

PUBLIC LAW 118-180—DEC. 23, 2024

AUTISM COLLABORATION, ACCOUNTABILITY,
RESEARCH, EDUCATION, AND SUPPORT ACT
OF 2024

Public Law 118–180
118th Congress

An Act

Dec. 23, 2024
[H.R. 7213]

Autism
Collaboration,
Accountability,
Research,
Education, and
Support Act of
2024.
42 USC 201 note.

To amend the Public Health Service Act to enhance and reauthorize activities and programs relating to autism spectrum disorder, and for other purposes.

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

SECTION 1. SHORT TITLE.

This Act may be cited as the “Autism Collaboration, Accountability, Research, Education, and Support Act of 2024” or the “Autism CARES Act of 2024”.

SEC. 2. NATIONAL INSTITUTES OF HEALTH ACTIVITIES.

(a) **EXPANSION OF ACTIVITIES.**—Section 409C(a)(1) of the Public Health Service Act (42 U.S.C. 284g(a)(1)) is amended—

(1) by striking “) shall, subject to the availability” and inserting the following: “), in consultation with relevant Federal departments and agencies, as appropriate, shall—

“(A) subject to the availability”;

(2) by striking “basic and clinical research in fields including pathology” and inserting the following: “basic and clinical research—

“(i) in fields, such as pathology”;

(3) by striking “toxicology, and interventions” and inserting the following: “toxicology, psychiatry, psychology, developmental behavioral pediatrics, audiology, and gerontology; and

“(ii) on interventions”;

(4) by striking “disorder. Such research shall investigate” and inserting the following: “disorder; and

“(B) ensure that research referred to in subparagraph

(A)—

“(i) investigates”;

(5) by striking “prevention, services across the lifespan, supports, intervention, and treatment of autism spectrum disorder” and inserting “prevention, services and supports across the lifespan, intervention, and treatment of autism spectrum disorder and co-occurring conditions”; and

(6) by striking “treatments.” and inserting the following: “treatments;

“(ii) examines supports for caregivers; and

“(iii) reflects the entire population of individuals with autism spectrum disorder, including those individuals with co-occurring conditions and the full range of needs for supports and services, including such supports and services to ensure the safety, and promote the well-being, of such individuals.”.

(b) **CENTERS OF EXCELLENCE.**—Section 409C(b) of the Public Health Service Act (42 U.S.C. 284g(b)) is amended—

(1) in paragraph (2)—

(A) by striking “including the fields of” and inserting “in fields such as”; and

(B) by striking “behavioral psychology, and clinical psychology” and inserting “behavioral psychology, clinical psychology, and gerontology”;

(2) in paragraph (5)(A), by striking “five” and inserting “seven”; and

(3) in paragraph (5)(B), by striking “period of not to exceed” and inserting “period not to exceed”.

(c) **PUBLIC INPUT.**—Section 409C(d) of the Public Health Service Act (42 U.S.C. 284g(d)) is amended to read as follows:

“(d) **PUBLIC INPUT.**—

“(1) **IN GENERAL.**—The Director shall under subsection (a)(1) provide for means through which the public can obtain information on the existing and planned programs and activities of the National Institutes of Health with respect to autism spectrum disorder and through which the Director can receive comments from the public regarding such programs and activities.

“(2) **GUIDANCE.**—The Director may provide guidance to centers under subsection (b)(1) on strategies, activities, and opportunities to promote engagement with, and solicit input from, individuals with autism spectrum disorder and their family members, guardians, advocates or authorized representatives, providers, or other appropriate individuals to inform the activities of the center. Such strategies, activities, and opportunities should consider including, as appropriate, individuals, family members, and caregivers of individuals with autism spectrum disorder who represent the entire population of individuals with autism spectrum disorder, including those individuals with co-occurring conditions and the full range of needs for supports and services, including such supports and services to ensure the safety, and promote the well-being, of such individuals, to inform the activities of the center.”.

(d) **BUDGET ESTIMATE.**—Section 409C of the Public Health Service Act (42 U.S.C. 284g) is amended by adding at the end the following:

“(e) **BUDGET ESTIMATE.**—For each of fiscal years 2026 through 2029, the Director shall prepare and submit, directly to the President for review and transmittal to Congress, an annual budget estimate for the initiatives of the National Institutes of Health pursuant to the strategic plan developed under section 399CC(b)(5) and updated under section 399CC(b)(6)(B), after reasonable opportunity for comment (but without change) by the Secretary and the Interagency Autism Coordinating Committee established under section 399CC.”.

Time periods.

SEC. 3. PROGRAMS RELATING TO AUTISM.

