

COMMUNICATION FROM THE CLERK OF THE HOUSE

The SPEAKER pro tempore laid before the House the following communication from the Clerk of the House of Representatives:

OFFICE OF THE CLERK,
HOUSE OF REPRESENTATIVES,
Washington, DC, October 28, 2019.

Hon. NANCY PELOSI,
The Speaker, House of Representatives,
Washington, DC.

DEAR MADAM SPEAKER: Pursuant to the permission granted in Clause 2(h) of Rule II of the Rules of the U.S. House of Representatives, the Clerk received the following message from the Secretary of the Senate on October 28, 2019, at 12:27 p.m.:

That the Senate passed S. 2065.
That the Senate passed S. 2107.
With best wishes, I am,
Sincerely,

CHERYL L. JOHNSON.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair will postpone further proceedings today on motions to suspend the rules on which a recorded vote or the yeas and nays are ordered, or votes objected to under clause 6 of rule XX.

The House will resume proceedings on postponed questions at a later time.

DIGNITY IN AGING ACT OF 2019

Ms. BONAMICI. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4334) to amend the Older Americans Act of 1965 to authorize appropriations for fiscal years 2020 through 2024, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4334

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the “Dignity in Aging Act of 2019”.

(b) TABLE OF CONTENTS.—The table of contents of this Act is the following:

Sec. 1. Short title; table of contents.

TITLE I—ENSURING COLLABORATION AND PROMOTING INDEPENDENCE FOR OLDER INDIVIDUALS

Sec. 101. Person-centered, trauma-informed care.

Sec. 102. Vaccination.

Sec. 103. Functions of Assistant Secretary.

Sec. 104. Professional standards for nutrition official under Assistant Secretary.

Sec. 105. Interagency Coordinating Committee on Age-Friendly Communities.

Sec. 106. Technical assistance on age-friendly communities.

Sec. 107. Malnutrition.

Sec. 108. Coordination with resource centers.

Sec. 109. Arts education.

Sec. 110. Social determinants of health.

Sec. 111. Falls prevention and chronic disease self-management education.

Sec. 112. Extension of RAISE Family Caregivers Act.

Sec. 113. Support for socially-isolated older Americans.

Sec. 114. Increased focus of Assistant Secretary on health effects associated with social isolation.

Sec. 115. Advisory council on health effects associated with social isolation.

Sec. 116. Supportive services and senior centers.

Sec. 117. Demonstration projects.

Sec. 118. Younger onset Alzheimer's Disease.

Sec. 119. Priority for the senior community service employment program.

Sec. 120. Direct care workforce.

Sec. 121. National resource center for older individuals experiencing the long-term and adverse consequences of trauma.

Sec. 122. National Resource Center for Women and Retirement.

Sec. 123. Definition.

Sec. 124. Review of reports.

Sec. 125. Area plans.

Sec. 126. Addressing chronic pain management.

Sec. 127. Extension of the Supporting Grandparents Raising Grandchildren Act.

Sec. 128. Screening for suicide risk.

Sec. 129. Traumatic brain injury.

Sec. 130. Addressing public health emergencies and emerging health threats.

Sec. 131. Prevention of sexually transmitted diseases.

Sec. 132. Aging and Disability Resource Center.

TITLE II—EMPOWERING THE AGING NETWORK TO MEET THE NEEDS OF OLDER INDIVIDUALS

Sec. 201. National family caregiver support program cap.

Sec. 202. Minimum funding level for State administrative expenses.

Sec. 203. Culturally-appropriate, medically-tailored meals.

Sec. 204. Business acumen provisions and clarification regarding outside funding for area agencies on aging.

Sec. 205. Other practices.

Sec. 206. Caregiver assessments.

Sec. 207. Research and evaluation.

Sec. 208. Grant program for multigenerational collaboration.

TITLE III—STRENGTHENING PROTECTIONS FOR OLDER INDIVIDUALS

Sec. 301. State Long-Term Care Ombudsman Program minimum funding and maintenance of effort.

Sec. 302. State long-term care volunteer ombudsman representatives.

