months after the date of enactment of the Reauthorization of the Traumatic Brain Injury 17 Act, the Secretary, acting through the Director of the Cen-18 ters for Disease Control and Prevention and the Director 19 of the National Institutes of Health and in consultation 20 21 with the Secretary of Defense and the Secretary of Veterans 22 Affairs, shall submit to the relevant committees of Congress 23 a report that contains the findings derived from an evalua-24 tion concerning activities and procedures that can be imple-25 mented by the Centers for Disease Control and Prevention,

the Department of Defense, and the Department of Veterans 1 2 Affairs to improve the collection and dissemination of compatible epidemiological studies on the incidence and preva-3 4 lence of traumatic brain injury in the military and vet-5 erans populations who return to civilian life. The report 6 shall include recommendations on the manner in which 7 such agencies can further collaborate on the development 8 and improvement of traumatic brain injury diagnostic tools and treatments.". 9

10 SEC. 4. STUDY ON TRAUMATIC BRAIN INJURY.

11 Part J of title III of the Public Health Service Act
12 (42 U.S.C. 280b et seq.) is amended by inserting after sec13 tion 393C the following:

14 "SEC. 393C-1. STUDY ON TRAUMATIC BRAIN INJURY.

"(a) STUDY.—The Secretary, acting through the Director of the Centers for Disease Control and Prevention with
respect to paragraph (1) and the Director of the National
Institutes of Health with respect to paragraphs (2) and (3),
shall conduct a study with respect to traumatic brain injury for the purpose of carrying out the following:

- 21 "(1) In collaboration with appropriate State and
 22 local health-related agencies—
- 23 "(A) determining the incidence of traumatic
 24 brain injury and prevalence of traumatic brain
 25 injury related disability and the clinical aspects

1	of the disability in all age groups and racial and
2	ethnic minority groups in the general population
3	of the United States, including institutional set-
4	tings, such as nursing homes, correctional facili-
5	ties, psychiatric hospitals, child care facilities,
6	and residential institutes for people with devel-
7	opmental disabilities; and
8	``(B) reporting national trends in traumatic
9	brain injury.
10	"(2) Identifying common therapeutic interven-
11	tions which are used for the rehabilitation of individ-
12	uals with such injuries, and, subject to the avail-
13	ability of information, including an analysis of—
14	``(A) the effectiveness of each such interven-
15	tion in improving the functioning, including re-
16	turn to work or school and community partici-
17	pation, of individuals with brain injuries;
18	``(B) the comparative effectiveness of inter-
19	ventions employed in the course of rehabilitation
20	of individuals with brain injuries to achieve the
21	same or similar clinical outcome; and
22	``(C) the adequacy of existing measures of
23	outcomes and knowledge of factors influencing
24	differential outcomes.

"(3) Identifying interventions and therapies that
 can prevent or remediate the development of sec ondary neurologic conditions related to traumatic
 brain injury.

5 "(4) Developing practice guidelines for the reha6 bilitation of traumatic brain injury at such time as
7 appropriate scientific research becomes available.

8 "(b) DATES CERTAIN FOR REPORTS.—Not later than 9 3 years after the date of the enactment of the Reauthoriza-10 tion of the Traumatic Brain Injury Act, the Secretary shall 11 submit to the Congress a report describing findings made 12 as a result of carrying out subsection (a).

13 "(c) DEFINITION.—For purposes of this section, the term 'traumatic brain injury' means an acquired injury 14 15 to the brain. Such term does not include brain dysfunction caused by congenital or degenerative disorders, nor birth 16 trauma, but may include brain injuries caused by anoxia 17 due to trauma including near drowning. The Secretary 18 19 may revise the definition of such term as the Secretary de-20 termines necessary.".

21 SEC. 5. TRAUMATIC BRAIN INJURY PROGRAMS OF THE NA22 TIONAL INSTITUTES OF HEALTH.

23 Section 1261 of the Public Health Service Act (42
24 U.S.C. 300d-61) is amended—

1	(1) in subsection $(b)(2)$, by striking "Labor and
2	Human Resources" and inserting "Health, Edu-
3	cation, Labor, and Pensions";
4	(2) in subparagraph (D) of subsection $(d)(4)$, by
5	striking 'head brain injury" and inserting 'brain in-
6	jury"; and
7	(3) in subsection (i), by inserting ", and such
8	sums as may be necessary for each of fiscal years
9	2008 through 2011" before the period at the end.
10	SEC. 6. TRAUMATIC BRAIN INJURY PROGRAMS OF THE
11	HEALTH RESOURCES AND SERVICES ADMIN-
12	ISTRATION.
13	(a) STATE GRANTS FOR DEMONSTRATION PROJECTS
14	Regarding Traumatic Brain Injury.—Section 1252 of
15	the Public Health Service Act (42 U.S.C. 300d-52) is
16	amended—
17	(1) in subsection (a)—
18	(A) by striking "may make grants to
19	States" and inserting "may make grants to
20	States and American Indian consortia"; and
21	(B) by striking "health and other services"
22	and inserting "rehabilitation and other services";
23	(2) in subsection (b)—
24	(A) in paragraphs (1), $(3)(A)(i)$,
25	(3)(A)(iii), and $(3)(A)(iv)$, by striking the term