(a) **DEVELOPMENTAL DISABILITIES SURVEILLANCE AND RESEARCH PROGRAM.**—Section 399AA of the Public Health Service Act (42 U.S.C. 280i) is amended—

(1) in subsection (a)(3), by striking “an Indian tribe, or a tribal organization” and inserting “an Indian Tribe, or a Tribal organization”;

(2) in subsection (b)(1), by inserting “across the lifespan” before the period at the end;

(3) in subsection (d)(1)—

(A) in the paragraph heading, by striking “TRIBE; TRIBAL” and inserting “TRIBE; TRIBAL”;

(B) by striking “tribe” and inserting “Tribe”; and

(C) by striking “tribal” and inserting “Tribal”; and

(4) in subsection (e), by striking “December 20, 2024” and inserting “September 30, 2029”.

(b) AUTISM EDUCATION, EARLY DETECTION, AND INTERVENTION.—Section 399BB of the Public Health Service Act (42 U.S.C. 280i–1) is amended—

(1) in subsection (b)(1), by striking “culturally competent information” and inserting “culturally and linguistically appropriate information”;

(2) in subsection (b)(2)—

(A) by striking “promote research” and inserting “promote research, which may include research that takes a community-based approach,”; and

(B) by striking “screening tools” each place it appears and inserting “screening and diagnostic tools”;

(3) in subsection (b)(3), by striking “at higher risk” and inserting “at increased likelihood”;

(4) in subsection (b)(4), by inserting “, which may give consideration to the perspectives of parents and guardians” before the semicolon at the end;

(5) in subsection (b)(7), by striking “at higher risk” and inserting “at increased likelihood”;

(6) in subsection (c)(1), by striking “culturally competent information” and inserting “culturally and linguistically appropriate information”;

(7) in subsection (c)(2)(A)(ii), by striking “culturally competent information” and inserting “culturally and linguistically appropriate information”;

(8) by amending paragraph (1) of subsection (e) to read as follows:

(9) in subsection (e)(1)—

(A) in the matter preceding subparagraph (A), by inserting “, and strengthen the capacity of,” after “expand”; and

(B) in subparagraph (A)—

(i) by striking “expand existing or develop new” and inserting “expand and strengthen the capacity of existing, or, in States that do not have such a program, develop new,”; and

(ii) by striking “Act) in States that do not have such a program” and inserting “Act”;

(C) in subparagraph (B)(v), by inserting “or other providers, as applicable” before the semicolon at the end; and

(D) by amending subparagraph (C) to read as follows:

“(C) program sites—

“(i) provide culturally and linguistically appropriate services;

“(ii) take a multidisciplinary approach and have experience working with underserved populations; and

“(iii) identify opportunities to partner with community-based organizations to expand the capacity of

communities to serve individuals with autism spectrum disorder or other developmental disabilities.”;

(10) in subsection (e)(2), by adding at the end the following new subparagraph:

“(C) REPORT.—Not later than 2 years after the date of the enactment of the Autism CARES Act of 2024, the Secretary shall submit to the Committee on Energy and Commerce of the House of Representatives and the Committee on Health, Education, Labor, and Pensions of the Senate a report that examines the need for, and feasibility of, expanding the developmental-behavioral pediatrician training programs described in subparagraph (A).”;

(11) by amending subsection (f) to read as follows:

“(f) INTERVENTION.—The Secretary shall promote research through grants or contracts, which may include grants or contracts to research centers or networks, to—

“(1) develop and evaluate evidence-based practices and interventions to improve outcomes for individuals with autism spectrum disorder or other developmental disabilities by addressing physical and behavioral health and communication needs of such individuals across the lifespan;

“(2) develop guidelines for such evidence-based practices and interventions; and

“(3) disseminate information related to such evidence-based practices and interventions and guidelines.”; and

(12) in subsection (g), by striking “December 20, 2024” and inserting “September 30, 2029”.

(c) INTERAGENCY AUTISM COORDINATING COMMITTEE.—Section 399CC of the Public Health Service Act (42 U.S.C. 280i–2) is amended—

(1) in subsection (b)—

(A) in the matter preceding paragraph (1), by inserting “, on a regular basis” after “shall”;

(B) in paragraph (2), by striking “develop a summary” and inserting “summarize”; and

(C) by striking paragraphs (5) and (6) and inserting the following:

“(5) develop a strategic plan for the conduct of, and support for, autism spectrum disorder research, as described in section 409C(a)(1), which shall include—

“(A) proposed budgetary requirements; and

“(B) recommendations to ensure that autism spectrum disorder research, and services and support activities to the extent practicable, of the Department of Health and Human Services and of other Federal departments and agencies are not unnecessarily duplicative; and

“(6) submit to the Congress and the President—

“(A) an annual update on the summary of advances described in paragraph (2); and

“(B) a biennial update on the strategic plan described in paragraph (5), including progress made in achieving the goals outlined in such strategic plan and any specific measures taken pursuant to such strategic plan.”; and

(2) in subsection (f), by striking “December 20, 2024” and inserting “September 30, 2029”.

