

COMMITTEE PRINT

(Budget Reconciliation Legislative Recommendations Relating to Public Health)

1 **Subtitle J—Public Health**

2 **PART 1—HEALTH CARE INFRASTRUCTURE AND**

3 **WORKFORCE**

4 **SECTION 31001. FUNDING TO SUPPORT CORE PUBLIC**

5 **HEALTH INFRASTRUCTURE FOR STATE, TER-**

6 **RITORIAL, LOCAL, AND TRIBAL HEALTH DE-**

7 **PARTMENTS AT THE CENTERS FOR DISEASE**

8 **CONTROL AND PREVENTION.**

9 (a) **IN GENERAL.**—In addition to amounts otherwise
10 available, there is appropriated to the Secretary of Health
11 and Human Services (in this subtitle referred to as the
12 “Secretary”) for fiscal year 2022, out of any money in
13 the Treasury not otherwise appropriated, \$7,000,000,000,
14 to remain available until expended, to carry out, acting
15 through the Director of the Centers for Disease Control
16 and Prevention (in this section referred to as the “Direc-
17 tor”), activities described in subsection (b).

18 (b) **USE OF FUNDS.**—Amounts made available pursu-
19 ant to subsection (a) shall be used to support core public

1 health infrastructure activities to strengthen the public
2 health system of the United States, including by awarding
3 grants under this section and expanding and improving
4 activities of the Centers for Disease Control and Preven-
5 tion under subsections (c) and (d).

6 (c) GRANTS.—

7 (1) AWARDS.—For the purpose of addressing
8 core public health infrastructure needs, the Sec-
9 retary shall award—

10 (A) a grant to each State or territorial
11 health department, and to local health depart-
12 ments that serve counties with a population of
13 at least 2,000,000 or a city with a population
14 of at least 400,000 people; and

15 (B) grants on a competitive basis to State,
16 territorial, local, or Tribal health departments.

17 (2) ALLOCATION.—Of the total amount of
18 funds awarded as grants under this subsection for a
19 fiscal year—

20 (A) not less than 50 percent shall be for
21 grants to health departments under paragraph
22 (1)(A); and

23 (B) not less than 25 percent shall be for
24 grants to State, local, territorial, or Tribal
25 health departments under paragraph (1)(B).

1 (3) REQUIRED USES.—

2 (A) REALLOCATION TO LOCAL HEALTH
3 DEPARTMENTS.—A State health department re-
4 ceiving funds under subparagraph (A) or (B) of
5 paragraph (1) shall allocate at least 25 percent
6 of the such funds to local health departments,
7 as applicable, within the State to support con-
8 tributions of the local health departments to
9 core public health infrastructure.

10 (B) PROGRESS IN MEETING ACCREDITA-
11 TION STANDARDS.—A health department receiv-
12 ing funds under this section that is not accred-
13 ited shall report to the Secretary on an annual
14 basis how the department is working to meet
15 accreditation standards.

16 (4) FORMULA GRANTS TO HEALTH DEPART-
17 MENTS.—In awarding grants under paragraph (1),
18 the Secretary shall award funds to each health de-
19 partment in accordance with a formula which con-
20 sideres population size, the Social Vulnerability Index
21 of the Centers for Disease Control and Prevention,
22 and other factors as determined by the Secretary.

23 (5) COMPETITIVE GRANTS TO STATE, TERRI-
24 TORIAL, LOCAL, AND TRIBAL HEALTH DEPART-
25 MENTS.—In making grants under paragraph (1)(B),

1 the Secretary shall give priority to applicants dem-
2 onstrating core public health infrastructure needs
3 for all public health agencies in the applicant's juris-
4 diction.

5 (6) PERMITTED USES.—

6 (A) IN GENERAL.—The Secretary may
7 make available a subset of the funds available
8 for grants under paragraph (1) for purposes of
9 awarding grants to State, territorial, local, and
10 Tribal health departments for planning or to
11 support public health accreditation.

12 (B) USES.—Recipients of such grants may
13 use the grant funds to assess core public health
14 infrastructure needs and report to the Centers
15 for Disease Control and Prevention on efforts
16 to achieve accreditation, as applicable.

17 (7) REQUIREMENTS.—To be eligible for a grant
18 under this section, an entity shall—

19 (A) submit an application in such form
20 and containing such information as the Sec-
21 retary shall require;

22 (B) demonstrate to the satisfaction of the
23 Secretary that—

24 (i) funds received through the grant
25 will be expended only to supplement, and

1 not supplant, non-Federal and Federal
2 funds otherwise available to the entity for
3 the purpose of addressing core public
4 health infrastructure needs; and

5 (ii) with respect to activities for which
6 the grant is awarded, the entity will main-
7 tain expenditures of non-Federal amounts
8 for such activities at a level not less than
9 the level of such expenditures maintained
10 by the entity for fiscal year 2019; and

11 (C) agree to report annually to the Direc-
12 tor regarding the use of the grant funds.

13 (d) CORE PUBLIC HEALTH INFRASTRUCTURE AND
14 ACTIVITIES FOR THE CDC.—

15 (1) IN GENERAL.—The Secretary, acting
16 through the Director, shall expand and improve the
17 core public health infrastructure and activities of the
18 Centers for Disease Control and Prevention to sup-
19 port activities necessary to address unmet, ongoing,
20 and emerging public health needs, including preven-
21 tion, preparation for, and response to public health
22 emergencies.

23 (2) LIMITATION.—Out of amounts appropriated
24 under subsection (a) to carry out this section for a
25 fiscal year, not more than 25 percent of the funds

1 awarded per fiscal year may be used by the Centers
2 for Disease Control and Prevention to carry out this
3 subsection.

4 (e) DEFINITION.—In this section, the term “core
5 public health infrastructure” includes—

6 (1) workforce capacity and competency;

7 (2) laboratory systems;

8 (3) all hazards public health and preparedness;

9 (3) testing capacity, including test platforms,
10 mobile testing units, and personnel;

11 (4) health information, health information sys-
12 tems, and health information analysis;

13 (5) disease surveillance;

14 (6) contact tracing;

15 (7) communications;

16 (8) financing;

17 (9) other relevant components of organizational
18 capacity; and

19 (10) other related activities.

20 (f) SUPPLEMENT NOT SUPPLANT.—Amounts made
21 available by this section shall be used to supplement, and
22 not supplant, amounts otherwise made available for the
23 purposes described in this Act.

1 **SEC. 31002. FUNDING FOR HOSPITAL INFRASTRUCTURE.**

2 (a) IN GENERAL.—In addition to amounts otherwise
3 available, there is appropriated to the Secretary for fiscal
4 year 2022, out of any money in the Treasury not otherwise
5 appropriated, \$10,000,000,000, to remain available until
6 expended, to carry out subsection (b) consistent with en-
7 hancing the goals of parts B and C of title XVI of the
8 Public Health Service Act (42 U.S.C. 300q et seq.).

9 (b) USE OF FUNDS.—From amounts made available
10 under subsection (a), the Secretary shall award grants to
11 entities described in section 1610(a) of the Public Health
12 Service Act (42 U.S.C. 300r(a)) for purposes of increasing
13 capacity and updating hospitals and other medical facili-
14 ties in order to better serve communities in need.

15 (c) CONDITIONS.—The following requirements of
16 parts B and C of title XVI of the Public Health Service
17 Act (42 U.S.C. 300r et seq.) shall apply to funds made
18 available under this section:

19 (1) The requirements related to reasonable vol-
20 ume of care described under section
21 1621(b)(1)(K)(ii) of such Act (42 U.S.C. 300s-
22 1(b)(1)(K)(ii)).

23 (2) Section 1621(b)(1)(I) of such Act (42
24 U.S.C. 300s-1(b)(1)(I)).

1 (3) Any other provision of such parts that the
2 Secretary determines (as prescribed by regulation)
3 to be appropriate to carry out this section.