Sec. 303. Clarification regarding board and care facilities.

Sec. 304. Report on legal hotlines.

Sec. 305. Community outreach.

Sec. 306. Principles for person-directed services and supports during serious illness.

TITLE IV—MEETING THE NEEDS OF OLDER NATIVE AMERICANS

Sec. 401. Expanding supportive services for Native American aging programs.

Sec. 402. Enhancing capacity to support Native American aging programs.

TITLE V—MISCELLANEOUS

Sec. 501. Technical corrections.

Sec. 502. Authorization of appropriations; uses of funds.

Sec. 503. Hold harmless formula.

TITLE I—ENSURING COLLABORATION AND PROMOTING INDEPENDENCE FOR OLDER INDIVIDUALS

SEC. 101. PERSON-CENTERED, TRAUMA-INFORMED CARE.

Section 101(2) of the Older Americans Act of 1965 (42 U.S.C. 3001(2)) is amended by in-

serting “(including access to person-centered, trauma-informed care)” after “health”.

SEC. 102. VACCINATION.

Section 102(14) of the Older Americans Act of 1965 (42 U.S.C. 3002(14)) is amended—

(1) in subparagraph (B) by inserting “immunization status,” after “oral health,” and

(2) in subparagraph (D) by inserting “infectious disease, and vaccine preventable disease,” after “disease.”.

SEC. 103. FUNCTIONS OF ASSISTANT SECRETARY.

(a) REVIEW OF APPLICATIONS.—Section 202 of the Older Americans Act of 1965 (42 U.S.C. 3012) is amended—

(1) by amending subsection (a)(4) to read as follows:

“(4) administer the grants provided by this Act but not approve an application submitted by an applicant for a grant for a program for which such applicant previously received a grant unless the Assistant Secretary determines—

“(A) the program for which such application was submitted is operating effectively to achieve its stated purpose; and

“(B) such applicant complied with the assurances provided to the Assistant Secretary with the application for such previous grant; and”, and

(2) by adding at the end the following:

“(h) The Assistant Secretary shall publish, on an annual basis, a list of centers and demonstration projects funded under each title of the Act. The Assistant Secretary shall ensure that this information is also directly provided to States and area agencies on aging.”.

(b) ADDRESSING THE NEEDS OF OLDER INDIVIDUALS IN DISASTERS.—Section 202(a) of the Older Americans Act of 1965 (42 U.S.C. 3012(a)) is amended—

(1) in paragraph (30) by striking “and” at the end,

(2) in paragraph (31) by striking the period at the end and inserting “; and”, and

(3) by adding at the end the following:

“(32) provide technical assistance to and share best practices with States and area agencies on aging on how to collaborate and coordinate activities and develop long-range emergency preparedness plans with local and State emergency response agencies, relief organizations, local and State governments, federal agencies as appropriate, and any other institutions that have responsibility for disaster relief service delivery.”.

SEC. 104. PROFESSIONAL STANDARDS FOR NUTRITION OFFICIAL UNDER ASSISTANT SECRETARY.

Section 205(a)(2)(C)(ii) of the Older Americans Act of 1965 (42 U.S.C. 3016(a)(2)(C)(ii)) is amended to read as follows:

“(ii) be a registered dietitian or registered dietitian nutritionist.”.

SEC. 105. INTERAGENCY COORDINATING COMMITTEE ON AGE-FRIENDLY COMMUNITIES.

Section 203 of the Older Americans Act of 1965 (42 U.S.C. 3013) is amended—

(1) in subsection (b)—

(A) in paragraph (18) by striking “and” at the end,

(B) in subparagraph (19) by striking the period at the end, and inserting “, and”, and

(C) by adding at the end the following:

“(20) section 393D of the Public Health Service Act (42 U.S.C. 280b-1f), relating to safety of seniors.”, and

(2) in subsection (c)—

(A) in paragraph (1)—

(i) by striking “Aging” and inserting “Age-Friendly Communities”, and

(ii) by inserting “to support the ability of older individuals to age in place, including through the provision of homelessness prevention services, support the ability of older