"State" each place such term appears and in-1 2 serting the term "State or American Indian consortium"; and 3 4 (B) in paragraph (2), by striking "rec-5 ommendations to the State" and inserting "rec-6 ommendations to the State or American Indian 7 consortium": 8 (3) in subsection (c), by striking the term "State" each place such term appears and inserting 9 "State or American Indian consortium": 10 11 (4) in subsection (e), by striking "A State that 12 received" and all that follows through the period and 13 inserting "A State or American Indian consortium 14 that received a grant under this section prior to the 15 date of the enactment of the Reauthorization of the 16 Traumatic Brain Injury Act may complete the activi-17 ties funded by the grant."; 18 (5) in subsection (f)— 19 (A) in the subsection heading, by inserting "AND AMERICAN INDIAN CONSORTIUM" after 20 *"STATE"*: 21

(B) in paragraph (1) in the matter preceding subparagraph (A), paragraph (1)(E),
paragraph (2)(A), paragraph (2)(B), paragraph
(3) in the matter preceding subparagraph (A),

1	paragraph (3)(E), and paragraph (3)(F), by
2	striking the term "State" each place such term
3	appears and inserting "State or American In-
4	dian consortium";
5	(C) in clause (ii) of paragraph (1)(A), by
6	striking "children and other individuals" and
7	inserting "children, youth, and adults"; and
8	(D) in subsection (h)—
9	(i) by striking "Not later than 2 years
10	after the date of the enactment of this sec-
11	tion, the Secretary" and inserting "Not less
12	than biennially, the Secretary";
13	(ii) by striking "Commerce of the
14	House of Representatives, and to the Com-
15	mittee on Labor and Human Resources"
16	and inserting "Energy and Commerce of the
17	House of Representatives, and to the Com-
18	mittee on Health, Education, Labor, and
19	Pensions"; and
20	(iii) by inserting "and section 1253"
21	after "programs established under this sec-
22	<i>tion,";</i>
23	(6) by amending subsection (i) to read as fol-
24	lows:
25	"(i) DEFINITIONS.—For purposes of this section:

"(1) The terms 'American Indian consortium'
 and 'State' have the meanings given to those terms in
 section 1253.

4 "(2) The term 'traumatic brain injury' means 5 an acquired injury to the brain. Such term does not 6 include brain dysfunction caused by congenital or de-7 generative disorders, nor birth trauma, but may in-8 clude brain injuries caused by anoxia due to trauma. 9 The Secretary may revise the definition of such term 10 as the Secretary determines necessary, after consulta-11 tion with States and other appropriate public or non-12 profit private entities."; and

13 (7) in subsection (j), by inserting ", and such
14 sums as may be necessary for each of the fiscal years
15 2008 through 2011" before the period.

(b) STATE GRANTS FOR PROTECTION AND ADVOCACY
SERVICES.—Section 1253 of the Public Health Service Act
(42 U.S.C. 300d-53) is amended—

19 (1) in subsections (d) and (e), by striking the
20 term "subsection (i)" each place such term appears
21 and inserting "subsection (l)";

(2) in subsection (g), by inserting "each fiscal
year not later than October 1," before "the Administrator shall pay";

(3) by redesignating subsections (i) and (j) as
 subsections (l) and (m), respectively;

3 (4) by inserting after subsection (h) the fol4 lowing:

5 "(i) DATA COLLECTION.—The Administrator of the
6 Health Resources and Services Administration and the
7 Commissioner of the Administration on Developmental Dis8 abilities shall enter into an agreement to coordinate the col9 lection of data by the Administrator and the Commissioner
10 regarding protection and advocacy services.

11 "(j) TRAINING AND TECHNICAL ASSISTANCE.—

12 "(1) GRANTS.—For any fiscal year for which the 13 amount appropriated to carry out this section is 14 \$6,000,000 or greater, the Administrator shall use 2 15 percent of such amount to make a grant to an eligible 16 national association for providing for training and 17 technical assistance to protection and advocacy sys-18 tems.

19 "(2) DEFINITION.—In this subsection, the term
20 'eligible national association' means a national asso21 ciation with demonstrated experience in providing
22 training and technical assistance to protection and
23 advocacy systems.

24 "(k) SYSTEM AUTHORITY.—In providing services
25 under this section, a protection and advocacy system shall

have the same authorities, including access to records, as
 such system would have for purposes of providing services
 under subtitle C of the Developmental Disabilities Assist ance and Bill of Rights Act of 2000."; and

5 (5) in subsection (l) (as redesignated by this sub6 section) by striking "2005" and inserting "2011".
7 SEC. 7. GAO STUDY WITH RESPECT TO MEMBERS OF THE

ARMED FORCES.

8

9 (a) IN GENERAL.—The Comptroller General of the United States shall conduct a national study regarding 10 whether, and, if so, to what extent, members of the armed 11 forces who have acquired a disability from serving in Oper-12 ation Enduring Freedom and Operation Iraqi Freedom are 13 being reintegrated into their communities. Such study shall 14 15 specifically include an examination of factors affecting the reintegration of such members of the armed forces who have 16 17 acquired a traumatic brain injury into their communities, including an analysis of— 18

19 (1) the unavailability of suitable employment,
20 housing, and transportation;

21 (2) the existence, availability, and capacity of
22 community care programs; and

23 (3) the extent to which there is coordination of
24 benefits for these men and women.

(b) REPORT.—Not later than 180 days after the date 1 2 of enactment of this Act, the Comptroller General of the 3 United States shall submit to the Committee on Veterans' Affairs and the Committee on Health, Education, Labor, 4 and Pensions of the Senate and the Committee on Veterans' 5 Affairs and the Committee on Education and the Workforce 6 of the House of Representatives, a report summarizing the 7 results of the study conducted under subsection (a). 8

Calendar No. 317

110TH CONGRESS S. 793 IST SESSION [Report No. 110-140]

A BILL

To provide for the expansion and improvement of traumatic brain injury programs.

August 1, 2007

Reported with an amendment