4 (d) PRIORITY.—In awarding grants under this sec-
5 tion, the Secretary shall give priority to applicants whose
6 projects will include, by design, public health emergency
7 preparedness, natural disaster emergency preparedness, or
8 cybersecurity against cyber threats.

9 **SEC. 31003. FUNDING FOR COMMUNITY HEALTH CENTER**
10 **CAPITAL GRANTS.**

11 (a) IN GENERAL.—In addition to amounts otherwise
12 available, there is appropriated to the Secretary for fiscal
13 year 2022, out of any money in the Treasury not otherwise
14 appropriated, \$10,000,000,000, to remain available until
15 expended, for necessary expenses for awarding grants and
16 entering into cooperative agreements for capital projects
17 to health centers funded under section 330 of the Public
18 Health Service Act (42 U.S.C. 254b) to be awarded with-
19 out regard to the time limitation in subsection (e)(3) and
20 subsections (e)(6)(A)(iii), (e)(6)(B)(iii), and (r)(2)(B) of
21 such section 330, and for necessary expenses for awarding
22 grants and cooperative agreements for capital projects to
23 Federally qualified health centers, as described in section
24 1861(aa)(4)(B) of the Social Security Act (42 U.S.C.
25 1395x(aa)(4)(B)). The Secretary shall take such steps as

1 may be necessary to expedite the awarding of such grants
2 to Federally qualified health centers for capital projects.

3 (b) USE OF FUNDS.—Amounts made available to a
4 recipient of a grant or cooperative agreement pursuant to
5 subsection (a) shall be used for health center facility alter-
6 ation, renovation, remodeling, expansion, construction,
7 and other capital improvement costs, including the costs
8 of amortizing the principal of, and paying interest on,
9 loans for such purposes.

10 **SEC. 31004. FUNDING FOR COMMUNITY-BASED CARE INFRA-**
11 **STRUCTURE.**

12 (a) IN GENERAL.—In addition to amounts otherwise
13 available, there is appropriated to the Secretary for fiscal
14 year 2022, out of any money in the Treasury not otherwise
15 appropriated, \$500,000,000, to remain available until ex-
16 pended, for purposes of making awards to qualified teach-
17 ing health centers (as defined in section 340H of the Pub-
18 lic Health Service Act (42 U.S.C. 256h)), and to behav-
19 ioral health care centers (as defined by the Secretary to
20 include both substance abuse and mental health care fa-
21 cilities).

22 (b) USE OF FUNDS.—Amounts made available pursu-
23 ant to subsection (a) shall be used to support the improve-
24 ment, renovation, or modernization of infrastructure at
25 such centers, including to respond to public health emer-

1 gencies declared under section 319 of the Public Health
2 Service Act (42 U.S.C. 247d).

3 **SEC. 31005. FUNDING FOR SCHOOLS OF MEDICINE IN UN-**
4 **DESERVED AREAS.**

5 (a) IN GENERAL.—In addition to amounts otherwise
6 available, there is appropriated to the Secretary for fiscal
7 year 2022, out of any money in the Treasury not otherwise
8 appropriated, \$1,000,000,000, to remain available until
9 expended, for purposes of making awards to eligible enti-
10 ties for the establishment, improvement, or expansion of
11 an allopathic or osteopathic school of medicine, or a
12 branch campus of an allopathic or osteopathic school of
13 medicine, consistent with subsection (b).

14 (b) USE OF FUNDS.—The Secretary, acting through
15 the Administrator of the Health Resources and Services
16 Administration, shall, taking into consideration equitable
17 distribution of awards among the geographical regions of
18 the United States (which shall include rural regions and
19 populations as defined by the Secretary for the purposes
20 of this section) and the locations of existing schools of
21 medicine and osteopathic medicine, use amounts appro-
22 priated by subsection (a) to award grants to eligible enti-
23 ties to—

24 (1) recruit, enroll, and retain students, includ-
25 ing individuals who are from disadvantaged back-

1 grounds (including racial and ethnic groups under-
2 represented among medical students and health pro-
3 fessions), individuals from rural and underserved
4 areas, low-income individuals, and first generation
5 college students (as defined in section 402A(h)(3) of
6 the Higher Education Act of 1965 (20 U.S.C.
7 1070a–11(h)(3))), at a school of medicine or osteo-
8 pathic medicine or branch campus of a school of
9 medicine or osteopathic medicine;

10 (2) develop, implement, and expand curriculum
11 that emphasizes care for rural and underserved pop-
12 ulations, including accessible and culturally appro-
13 priate and linguistically appropriate care and serv-
14 ices, at such school or branch campus;

15 (3) plan and construct a school of medicine or
16 osteopathic medicine in an area in which no other
17 such school or branch campus of such a school is
18 based;

19 (4) plan, develop, and meet criteria for accredi-
20 tation for a school of medicine or osteopathic medi-
21 cine or branch campus of such a school;

22 (5) hire faculty, including faculty from racial
23 and ethnic groups who are underrepresented among
24 the medical and other health professions, and other
25 staff to serve at such a school or branch campus;

1 (6) support educational programs at such a
2 school or branch campus, including modernizing cur-
3 riculum;

4 (7) modernize and expand infrastructure at
5 such a school or branch campus; or

6 (8) support other activities that the Secretary
7 determines will further the establishment, improve-
8 ment, or expansion of a school of medicine or osteo-
9 pathic medicine or branch campus of a school of
10 medicine or osteopathic medicine.

11 (c) PRIORITY.—In awarding grants under this sec-
12 tion, the Secretary shall give priority to minority-serving
13 institutions described in section 371(a) of the Higher Edu-
14 cation Act of 1965 (20 U.S.C. 1067q(a)).

15 (d) DEFINITIONS.—In this section:

16 (1) ELIGIBLE ENTITY.—The term “eligible enti-
17 ty” means an institution of higher education as de-
18 fined in section 101 of the Higher Education Act of
19 1965 (20 U.S.C. 1001).

20 (2) BRANCH CAMPUS.—

21 (A) IN GENERAL.—The term “branch cam-
22 pus”, with respect to a school of medicine or os-
23 teopathic medicine, means an additional loca-
24 tion of such school that is geographically apart
25 and independent of the main campus, at which

1 the school offers at least 50 percent of the pro-
2 gram leading to a degree of doctor of medicine
3 or doctor of osteopathy that is offered at the
4 main campus.

5 (B) INDEPENDENCE FROM MAIN CAM-
6 PUS.—For purposes of subparagraph (A), the
7 location of a school described in such subpara-
8 graph shall be considered to be independent of
9 the main campus described in such subpara-
10 graph if the location—

11 (i) is permanent in nature;

12 (ii) offers courses in educational pro-
13 grams leading to a degree, certificate, or
14 other recognized educational credential;

15 (iii) has its own faculty and adminis-
16 trative or supervisory organization; and

17 (iv) has its own budgetary and hiring
18 authority.

19 **SEC. 31006. FUNDING FOR NURSING EDUCATION ENHANCE-**
20 **MENT AND MODERNIZATION GRANTS IN UN-**
21 **DESERVED AREAS.**

22 (a) IN GENERAL.—In addition to amounts otherwise
23 available, there is appropriated to the Secretary for fiscal
24 year 2022, out of any money in the Treasury not otherwise
25 appropriated, \$1,000,000,000, to remain available until

1 expended, for purposes of making awards to schools of
2 nursing (as defined in section 801 of the Public Health
3 Service Act (42 U.S.C. 296)) to enhance and modernize
4 nursing education programs and increase the number of
5 faculty and students at such schools.