(d) REPORTS TO CONGRESS.—Section 399DD of the Public Health Service Act (42 U.S.C. 280i–3) is amended—

Examination.

Grants.
Contracts.

Evaluation.

Guidelines.

Strategic plan.

Budget.
Recommendations.

Time periods.
Updates.

(1) by striking “2019” each place it appears and inserting “2024”; and

(2) in subsection (a), by amending paragraph (1) to read as follows:

“(1) IN GENERAL.—Not later than 4 years after September 30, 2024, the Secretary, in consultation with other relevant Federal departments and agencies, shall prepare and submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives, and make publicly available, including through posting on the website of the Department of Health and Human Services, a progress report on activities related to autism spectrum disorder and other developmental disabilities. Such report shall include activities and research related to the entire population of individuals with autism spectrum disorder, including those individuals with co-occurring conditions and the full range of needs for supports and services, including such supports and services to ensure the safety, and promote the well-being, of such individuals.”;

(3) in subsection (b)—

(A) in the heading of subsection (b), by striking “HEALTH AND WELL-BEING” and inserting “MENTAL HEALTH NEEDS”;

(B) in paragraph (1), by striking “health and well-being” and inserting “mental health needs”; and

(C) by amending paragraph (2) to read as follows:

“(2) CONTENTS.—The report submitted under paragraph (1) shall contain—

(A) an overview of policies and programs relevant to the mental health of individuals with autism spectrum disorder across their lifespan, including an identification of existing Federal laws, regulations, policies, research, and programs; and

(B) recommendations to improve mental health outcomes and address related disparities in mental health care for individuals with autism spectrum disorder, including prevention, care coordination, and community-based services.”;

(4) by adding at the end the following:

“(c) UPDATE ON YOUNG ADULTS AND YOUTH TRANSITIONING TO ADULTHOOD.—Not later than 2 years after the date of enactment of the Autism CARES Act of 2024, the Secretary, in coordination with other relevant Federal departments and agencies, as appropriate, shall prepare and submit to the Committee on Energy and Commerce of the House of Representatives and the Committee on Health, Education, Labor, and Pensions of the Senate an update to the report required pursuant to subsection (b) of this section, as added by section 6 of the Autism Cares Act of 2014 (Public Law 113–157), and in effect before the date of enactment of the Autism CARES Act of 2019 (Public Law 116–60), concerning young adults with autism spectrum disorder and the challenges related to the transition from existing school-based services to those services available during adulthood.”.

(e) AUTHORIZATION OF APPROPRIATIONS.—Section 399EE of the Public Health Service Act (42 U.S.C. 280i–4) is amended—

Public
information.
Web posting.

Overview.

Recommendations.

Time periods.

(1) in subsection (a), by striking “\$23,100,000 for each of fiscal years 2020 through 2024” and inserting “\$28,100,000 for each of fiscal years 2025 through 2029”;

(2) in subsection (b), by striking “\$50,599,000 for each of fiscal years 2020 through 2024” and inserting “\$56,344,000 for each of fiscal years 2025 through 2029”; and

(3) in subsection (c), by striking “there are authorized to be appropriated \$296,000,000 for each of fiscal years 2020 through 2024” and inserting “there is authorized to be appropriated \$306,000,000 for each of fiscal years 2025 through 2029”.

SEC. 4. TECHNICAL ASSISTANCE TO IMPROVE ACCESS TO COMMUNICATION TOOLS.

42 USC 280i
note.

(a) **IN GENERAL.**—The Secretary of Health and Human Services (referred to in this section as the “Secretary”) may, at the request of a State, Indian Tribe, Tribal organization, locality, or territory, provide training and technical assistance to such jurisdiction on the manner in which Federal funding administered by the Secretary may be used to provide individuals with autism spectrum disorder and other developmental disabilities with access to evidence-based services, tools, and technologies that support communication needs.

(b) **ANNUAL REPORT.**—The Secretary shall annually prepare and submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives a report summarizing any technical assistance provided by the Secretary in the preceding fiscal year under subsection (a) and any advancements in the development or evaluation of such evidence-based services, tools, and technologies.

Summary.

Approved December 23, 2024.

LEGISLATIVE HISTORY—H.R. 7213:

HOUSE REPORTS: No. 118–620 (Comm. on Energy and Commerce).

CONGRESSIONAL RECORD, Vol. 170 (2024):

Sept. 17, 18, considered and passed House.

Nov. 21, considered and passed Senate, amended.

Dec. 16, House concurred in Senate amendment.

