

116TH CONGRESS
1ST SESSION

H. R. 2035

To amend title XXIX of the Public Health Service Act to reauthorize the program under such title relating to lifespan respite care.

IN THE HOUSE OF REPRESENTATIVES

APRIL 2, 2019

Mr. LANGEVIN (for himself and Mrs. RODGERS of Washington) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend title XXIX of the Public Health Service Act to reauthorize the program under such title relating to lifespan respite care.

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 “Lifespan Respite Care
5 Reauthorization Act of 2019”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

8 (1) There are an estimated 43,000,000 family
9 caregivers nationwide that provide care for loved

1 ones with chronic, disabling health conditions across
2 the lifespan.

3 (2) The economic value of uncompensated fam-
4 ily caregiving to the United States economy was esti-
5 mated at \$470,000,000,000 in 2013, more than
6 total Medicaid spending of \$449,000,000,000, in-
7 cluding both Federal and State contributions for
8 medical and long-term care in the same year.

9 (3) While caring for the aging population re-
10 mains a growing concern, more than half of care re-
11 cipients are under age 75, and almost one-third are
12 under age 50.

13 (4) Respite provides temporary relief to care-
14 givers from the ongoing responsibility of caring for
15 individuals of all ages with special needs.

16 (5) Respite care is one of the most commonly
17 requested caregiver support services.

18 (6) Respite has been shown to provide family
19 caregivers with the relief necessary to maintain their
20 own health, balance work and family, bolster family
21 stability, keep marriages intact, and avoid or delay
22 more costly nursing home or foster care placements.

23 (7) Delaying nursing home, institutional, or fos-
24 ter care placement of just one individual for several

1 months can save Medicaid, child welfare, or other
2 government programs tens of thousands of dollars.

3 (8) The Lifespan Respite Care Act of 2006
4 (Public Law 109–442) was originally enacted to im-
5 prove the delivery and quality of respite care services
6 available to families across all age and disability
7 groups by establishing coordinated lifespan respite
8 systems.

9 (9) Thirty-seven States and the District of Co-
10 lumbia have received grants under the Lifespan Res-
11 pite Care Act of 2006 to improve the availability and
12 quality of respite services across the lifespan.

13 (10) For the Nation’s wounded servicemembers
14 and veterans with traumatic brain injuries and other
15 conditions, respite systems could be an integral life-
16 line for families in their new roles as lifelong family
17 caregivers.

18 (11) The Department of Veterans Affairs and
19 Congress have both acknowledged the unique chal-
20 lenges facing caregivers of returning servicemembers
21 and veterans, as well as the need for increased care-
22 giver services.

23 (12) The increased utilization of, and costs to,
24 long-term care systems requires the continued devel-

3 SEC. 3. REAUTHORIZATION OF LIFESPAN RESPITE CARE
4 PROGRAM.

(a) DATA COLLECTION AND REPORTING.—Section 2904 of the Public Health Service Act (42 U.S.C. 290ii–3) is amended to read as follows:

8 “SEC. 2904. DATA COLLECTION AND REPORTING.

9 “Each eligible State agency awarded a grant or coop-
10 erative agreement under section 2902 shall collect, main-
11 tain, and report such data and records at such times, in
12 such form, and in such manner as the Secretary may re-
13 quire to enable the Secretary—

14 “(1) to monitor State administration of pro-
15 grams and activities funded pursuant to such grant
16 or cooperative agreement; and

17 “(2) to evaluate, and to compare effectiveness
18 on a State-by-State basis, of programs and activities
19 funded pursuant to section 2902.”.

(b) **FUNDING.**—Section 2905 of the Public Health Service Act (42 U.S.C. 300ii–4) is amended by striking paragraphs (1) through (5) and inserting the following:

23 “(1) \$20,000,000 for fiscal year 2020;

24 “(2) \$30,000,000 for fiscal year 2021;

25 “(3) \$40,000,000 for fiscal year 2022;

- 1 “(4) \$50,000,000 for fiscal year 2023; and
- 2 “(5) \$60,000,000 for fiscal year 2024.”.