6 (b) USE OF FUNDS.—The Secretary, acting through
7 the Administrator of the Health Resources and Services
8 Administration, taking into consideration equitable dis-
9 tribution of awards among the geographical regions of the
10 United States and the capacity of a school of nursing to
11 provide care in underserved areas, shall use amounts ap-
12 propriated by subsection (a) to award grants for purposes
13 of—

14 (1) enhancing enrollment and retention of stu-
15 dents at such school, with a priority for students
16 from disadvantaged backgrounds (including racial or
17 ethnic groups underrepresented in the nursing work-
18 force), individuals from rural and underserved areas,
19 low-income individuals, and first generation college
20 students (as defined in section 402A(h)(3) of the
21 Higher Education Act of 1965 (20 U.S.C. 1070a-
22 11(h)(3)));

23 (2) creating, supporting, or modernizing edu-
24 cational programs and curricula at such school;

1 (3) retaining current faculty, and hiring new
2 faculty, with an emphasis on faculty from racial or
3 ethnic groups that are underrepresented in the nurs-
4 ing workforce;

5 (4) modernizing infrastructure at such school,
6 including audiovisual or other equipment, personal
7 protective equipment, simulation and augmented re-
8 ality resources, telehealth technologies, and virtual
9 and physical laboratories;

10 (5) partnering with a health care facility, nurse-
11 managed health clinic, community health center, or
12 other facility that provides health care, in order to
13 provide educational opportunities for the purpose of
14 establishing or expanding clinical education;

15 (6) enhancing and expanding nursing programs
16 that prepare nurse researchers and scientists;

17 (7) establishing nurse-led intradisciplinary and
18 interprofessional educational partnerships; or

19 (8) other activities that the Secretary deter-
20 mines will further the development, improvement,
21 and expansion of schools of nursing.

22 **SEC. 31007. FUNDING FOR TEACHING HEALTH CENTER**
23 **GRADUATE MEDICAL EDUCATION.**

24 (a) **IN GENERAL.**—In addition to amounts otherwise
25 available, and notwithstanding the limitations referred to

1 in subsections (b)(2) and (d)(2) of section 340H of the
2 Public Health Service Act (42 U.S.C. 256h), there is ap-
3 propriated to the Secretary for fiscal year 2022, out of
4 any money in the Treasury not otherwise appropriated,
5 \$6,000,000,000, to remain available until expended, for—

6 (1) the program of payments to teaching health
7 centers that operate graduate medical education pro-
8 grams under such section; and

9 (2) the award of teaching health center develop-
10 ment grants pursuant to section 749A of the Public
11 Health Service Act (42 U.S.C. 2931–1).

12 (b) USE OF FUNDS.—Amounts made available pursu-
13 ant to subsection (a) shall be used for the following activi-
14 ties:

15 (1) For making payments to establish new ap-
16 proved graduate medical residency training pro-
17 grams pursuant to section 340H(a)(1)(C) of the
18 Public Health Service Act (42 U.S.C.
19 256h(a)(1)(C)).

20 (2) For making payments under section
21 340H(a)(1)(A) of the Public Health Service Act (42
22 U.S.C. 256h(a)(1)(A)) to qualified teaching health
23 centers for maintenance of filled positions at existing
24 approved graduate medical residency training pro-
25 grams.

1 (3) For making payments under section
2 340H(a)(1)(B) of the Public Health Service Act (42
3 U.S.C. 256h(a)(1)(B)) for the expansion of existing
4 approved graduate medical residency training pro-
5 grams.

6 (4) For making awards under section 749A of
7 the Public Health Service Act (42 U.S.C. 2931–1) to
8 teaching health centers for the purpose of estab-
9 lishing new accredited or expanded primary care
10 residency programs.

11 (5) To provide an increase to the per resident
12 amount described in section 340H(a)(2) of the Pub-
13 lic Health Service Act (42 U.S.C. 256h(a)(2)).

14 **SEC. 31008. FUNDING FOR NURSE CORPS.**

15 In addition to amounts otherwise available, there is
16 appropriated to the Secretary for fiscal year 2022, out of
17 any money in the Treasury not otherwise appropriated,
18 \$300,000,000, to remain available until expended, for car-
19 rying out section 846 of the Public Health Service Act
20 (42 U.S.C. 297n).

1 **PART 2—PANDEMIC PREPAREDNESS**
2 **SEC. 31021. FUNDING FOR LABORATORY ACTIVITIES AT**
3 **THE CENTERS FOR DISEASE CONTROL AND**
4 **PREVENTION.**

5 (a) **IN GENERAL.**—In addition to amounts otherwise
6 available, there is appropriated to the Secretary for fiscal
7 year 2022, out of any money in the Treasury not otherwise
8 appropriated, \$5,000,000,000 for purposes of carrying
9 out, acting through the Director of the Centers for Disease
10 Control and Prevention (in this section referred to as the
11 “Director”), activities described in subsection (b), to re-
12 main available until expended.

13 (b) **USE OF FUNDS.**—Amounts made available by
14 subsection (a) shall be used for the following activities:

15 (1) Supporting renovation, expansion, and mod-
16 ernization of State and local public health laboratory
17 infrastructure (as the term “laboratory” is defined
18 in section 353 of the Public Health Service Act (42
19 U.S.C. 263a)), including—

20 (A) increasing and enhancing testing and
21 response capacity;

22 (B) upgrades and expansion of the Labora-
23 tory Response Network for rapid outbreak de-
24 tection;

1 (C) improving and expanding genomic se-
2 quencing capabilities to detect emerging dis-
3 eases and variant strains;

4 (D) expanding biosafety and biosecurity
5 capacity; and

6 (E) making other laboratory enhancements
7 and modernization as determined by the Direc-
8 tor to be important for maintaining public
9 health.

10 (2) Renovating, expanding, and modernizing
11 laboratories of the Centers for Disease Control and
12 Prevention as described in subparagraphs (A)
13 through (E) of paragraph (1).

14 (3) Enhancing the ability of the Centers for
15 Disease Control and Prevention to monitor and exer-
16 cise oversight over biosafety and biosecurity of State
17 and local public health laboratories.

18 **SEC. 31022. STRENGTHENING VACCINE CONFIDENCE.**

19 (a) IN GENERAL.—In addition to amounts otherwise
20 available, there is appropriated to the Secretary for fiscal
21 year 2022, out of any money in the Treasury not otherwise
22 appropriated, \$1,250,000,000, to remain available until
23 expended, to carry out, acting through the Director of the
24 Centers for Disease Control and Prevention, directly or
25 by making grants to public or private entities, activities

1 described in subsection (b) in the United States, including
2 its territories and possessions.

3 (b) USE OF FUNDS.—Amounts made available by
4 subsection (a) shall be used to—

5 (1) strengthen vaccine confidence;

6 (2) strengthen routinely recommended vaccine
7 programs; and

8 (3) improve rates of vaccination, including
9 through activities described in section 313 of the
10 Public Health Service Act (42 U.S.C. 245).

11 **SEC. 31023. FUNDING FOR SURVEILLANCE ACTIVITIES AT**
12 **THE CENTERS FOR DISEASE CONTROL AND**
13 **PREVENTION.**

14 (a) IN GENERAL.—In addition to amounts otherwise
15 available, there is appropriated to the Secretary for fiscal
16 year 2022, out of any money in the Treasury not otherwise
17 appropriated, \$1,250,000,000, to remain available until
18 expended, to carry out, acting through the Director of the
19 Centers for Disease Control and Prevention, directly or
20 by making grants to public or private entities, activities
21 described in subsection (b).

22 (b) USE OF FUNDS.—Amounts made available by
23 subsection (a) shall be used to—

24 (1) enhance and strengthen early warning and
25 detection systems, including public health and health

1 care surveillance, wastewater testing, and global and
2 domestic genomic surveillance;

3 (2) enhance and strengthen surveillance based
4 in hospitals and other health care providers or facili-
5 ties, and outpatient facility surveillance for severe
6 acute respiratory infection, influenza-like illness,
7 acute febrile illness, and other diseases as deter-
8 mined by the Director of the Centers for Disease
9 Control and Prevention to be in the interest of pub-
10 lic health; and

11 (3) strengthen the antibiotic resistance initia-
12 tive program to improve research, stewardship,
13 genomic detection capabilities, and surveillance of
14 existing and emerging antimicrobial resistant patho-
15 gens.

