

MISSING ALZHEIMER'S DISEASE PATIENT ALERT
PROGRAM REAUTHORIZATION OF 2008

SEPTEMBER 15, 2008.—Committed to the Committee of the Whole House on the
State of the Union and ordered to be printed

Mr. CONYERS, from the Committee on the Judiciary,
submitted the following

R E P O R T

[To accompany H.R. 6503]

[Including cost estimate of the Congressional Budget Office]

The Committee on the Judiciary, to whom was referred the bill (H.R. 6503) to amend the Violent Crime Control and Law Enforcement Act of 1994 to reauthorize the Missing Alzheimer's Disease Patient Alert Program, having considered the same, reports favorably thereon without amendment and recommends that the bill do pass.

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PURPOSE AND SUMMARY

H.R. 6503 amends the Violent Crime Control and Law Enforcement Act of 1994 to reauthorize and modify the Missing Alz-

heimer's Disease Patient Alert Program, an existing grant program. It authorizes the Attorney General to award competitive grants to nonprofit organizations for planning, designing, establishing, and operating locally based, proactive programs to protect and locate missing patients with Alzheimer's disease and related dementias, and other missing elderly individuals.

BACKGROUND AND NEED FOR THE LEGISLATION

Thousands of vulnerable older adults go missing each year as a result of dementia, diminished capacity, foul play, or other unusual circumstances. The Alzheimer's Foundation of America estimates that over five million Americans suffer from Alzheimer's disease, and that sixty percent of these are likely to wander from their homes. Alzheimer's disease and other dementia-related illnesses often leave their victims disoriented and confused, and unable to find their way home. According to the Alzheimer's Association, up to 50% of wanderers risk serious illness, injury, or death if not found within 24 hours.¹ The problem can be exacerbated greatly by national disasters, such as Hurricane Katrina, that can, in a matter of hours, increase the number of missing persons by the thousands.

The Missing Alzheimer's Disease Patient Alert Program, administered by the Department of Justice, is the only Federal program that currently provides grant funding to locate vulnerable elderly individuals who go missing. Authorization for this program ceased in 1998, though Congress has continued to appropriate some monies for it through fiscal year 2008, when it appropriated \$940,000.²

HEARINGS

The Subcommittee on Crime, Terrorism, and Homeland Security held 1 day of hearings, on July 15, 2008, on the problem of elders who go missing as a result of dementia and diminished capacity. Testimony was received from Representatives Lloyd Doggett (D-TX), Gus Bilirakis (R-FL), and Sue Wilkins Myrick (R-NC), with additional letters submitted by the Alzheimer's Foundation of America and Project Lifesaver. The Committee did not hold any hearings specifically on H.R. 6503.

COMMITTEE CONSIDERATION

On July 30, 2008, the Committee met in open session and ordered the bill H.R. 6503 favorably reported without amendment, by voice vote, a quorum being present.

COMMITTEE VOTES

In compliance with clause 3(b) of rule XIII of the Rules of the House of Representatives, the Committee advises that there were no recorded votes during the Committee's consideration of H.R. 6503.

¹ Alzheimer's Association, *Issue Kit: Public Policy Response to Wandering Behavior*, Washington Public Policy Office, Alzheimer's Association, Sept. 2006.

²H. Rept. 107-278 (FY 2002); H. Rept. 108-10 (FY 2003); H. Rept. 108-401 (FY 2004); H. Rept. 108-792 (FY 2005); H. Rept. 109-272 (FY 2006); P.L. 110-5 (FY 2007); U.S. House, Committee on Appropriations, Joint Explanatory Statement to Accompany FY 2008 Consolidated Appropriations Amendment to H.R. 2764 (P.L. 110-161), Division B (FY 2008).

COMMITTEE OVERSIGHT FINDINGS

In compliance with clause 3(c)(1) of rule XIII of the Rules of the House of Representatives, the Committee advises that the findings and recommendations of the Committee, based on oversight activities under clause 2(b)(1) of rule X of the Rules of the House of Representatives, are incorporated in the descriptive portions of this report.

NEW BUDGET AUTHORITY AND TAX EXPENDITURES

Clause 3(c)(2) of rule XIII of the Rules of the House of Representatives is inapplicable because this legislation does not provide new budgetary authority or increased tax expenditures.

CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

In compliance with clause 3(c)(3) of rule XIII of the Rules of the House of Representatives, the Committee sets forth, with respect to the bill, H.R. 6503, the following estimate and comparison prepared by the Director of the Congressional Budget Office under section 402 of the Congressional Budget Act of 1974:

U.S. CONGRESS,
CONGRESSIONAL BUDGET OFFICE,
Washington, DC, August 6, 2008.

Hon. JOHN CONYERS, Jr., *Chairman,*
Committee on the Judiciary,
House of Representatives, Washington, DC.

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for H.R. 6503, the Missing Alzheimer's Disease Patient Alert Program Reauthorization of 2008.

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Mark Grabowicz, who can be reached at 226-2860.

Sincerely,

PETER R. ORSZAG,
DIRECTOR.

Enclosure

cc: Honorable Lamar S. Smith.
Ranking Member

H.R. 6503—Missing Alzheimer's Disease Patient Alert Program Reauthorization Act of 2008.

SUMMARY

H.R. 6503 would authorize the appropriation of \$5 million annually over the 2009–2015 period for the Department of Justice to make grants to nonprofit organizations for programs to locate missing persons with Alzheimer's disease or similar conditions. Assuming appropriation of the authorized amounts, CBO estimates that implementing the bill would cost \$17 million over the 2009–2013 period, with remaining amounts spent in subsequent years. Enacting H.R. 6503 would not affect direct spending or revenues.