16 **SEC. 31024. FUNDING FOR DATA MODERNIZATION AT THE**
17 **CDC.**

18 (a) IN GENERAL.—In addition to amounts otherwise
19 available, there is appropriated to the Secretary for fiscal
20 year 2022, out of any money in the Treasury not otherwise
21 appropriated, \$500,000,000, to remain available until ex-
22 pended—

23 (1) to carry out, acting through the Director of
24 the Centers for Disease Control and Prevention, di-

1 rectly or by making grants to public or private enti-
2 ties, activities described in subsection (b); and

3 (2) to supplement other available funds to carry
4 out similar data modernization activities authorized
5 by the Public Health Service Act (42 U.S.C. 201 et
6 seq.).

7 (b) USE OF FUNDS.—Amounts made available by
8 subsection (a) shall be used for the following:

9 (1) Supporting public health data surveillance,
10 aggregation, and analytics infrastructure moderniza-
11 tion initiatives.

12 (2) Enhancing reporting and workforce core
13 competencies in informatics and digital health.

14 (3) Expanding and maintaining efforts to mod-
15 ernize the United States disease warning system to
16 forecast and track hotspots and emerging biological
17 threats.

18 **SEC. 31025. FUNDING FOR PUBLIC HEALTH AND PRE-**
19 **PAREDNESS RESEARCH, DEVELOPMENT, AND**
20 **COUNTERMEASURE CAPACITY.**

21 (a) IN GENERAL.—In addition to amounts otherwise
22 available, there is appropriated to the Secretary for fiscal
23 year 2022, out of any money in the Treasury not otherwise
24 appropriated, \$8,000,000,000, to remain available until
25 expended, to carry out activities, acting through the As-

1 sistant Secretary for Preparedness and Response, to pre-
2 pare for, and respond to, public health emergencies de-
3 clared under section 319 of the Public Health Service Act
4 (42 U.S.C. 247d), as described in subsection (b).

5 (b) USE OF FUNDS.—Of the amounts appropriated
6 by subsection (a)—

7 (1) \$3,000,000,000 shall be used to support
8 surge capacity, including through construction, ex-
9 pansion, or modernization of facilities, to respond to
10 a public health emergency, for procurement and do-
11 mestic manufacture of drugs, vaccines and other bio-
12 logical products, diagnostic technologies and prod-
13 ucts, personal protective equipment, medical devices,
14 vials, syringes, needles, and other components or
15 supplies for the Strategic National Stockpile under
16 section 319F–2 of the Public Health Service Act (42
17 U.S.C. 247d–6b);

18 (2) \$2,000,000,000 shall be used to support ex-
19 panded global and domestic vaccine production ca-
20 pacity, including by developing or acquiring new
21 technology and expanding manufacturing capacity
22 through construction, expansion, or modernization of
23 facilities;

24 (3) \$2,000,000,000 shall be used to support ac-
25 tivities to mitigate supply chain risks and enhance

1 supply chain elasticity and resilience for critical
2 drugs and supplies (including essential medicines,
3 medical countermeasures, medical devices, and sup-
4 plies in shortage or at risk of shortage), active phar-
5 maceutical ingredients, drug and vaccine raw mate-
6 rials, and other supplies, as the Secretary deter-
7 mines appropriate, including construction, expan-
8 sion, or modernization of facilities and other activi-
9 ties to support domestic manufacturing of such sup-
10 plies;

11 (4) \$500,000,000 shall be used to support ac-
12 tivities conducted by the Biomedical Advanced Re-
13 search and Development Authority for advanced re-
14 search, standards development, and domestic manu-
15 facturing capacity for diagnostics, vaccines, thera-
16 peutics, and personal protective equipment; and

17 (5) \$500,000,000 shall be used to support in-
18 creased biosafety and biosecurity in research on in-
19 fectious diseases, including by modernization or im-
20 provement of facilities.

21 **PART 3—INNOVATION**

22 **SEC. 31031. FUNDING FOR ADVANCED RESEARCH** 23 **PROJECTS FOR HEALTH.**

24 (a) **IN GENERAL.**—In addition to amounts otherwise
25 available, there is appropriated to the Secretary for fiscal

1 year 2022, out of any money in the Treasury not otherwise
2 appropriated, \$3,000,000,000, to remain available until
3 expended, to establish the Advanced Research Projects
4 Agency for Health (in this section referred to as the
5 “ARPA–H”) for purposes of making pivotal investments
6 in breakthrough technologies and broadly applicable plat-
7 forms, capabilities, resources, and solutions that have the
8 potential to transform important areas of medicine and
9 health for the benefit of all individuals and that cannot
10 readily be accomplished through traditional biomedical re-
11 search or commercial activity.

12 (b) USE OF FUNDS.—The Secretary—

13 (1) shall appoint a Director to head the ARPA–
14 H; and

15 (2) acting through the Director of the ARPA–
16 H, and in consultation with other agencies, as appli-
17 cable, shall—

18 (A) ensure to the maximum extent prac-
19 ticable that the projects and activities of the
20 ARPA–H funded by subsection (a) are coordi-
21 nated with, and do not duplicate the efforts of,
22 programs within, or research conducted or sup-
23 ported by, the Department of Health and
24 Human Services; and

1 (B) in using amounts made available by
2 subsection (a), expedite the development, appli-
3 cation, and implementation of health break-
4 throughs to prevent, detect, and treat serious or
5 life-threatening diseases, including—

6 (i) providing awards in the form of
7 grants, contracts, cooperative agreements,
8 cash prizes, and other transactions (as de-
9 fined in section 319L(a) of the Public
10 Health Service Act (42 U.S.C. 247d-
11 7e(a))) to entities to carry out advanced
12 research projects for health, including
13 through multiyear contracts (subject to the
14 availability of funds) and prize competi-
15 tions;

16 (ii) developing funding criteria and
17 evaluation criteria to assess projects fund-
18 ed under clause (i);

19 (iii) establishing metrics or criteria to
20 prioritize investments and research that
21 should be funded under clause (i), includ-
22 ing the novelty, scientific, and technical
23 merit of proposed projects, the future com-
24 mercial applications of projects, and the
25 unmet need within patient populations;

1 (iv) identifying and promoting poten-
2 tial advances in basic research that will as-
3 sist in carrying out advanced health re-
4 search and development;

5 (v) supporting collaboration and com-
6 munication among public and private enti-
7 ties;

8 (vi) translating scientific discoveries
9 into technological innovations, including
10 through—

11 (I) collaboration with the Food
12 and Drug Administration on the de-
13 velopment of medical products to fa-
14 cilitate transformation of break-
15 throughs in biomedicine into tangible
16 solutions for patients; and

17 (II) ensuring that medical prod-
18 uct development programs gather non-
19 clinical and clinical data necessary for
20 approval as efficiently as practicable;

21 (vii) hiring and appointing personnel
22 necessary to carry out activities described
23 in this section, including—

1 (I) making and rescinding ap-
2 pointments of scientific, medical, and
3 professional personnel;

4 (II) designating personnel to
5 serve as program managers (for terms
6 of no more than 3 years subject to
7 one renewal period) to establish re-
8 search and development goals for the
9 ARPA-H, provide project oversight
10 and management of strategic initia-
11 tives, recommend restructure, expan-
12 sion, or termination of research
13 projects under this section, as nec-
14 essary and appropriate, and carry out
15 other activities described in this sub-
16 section; and

17 (III) hiring and appointing ad-
18 ministrative, financial, and informa-
19 tion technology staff as necessary to
20 carry out this subsection;

21 (viii) compensating personnel at a
22 rate to be determined by the Director of
23 the ARPA-H;

24 (ix) acquiring (by purchase, lease,
25 condemnation, or otherwise), constructing,

1 improving, repairing, operating, and main-
2 taining such real and personal property as
3 are necessary to carry out this section; and
4 (x) entering into or terminating con-
5 tracts, including multiyear contracts, as
6 appropriate to support advanced research
7 projects for health.

8 (c) FUNDING AWARDS.—Research funded by
9 amounts made available under this section shall not be
10 subject to the requirements of section 406(a)(3)(A)(ii) or
11 492 of the Public Health Service Act (42 U.S.C.
12 284a(a)(3)(A)(ii), 289a).

13 (d) SUPPLEMENT NOT SUPPLANT.—Funds appro-
14 priated by this section shall be used to supplement and
15 not supplant any appropriations for institutes and centers
16 of the National Institutes of Health.

17 **PART 4—MATERNAL MORTALITY**

18 **SEC. 31041. GRANTS TO LOCAL ENTITIES ADDRESSING SO-** 19 **CIAL DETERMINANTS OF MATERNAL** 20 **HEALTH.**

21 (a) IN GENERAL.—In addition to amounts otherwise
22 available, there is appropriated to the Secretary for fiscal
23 year 2022, out of any money in the Treasury not otherwise
24 appropriated, \$175,000,000, to remain available until ex-
25 pended, to award grants to community-based organiza-

1 tions or other nonprofit organizations working with a com-
2 munity-based organization, operating in areas with high
3 rates of adverse maternal health outcomes or with signifi-
4 cant racial or ethnic disparities in maternal health out-
5 comes.

6 (b) USE OF FUNDING.—Amounts made available by
7 subsection (a) shall be used for the following activities:

8 (1) Addressing social determinants of maternal
9 health for pregnant and postpartum individuals and
10 eliminating racial and ethnic disparities in maternal
11 health outcomes by—

12 (A) hiring, training, or retaining staff;

13 (B) developing or distributing culturally
14 and linguistically appropriate resources for so-
15 cial services programs;

16 (C) offering programs and resources to ad-
17 dress social determinants of health;

18 (D) conducting demonstration projects to
19 address social determinants of health;

20 (E) establishing a culturally and linguis-
21 tically appropriate resource center that provides
22 multiple social services programs in a single lo-
23 cation; and

24 (F) consulting with pregnant and
25 postpartum individuals to conduct an assess-

1 ment of the activities conducted under this sec-
2 tion.

3 (2) Promoting evidence-based health literacy
4 and pregnancy, childbirth, and parenting education
5 for pregnant and postpartum individuals, and indi-
6 viduals seeking to become pregnant.

7 (3) Providing support from perinatal health
8 workers and clinical and support providers to preg-
9 nant and postpartum individuals.

10 (4) Providing culturally congruent, linguistically
11 appropriate, and trauma-informed training to
12 perinatal health workers.

13 (5) Conducting outreach to eligible entities to
14 encourage such entities to apply for grants under
15 this section.

16 (6) Providing technical assistance to the eligible
17 entities receiving funding under this section.

18 (c) MINIMUM FOR COMMUNITY-BASED ORGANIZA-
19 TIONS.—Of the amounts made available by subsection (a),
20 the Secretary shall award not less than \$75,000,000 for
21 the Office of Minority Health to award grants to commu-
22 nity-based organizations to carry out the activities de-
23 scribed in subsection (b).

1 **SEC. 31042. FUNDING TO GROW AND DIVERSIFY THE NURS-**
2 **ING WORKFORCE IN MATERNAL AND**
3 **PERINATAL HEALTH.**

4 (a) IN GENERAL.—In addition to amounts otherwise
5 available, there is appropriated to the Secretary for fiscal
6 year 2022, out of any money in the Treasury not otherwise
7 appropriated, \$150,000,000, to remain available until ex-
8 pended, for grants to accredited schools of nursing for the
9 purpose of growing and diversifying the perinatal nursing
10 workforce.

11 (b) USE OF FUNDS.—Amounts made available by
12 subsection (a) shall be used for the following activities:

13 (1) Providing scholarships to students seeking
14 to become nurse practitioners whose education in-
15 cludes a focus on maternal and perinatal health.

16 (2) Providing scholarships to students seeking
17 to become clinical nurse specialists whose education
18 includes a focus on maternal and perinatal health.

19 (3) Providing scholarships to students seeking
20 to become certified nurse midwives.

21 (4) Providing scholarships to registered nurses
22 seeking certification as an obstetrician gynecologist
23 registered nurse.

24 (5) Developing and implementing strategies to
25 recruit and retain a diverse pool of students seeking

1 to enter careers focused on maternal and perinatal
2 health.

3 (6) Developing partnerships with practice set-
4 tings in a health professional shortage area des-
5 igned under section 332 of the Public Health Serv-
6 ice Act (42 U.S.C. 254e) for the clinical placements
7 of students at the schools receiving such grants.

8 (7) Developing curriculum for students seeking
9 to enter careers focused on maternal and perinatal
10 health that includes training programs on bias, rac-
11 ism, or discrimination.

12 (8) Carrying out other activities under title
13 VIII of the Public Health Service Act (42 U.S.C.
14 296 et seq.) for the purpose under subsection (a).

15 (c) PRIORITY.—Of the amounts made available by
16 subsection (a), the Secretary shall give priority to accred-
17 ited schools of nursing that will prioritize awarding schol-
18 arships under paragraphs (1) through (4) of subsection
19 (b) to students and registered nurses who practice in a
20 health professional shortage area designated under such
21 section of the Public Health Service Act.

22 **SEC. 31043. FUNDING TO GROW AND DIVERSIFY THE DOULA**
23 **WORKFORCE.**

24 (a) IN GENERAL.—In addition to amounts otherwise
25 available, there is appropriated to the Secretary for fiscal

1 year 2022, out of any money in the Treasury not otherwise
2 appropriated, \$50,000,000, to remain available until ex-
3 pended, for grants to health professions schools, academic
4 health centers, State or local governments, territories, In-
5 dian Tribes and Tribal organizations, urban Indian orga-
6 nizations, or other appropriate public or private nonprofit
7 entities (or consortia of entities, including entities pro-
8 moting multidisciplinary approaches), to establish or ex-
9 pand programs to grow and diversify the doula workforce.

10 (b) USE OF FUNDS.—Amounts made available by
11 subsection (a) shall be used for the following activities:

12 (1) Establishing programs that provide edu-
13 cation and training to individuals seeking appro-
14 priate training or certification as doulas.

15 (2) Expanding the capacity of existing pro-
16 grams described in paragraph (1), for the purpose of
17 increasing the number of students enrolled in such
18 programs, including by awarding scholarships for
19 students.

20 (3) Developing and implementing strategies to
21 recruit and retain students from underserved com-
22 munities, particularly from demographic groups ex-
23 perience high rates of maternal mortality and se-
24 vere maternal morbidity, including racial and ethnic

1 minority groups, into programs described in para-
2 graphs (1) and (2).

3 **SEC. 31044. FUNDING TO GROW AND DIVERSIFY THE MA-**
4 **TERNAL MENTAL HEALTH AND SUBSTANCE**
5 **USE DISORDER TREATMENT WORKFORCE.**

6 (a) IN GENERAL.—In addition to amounts otherwise
7 available, there is appropriated to the Secretary for fiscal
8 year 2022, out of any money in the Treasury not otherwise
9 appropriated, \$75,000,000, to remain available until ex-
10 pended, for grants to health professions schools, academic
11 health centers, State or local governments, territories, In-
12 dian Tribes and Tribal organizations, urban Indian orga-
13 nizations, or other appropriate public or private nonprofit
14 entities (or consortia of entities, including entities pro-
15 moting multidisciplinary approaches), to establish or ex-
16 pand programs to grow and diversify the maternal mental
17 health and substance use disorder treatment workforce.

18 (b) USE OF FUNDS.—Amounts made available by
19 subsection (a) shall be used for the following activities:

20 (1) Establishing programs that provide edu-
21 cation and training to individuals seeking appro-
22 priate licensing or certification as mental health or
23 substance use disorder treatment providers who plan
24 to specialize in maternal mental health conditions or
25 substance use disorders.

1 (2) Expanding the capacity of existing pro-
2 grams described in paragraph (1), for the purposes
3 of increasing the number of students enrolled in
4 such programs, including by awarding scholarships
5 for students.