H.R. 6503 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act (UMRA)

and would not affect the budgets of state, local, or tribal governments.

ESTIMATED COST TO THE FEDERAL GOVERNMENT

The estimated budgetary impact of H.R. 6503 is shown in the following table. For this estimate, CBO assumes that the amounts authorized by the bill will be appropriated near the start of each fiscal year and that outlays will follow the historical rates of spending for similar activities. The costs of this legislation fall within budget function 750 (administration of justice).

	By Fiscal Year, in Millions of Dollars					
	2009	2010	2011	2012	2013	2006–2013
CHANGES IN SPENDING SUBJECT TO APPROPRIATION						
Authorization Level	5	5	5	5	5	25
Estimated Outlays	1	3	4	4	5	17

INTERGOVERNMENTAL AND PRIVATE-SECTOR IMPACT

H.R. 6503 contains no intergovernmental or private-sector mandates as defined in UMRA and would not affect the budgets of state, local, or tribal governments.

ESTIMATE PREPARED BY:

Federal Costs: Mark Grabowicz (226–2860)
 Impact on State, Local, and Tribal Governments: Melissa Merrell
 (225–3220)
 Impact on the Private Sector: MarDestinee C. Perez (226–2940)

ESTIMATE APPROVED BY:

Theresa Gullo
 Deputy Assistant Director for Budget Analysis

PERFORMANCE GOALS AND OBJECTIVES

The Committee states, pursuant to clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, that H.R. 6503 will authorize the Attorney General to award competitive grants to non-profit organizations for planning, designing, establishing, and operating locally based, proactive programs to protect and locate missing patients with Alzheimer’s disease and related dementias and other missing elderly individuals.

CONSTITUTIONAL AUTHORITY STATEMENT

Pursuant to clause 3(d)(1) of rule XIII of the Rules of the House of Representatives, the Committee finds the authority for this legislation in article I, section 8 of the Constitution.

ADVISORY ON EARMARKS

In accordance with clause 9 of rule XXI of the Rules of the House of Representatives, H.R. 6503 does not contain any congressional earmarks, limited tax benefits, or limited tariff benefits as defined in clause 9(d), 9(e), or 9(f) of rule XXI.

SECTION-BY-SECTION ANALYSIS

The following discussion describes the bill as reported by the Committee.

Sec. 1. Short title. Section 1 sets forth the short title of the bill as the “Missing Alzheimer’s Disease Patient Alert Reauthorization of 2008.”

Sec. 2. Reauthorization of the Missing Alzheimer’s Disease Patient Alert Program. Section 2 amends Section 240001 of the Violent Crime Control and Law Enforcement Act of 1994 (42 U.S.C. 14181). It directs the Attorney General to award competitive grants to nonprofit organizations for planning, designing, establishing, and operating local based, proactive programs to protect and locate missing patients with Alzheimer’s disease and related dementias and other missing elderly individuals.

Section 2 modifies the existing program by requiring competitive grants and by requiring the Attorney General to periodically solicit applications for grants by publishing application requests in the Federal Register and on the Department of Justice website. The Act requires the Attorney General to give preference to national nonprofit organizations that have a direct link to patients, and families of patients, with Alzheimer’s disease and related dementias. The section authorizes \$5,000,000 for each of the fiscal years 2009 through 2015.

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italics, existing law in which no change is proposed is shown in roman):

**VIOLENT CRIME CONTROL AND LAW ENFORCEMENT
ACT OF 1994**

* * * * *

**TITLE XXIV—PROTECTIONS FOR THE
ELDERLY**

SEC. 240001. MISSING ALZHEIMER’S DISEASE PATIENT ALERT PROGRAM.

[(a) GRANT.—The Attorney General shall, subject to the availability of appropriations, award a grant to an eligible organization to assist the organization in paying for the costs of planning, designing, establishing, and operating a Missing Alzheimer’s Disease Patient Alert Program, which shall be a locally based, proactive program to protect and locate missing patients with Alzheimer’s disease and related dementias.]

(a) GRANT.—*Subject to the availability of appropriations to carry out this section, the Attorney General, through the Bureau of Justice Assistance and in consultation with the Secretary of Health and Human Services, shall award competitive grants to nonprofit organizations to assist such organizations in paying for the costs of planning, designing, establishing, and operating locally based,*

proactive programs to protect and locate missing patients with Alzheimer's disease and related dementias and other missing elderly individuals.

(b) APPLICATION.—To be eligible to receive a *competitive* grant under subsection (a), an organization shall submit an application to the Attorney General at such time, in such manner, and containing such information as the Attorney General may require, including, at a minimum, an assurance that the organization will obtain and use assistance from private nonprofit organizations to support the program. *The Attorney General shall periodically solicit applications for grants under this section by publishing a request for applications in the Federal Register and by posting such a request on the website of the Department of Justice.*

[(c) ELIGIBLE ORGANIZATION.—The Attorney General shall award the grant described in subsection (a) to a national voluntary organization that has a direct link to patients, and families of patients, with Alzheimer's disease and related dementias.

[(d) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section—

- [(1) \$900,000 for fiscal year 1996;
- [(2) \$900,000 for fiscal year 1997; and
- [(3) \$900,000 for fiscal year 1998.]

(c) PREFERENCE.—*In awarding grants under subsection (a), the Attorney General shall give preference to national nonprofit organizations that have a direct link to patients, and families of patients, with Alzheimer's disease and related dementias.*

(d) AUTHORIZATION OF APPROPRIATIONS.—*There are authorized to be appropriated to carry out this section \$5,000,000 for each of the fiscal years 2009 through 2015.*

* * * * *