6 (3) Developing and implementing strategies to
7 recruit and retain students from underserved com-
8 munities into programs described in paragraphs (1)
9 and (2).

10 **SEC. 31045. MATERNAL MENTAL HEALTH EQUITY GRANT**
11 **PROGRAMS.**

12 (a) IN GENERAL.—In addition to amounts otherwise
13 available, there is appropriated to the Secretary for fiscal
14 year 2022, out of any money in the Treasury not otherwise
15 appropriated, \$100,000,000, to remain available until ex-
16 pended, for grants to community-based organizations,
17 health care providers, accredited medical schools, accred-
18 ited schools of nursing, teaching hospitals, midwifery pro-
19 grams, physician assistant education programs, residency
20 or fellowship programs, or other schools or programs de-
21 termined appropriate by the Secretary, to address mater-
22 nal mental health conditions and substance use disorders
23 with respect to pregnant, lactating, and postpartum indi-
24 viduals in areas with high rates of adverse maternal health

1 outcomes or with significant racial or ethnic disparities in
2 maternal health outcomes.

3 (b) USE OF FUNDS.—Amounts made available pursu-
4 ant to subsection (a) shall be for the following activities:

5 (1) Establishing or expanding maternity care
6 programs to improve the integration of mental
7 health and substance use disorder treatment services
8 into primary care settings where pregnant individ-
9 uals regularly receive health care services.

10 (2) Establishing or expanding group prenatal
11 care programs or postpartum care programs.

12 (3) Expanding existing programs that improve
13 maternal mental health and substance use disorder
14 treatment from the prenatal through the postpartum
15 periods, with a focus on individuals from racial and
16 ethnic minority groups with high rates of maternal
17 mortality and morbidity.

18 (4) Providing services and support for individ-
19 uals with maternal mental health conditions and
20 substance use disorders, starting in pregnancy and
21 continuing through the postpartum period.

22 (5) Addressing stigma associated with maternal
23 mental health conditions and substance use dis-
24 orders, with a focus on racial and ethnic minority
25 groups.

1 (6) Raising awareness of warning signs of ma-
2 ternal mental health conditions and substance use
3 disorders, with a focus on pregnant, lactating, and
4 postpartum individuals from racial and ethnic mi-
5 nority groups.

6 (7) Establishing or expanding programs to pre-
7 vent suicide or self-harm among pregnant, lactating,
8 and postpartum individuals.

9 (8) Offering evidence-aligned programs at free-
10 standing birth centers that provide maternal mental
11 health and substance use disorder education, treat-
12 ments, and services, and other services for individ-
13 uals throughout the prenatal and postpartum period.

14 (9) Establishing or expanding programs to pro-
15 vide education and training to maternity care pro-
16 viders with respect to—

17 (A) identifying potential warning signs for
18 maternal mental health conditions or substance
19 use disorders in pregnant, lactating, and
20 postpartum individuals, with a focus on individ-
21 uals from racial and ethnic minority groups;
22 and

23 (B) in the case where such providers iden-
24 tify such warning signs, offering referrals to

1 mental health substance use disorder treatment
2 professionals.

3 (10) Developing a national website, or other
4 source, that includes information on health care pro-
5 viders who treat maternal mental health conditions
6 and substance use disorders.

7 (11) Establishing or expanding programs in
8 communities to improve coordination between mater-
9 nity care providers and mental and behavioral health
10 care providers who treat maternal mental health
11 conditions and substance use disorders.

12 (12) Carrying other programs aligned with evi-
13 dence-based or evidence-informed practices for ad-
14 dressing maternal mental health conditions and sub-
15 stance use disorders for pregnant and postpartum
16 individuals from racial and ethnic minority groups.

17 **SEC. 31046. FUNDING FOR EDUCATION AND TRAINING AT**
18 **HEALTH PROFESSIONS SCHOOLS TO IDEN-**
19 **TIFY AND ADDRESS HEALTH RISKS ASSOCI-**
20 **ATED WITH CLIMATE CHANGE.**

21 (a) IN GENERAL.—In addition to amounts otherwise
22 available, there is appropriated to the Secretary for fiscal
23 year 2022, out of any money in the Treasury not otherwise
24 appropriated, \$85,000,000, to remain available until ex-
25 pended, for grants to accredited medical schools, accred-

1 ited schools of nursing, teaching hospitals, midwifery pro-
2 grams, physician assistant education programs, residency
3 or fellowship programs, or other schools or programs de-
4 termined appropriate by the Secretary, to support the de-
5 velopment and integration of education and training pro-
6 grams for identifying and addressing health risks associ-
7 ated with climate change for pregnant, lactating, and
8 postpartum individuals.

9 (b) USE OF FUNDS.—Amounts made available by
10 subsection (a) shall be used for developing, integrating,
11 and implementing curriculum and continuing education
12 that focuses on the following:

13 (1) Identifying health risks associated with cli-
14 mate change for pregnant, lactating, and
15 postpartum individuals and individuals with the in-
16 tent to become pregnant.

17 (2) How health risks associated with climate
18 change affect pregnant, lactating, and postpartum
19 individuals and individuals with the intent to become
20 pregnant.

21 (3) Racial and ethnic disparities in exposure to,
22 and the effects of, health risks associated with cli-
23 mate change for pregnant, lactating, and
24 postpartum individuals and individuals with the in-
25 tent to become pregnant.

1 (4) Patient counseling and mitigation strategies
2 relating to health risks associated with climate
3 change for pregnant, lactating, and postpartum indi-
4 viduals.

5 (5) Relevant services and support for pregnant,
6 lactating, and postpartum individuals relating to
7 health risks associated with climate change and
8 strategies for ensuring such individuals have access
9 to such services and support.

10 (6) Implicit and explicit bias, racism, and dis-
11 crimination in providing care to pregnant, lactating,
12 and postpartum individuals and individuals with the
13 intent to become pregnant.

14 **SEC. 31047. GRANTS TO MINORITY-SERVING INSTITUTIONS**
15 **TO STUDY MATERNAL MORTALITY, SEVERE**
16 **MATERNAL MORBIDITY, AND ADVERSE MA-**
17 **TERNAL HEALTH OUTCOMES.**

18 (a) IN GENERAL.—In addition to amounts otherwise
19 available, there is appropriated to the Secretary for fiscal
20 year 2022, out of any money in the Treasury not otherwise
21 appropriated, \$50,000,000, to remain available until ex-
22 pended for minority-serving institutions described in sec-
23 tion 371 of the Higher Education Act of 1965 (20 U.S.C.
24 1067q).

1 (b) USE OF FUNDS.—Amounts made available by
2 subsection (a) shall be used for the following activities:

3 (1) Developing and implementing systematic
4 processes of listening to the stories of pregnant and
5 postpartum individuals from racial and ethnic mi-
6 nority groups, and perinatal health workers sup-
7 porting such individuals, to fully understand the
8 causes of, and inform potential solutions to, the ma-
9 ternal mortality and severe maternal morbidity crisis
10 within their respective communities.

11 (2) Assessing the potential causes of relatively
12 low rates of maternal mortality among Hispanic in-
13 dividuals and foreign-born Black women.

14 (3) Assessing differences in rates of adverse
15 maternal health outcomes among subgroups identi-
16 fying as Hispanic.

17 (4) Conducting outreach to eligible minority-
18 serving institutions to raise awareness of the avail-
19 ability of the grants.

20 (5) Providing technical assistance on the appli-
21 cation process for such grant.

22 (6) Promoting capacity building to eligible enti-
23 ties.

1 **SEC. 31048. FUNDING FOR IDENTIFICATION OF MATERNITY**
2 **CARE HEALTH PROFESSIONAL TARGET**
3 **AREAS.**

4 In addition to amounts otherwise available, there is
5 appropriated to the Secretary for fiscal year 2022, out of
6 any money in the Treasury not otherwise appropriated,
7 \$25,000,000, to remain available until expended, for car-
8 rying out section 332(k) of the Public Health Service Act
9 (42 U.S.C. 254e(k)).

10 **SEC. 31049. FUNDING FOR MATERNAL MORTALITY REVIEW**
11 **COMMITTEES TO PROMOTE REPRESENTA-**
12 **TIVE COMMUNITY ENGAGEMENT.**

13 In addition to amounts otherwise available, there is
14 appropriated to the Secretary for fiscal year 2022, out of
15 any money in the Treasury not otherwise appropriated,
16 \$50,000,000, to remain available until expended, for car-
17 rying out section 317K(d) of the Public Health Service
18 Act (42 U.S.C. 247b–12(d)) to promote community en-
19 gagement in maternal mortality review committees to in-
20 crease the diversity of a committee’s membership with re-
21 spect to race and ethnicity, location, and professional
22 background.

1 **SEC. 31050. FUNDING FOR THE SURVEILLANCE FOR**
2 **EMERGING THREATS TO MOTHERS AND BA-**
3 **BIES.**

4 (a) **IN GENERAL.**—In addition to amounts otherwise
5 available, there is appropriated to the Secretary for fiscal
6 year 2022, out of any money in the Treasury not otherwise
7 appropriated, \$100,000,000, to remain available until ex-
8 pended, for carrying out section 317K of the Public
9 Health Service Act (42 U.S.C. 247b–12) with respect to
10 conducting surveillance for emerging threats to mothers
11 and babies.

12 (b) **USE OF FUNDS.**—Amounts made available by
13 subsection (a) shall be used for the following activities:

14 (1) Expanding the Surveillance for Emerging
15 Threats to Mothers and Babies activities of the Cen-
16 ters for Disease Control and Prevention.

17 (2) Working with public health, clinical, and
18 community-based organizations to provide timely,
19 continually updated, evidence-based guidance to fam-
20 ilies and health care providers on ways to reduce
21 risk to pregnant and postpartum individuals and
22 their newborns and tailor interventions to improve
23 their long-term health.

24 (3) Partnering with more State, Tribal, terri-
25 torial, and local public health programs in the collec-
26 tion and analysis of clinical data on the impact of

1 COVID–19 on pregnant and postpartum patients
2 and their newborns, particularly among patients
3 from racial and ethnic minority groups.

4 (4) Establishing regionally based centers of ex-
5 cellence to offer medical, public health, and other
6 knowledge to ensure that communities, especially
7 communities with large populations of individuals
8 from racial and ethnic minority groups, can help
9 pregnant and postpartum individuals and newborns
10 get the care and support they need.

11 **SEC. 31051. FUNDING FOR THE ENHANCING REVIEWS AND**
12 **SURVEILLANCE TO ELIMINATE MATERNAL**
13 **MORTALITY PROGRAM.**

14 (a) IN GENERAL.—In addition to amounts otherwise
15 available, there is appropriated to the Secretary for fiscal
16 year 2022, out of any money in the Treasury not otherwise
17 appropriated, \$30,000,000, to remain available until ex-
18 pended, for carrying out the Enhancing Reviews and Sur-
19 veillance to Eliminate Maternal Mortality program estab-
20 lished under section 317K of the Public Health Service
21 Act (42 U.S.C. 247b–12).

22 (b) USE OF FUNDS.—Amounts made available by
23 subsection (a) shall be used for the following activities:

24 (1) Expanding the Enhancing Reviews and Sur-
25 veillance to Eliminate Maternal Mortality program

1 (commonly known as the “ERASE MM program”)
2 of the Centers for Disease Control and Prevention.

3 (2) Expanding partnerships with States, terri-
4 tories, Indian Tribes, and Tribal organizations to
5 support Maternal Mortality Review Committees.

6 (3) Providing technical assistance to existing
7 maternal mortality review committees.

8 **SEC. 31052. FUNDING FOR THE PREGNANCY RISK ASSESS-**
9 **MENT MONITORING SYSTEM.**

10 (a) IN GENERAL.—In addition to amounts otherwise
11 available, there is appropriated to the Secretary for fiscal
12 year 2022, out of any money in the Treasury not otherwise
13 appropriated, \$15,000,000, to remain available until ex-
14 pended, for carrying out section 317K of the Public
15 Health Service Act (42 U.S.C. 247b–12) with respect to
16 the Pregnancy Risk Assessment Monitoring System.

17 (b) USE OF FUNDS.—Amounts made available by
18 subsection (a) shall be used for the following activities:

19 (1) Supporting COVID–19 supplements to the
20 Pregnancy Risk Assessment Monitoring System
21 questionnaire.

22 (2) Conducting a rapid assessment of COVID–
23 19 awareness, impact on care and experiences, and
24 use of preventive measures among pregnant, labor-
25 ing and birthing, and postpartum individuals.

1 (3) Supporting the transition of the question-
2 naire described in paragraph (1) to an electronic
3 platform and expanding the distribution of the ques-
4 tionnaire to a larger population, with a special focus
5 on reaching underrepresented communities.

6 **SEC. 31053. FUNDING FOR THE NATIONAL INSTITUTE OF**
7 **CHILD HEALTH AND HUMAN DEVELOPMENT.**

8 In addition to amounts otherwise available, there is
9 appropriated to the Secretary for fiscal year 2022, out of
10 any money in the Treasury not otherwise appropriated,
11 \$15,000,000, to remain available until expended, for car-
12 rying out section 301 of the Public Health Service Act
13 (42 U.S.C. 241) and title IV of the Public Health Service
14 Act (42 U.S.C. 281 et seq.) with respect to child health
15 and human development, to conduct or support research
16 for interventions to mitigate the effects of the COVID-
17 19 public health emergency on pregnant, lactating, and
18 postpartum individuals, with a particular focus on individ-
19 uals from racial and ethnic minority groups.

20 **SEC. 31054. GRANTS TO EXPAND THE USE OF TECHNOLOGY-**
21 **ENABLED COLLABORATIVE LEARNING AND**
22 **CAPACITY MODELS FOR PREGNANT AND**
23 **POSTPARTUM INDIVIDUALS.**

24 (a) IN GENERAL.—In addition to amounts otherwise
25 available, there is appropriated to the Secretary for fiscal

1 year 2022, out of any money in the Treasury not otherwise
2 appropriated, \$30,000,000, to remain available until ex-
3 pended, for grants to community-based organizations,
4 health care providers, accredited medical schools, accred-
5 ited schools of nursing, teaching hospitals, midwifery pro-
6 grams, physician assistant education programs, residency
7 or fellowship programs, or other schools or programs de-
8 termined appropriate by the Secretary, that are operating
9 in health professional shortage areas designated under
10 section 332 of the Public Health Service Act (42 U.S.C.
11 254e) with high rates of adverse maternal health outcomes
12 or significant racial and ethnic disparities in maternal
13 health outcomes, to evaluate, develop, and expand the use
14 of technology-enabled collaborative learning.

15 (b) USE OF FUNDS.—

16 (1) GRANTEES.—A recipient of a grant award-
17 ed pursuant to subsection (a) shall use such grant
18 amounts to—

19 (A) train maternal health care providers
20 and students through the use and expansion of
21 technology-enabled collaborative learning and
22 capacity building models, including hardware
23 and software that—

24 (i) enables distance learning and tech-
25 nical support; and

1 (ii) supports the secure exchange of
2 electronic health information; and

3 (B) conduct evaluations on the use of tech-
4 nology-enabled collaborative learning to improve
5 maternal health outcomes.

6 (2) SECRETARY.—The Secretary shall use
7 amounts made available pursuant to subsection (a)
8 to provide technical assistance to recipients of grants
9 awarded pursuant to subsection (a) on the develop-
10 ment, use, and sustainability of technology-enabled
11 collaborative learning and capacity building models
12 to expand access to maternal health services pro-
13 vided by such entities.

14 **SEC. 31055. GRANTS TO PROMOTE EQUITY IN MATERNAL**
15 **HEALTH OUTCOMES THROUGH DIGITAL**
16 **TOOLS.**

17 (a) IN GENERAL.—In addition to amounts otherwise
18 available, there is appropriated to the Secretary for fiscal
19 year 2022, out of any money in the Treasury not otherwise
20 appropriated, \$30,000,000, to remain available until ex-
21 pended, for grants to community-based organizations,
22 health care providers, accredited medical schools, accred-
23 ited schools of nursing, teaching hospitals, midwifery pro-
24 grams, physician assistant education programs, residency
25 or fellowship programs, or other schools or programs de-

1 terminated appropriate by the Secretary, that are operating
2 in health professional shortage areas designated under
3 section 332 of the Public Health Service Act (42 U.S.C.
4 254e) with high rates of adverse maternal health outcomes
5 or significant racial and ethnic disparities in maternal
6 health outcomes to reduce racial and ethnic disparities in
7 maternal health outcomes by increasing access to digital
8 tools related to maternal health care.

9 (b) USE OF FUNDS.—Amounts made available pursu-
10 ant to subsection (a) shall be used for the following activi-
11 ties:

12 (1) Increasing access to digital tools that could
13 improve maternal health outcomes, such as wearable
14 technologies, patient portals, telehealth services, and
15 mobile phone applications.

16 (2) Providing technical assistance to recipients
17 of grants awarded pursuant to subsection (a) on the
18 development, use, evaluation, and postgrant sustain-
19 ability of digital tools for purposes of promoting eq-
20 uity in maternal health outcomes.

21 **SEC. 31056. FUNDING FOR ANTIDISCRIMINATION AND BIAS**
22 **TRAINING.**

23 (a) IN GENERAL.—In addition to amounts otherwise
24 available, there is appropriated to the Secretary for fiscal
25 year 2022, out of any money in the Treasury not otherwise

1 appropriated, \$25,000,000, to remain available until ex-
2 pended, for the purpose described in subsection (b).

3 (b) USE OF FUNDS.—The Secretary shall use
4 amounts appropriated under subsection (a) to award com-
5 petitive grants or contracts to national nonprofit organiza-
6 tions focused on improving health equity, accredited
7 schools of medicine or nursing, and other health profes-
8 sional training programs to develop, disseminate, review,
9 research, and evaluate training for health professionals
10 and all staff who interact with patients to reduce discrimi-
11 nation and bias in the provision of health care.

12 **PART 5—OTHER PUBLIC HEALTH INVESTMENTS**

13 **SEC. 31061. FUNDING FOR MENTAL HEALTH AND SUB-**
14 **STANCE USE DISORDER PROFESSIONALS.**

15 In addition to amounts otherwise available, there is
16 appropriated to the Secretary for fiscal year 2022, out of
17 any money in the Treasury not otherwise appropriated,
18 \$50,000,000, to remain available until expended, for pur-
19 poses of carrying out section 597 of the Public Health
20 Service Act (42 U.S.C. 290ll).

21 **SEC. 31062. NATIONAL SUICIDE PREVENTION LIFELINE.**

22 In addition to amounts otherwise available, there is
23 appropriated to the Secretary for fiscal year 2022, out of
24 any money in the Treasury not otherwise appropriated,
25 \$75,000,000, to remain available until expended, for ad-

1 vancing infrastructure for the National Suicide Prevention
2 Lifeline program under section 520E–3 of the Public
3 Health Service Act (42 U.S.C. 290bb–36e) in order to ex-
4 pand existing capabilities for response in a manner that
5 avoids duplicating existing capabilities for text-based crisis
6 support.

7 **SEC. 31063. FUNDING FOR COMMUNITY VIOLENCE AND**
8 **TRAUMA INTERVENTIONS.**

9 (a) IN GENERAL.—In addition to amounts otherwise
10 available, there is appropriated to the Secretary, out of
11 any money in the Treasury not otherwise appropriated,
12 \$2,500,000,000, to remain available until expended, for
13 the purposes described in subsection (b), as follows:

- 14 (1) \$150,000,000 for fiscal year 2022.
15 (2) \$250,000,000 for fiscal year 2023.
16 (3) \$450,000,000 for fiscal year 2024.
17 (4) \$550,000,000 for each of fiscal years 2025,
18 2026, and 2027.

19 (b) USE OF FUNDING.—The Secretary, acting
20 through the Director of the Centers for Disease Control
21 and Prevention, and in consultation with the Assistant
22 Secretary for Mental Health and Substance Use, the Ad-
23 ministrator of the Health Resources and Services Admin-
24 istration, and the Deputy Assistant Secretary for Minority
25 Health and with public health and medical professionals,

1 victim services community-based organizations, and other
2 violence reduction experts, shall use amounts appropriated
3 by subsection (a) to support public health approaches to
4 reduce community violence and trauma, taking into con-
5 sideration the needs of communities with high rates of,
6 and prevalence of risk factors associated with, violence-
7 related injuries and deaths, by—

8 (1) awarding competitive grants or contracts to
9 local governmental entities, States, territories, In-
10 dian Tribes and Tribal organizations, urban Indian
11 organizations, hospitals and community health cen-
12 ters, nonprofit community-based organizations, cul-
13 turally specific organizations, victim services pro-
14 viders, or other entities as determined by the Sec-
15 retary (or consortia of such entities) to support evi-
16 dence-based, culturally competent, and develop-
17 mentally appropriate strategies to reduce community
18 violence, including outreach and conflict mediation,
19 hospital-based violence intervention, violence inter-
20 ruption, and services for victims and individuals and
21 communities at risk for experiencing violence, such
22 as trauma-informed mental health care and coun-
23 seling, school-based mental health services, and
24 other services; and

1 (2) supporting training, technical assistance,
2 surveillance systems, and data collection to facilitate
3 support for strategies to reduce community violence
4 and ensure safe and healthy communities.

5 (c) SUPPLEMENT NOT SUPPLANT.—Amounts appro-
6 priated under this section shall be used to supplement and
7 not supplant any Federal, State, or local funding other-
8 wise made available for the purposes described in this sec-
9 tion.

10 **SEC. 31064. FUNDING FOR HIV HEALTH CARE SERVICES**
11 **PROGRAMS.**

12 In addition to amounts otherwise available, there is
13 appropriated to the Secretary for fiscal year 2022, out of
14 any money in the Treasury not otherwise appropriated,
15 \$150,000,000, to remain available until expended, for
16 modifications to existing contracts, and supplements to ex-
17 isting grants and cooperative agreements under parts A,
18 B, C, and D of title XXVI of the Public Health Service
19 Act (42 U.S.C. 300ff–11 et seq.) and section 2692(a) of
20 such Act (42 U.S.C. 300ff–111(a)).

21 **SEC. 31065. SUPPLEMENTAL FUNDING FOR THE WORLD**
22 **TRADE CENTER HEALTH PROGRAM.**

23 (a) SUPPLEMENTAL FUND.—

1 (1) IN GENERAL.—Title XXXIII of the Public
2 Health Service Act (42 U.S.C. 300mm et seq.) is
3 amended by adding at the end the following:

4 **“SEC. 3352. SUPPLEMENTAL FUND.**

5 “(a) IN GENERAL.—There is established a fund to
6 be known as the World Trade Center Health Program
7 Supplemental Fund (referred to in this section as the
8 ‘Supplemental Fund’), consisting of amounts deposited
9 into the Supplemental Fund under subsection (b).

10 “(b) AMOUNT.—Out of any money in the Treasury
11 not otherwise appropriated, there is appropriated for fiscal
12 year 2022, \$2,860,000,000, for deposit into the Supple-
13 mental Fund, which amounts shall remain available
14 through fiscal year 2031.

15 “(c) USES OF FUNDS.—Amounts deposited into the
16 Supplemental Fund under subsection (b) shall be avail-
17 able, without further appropriation and without regard to
18 any spending limitation under section 3351(c), to the
19 WTC Program Administrator as needed at the discretion
20 of such Administrator for carrying out any provision in
21 this title, including sections 3303 and 3341(c).

22 “(d) RETURN OF FUNDS.—Any amounts that remain
23 in the Supplemental Fund on September 30, 2031, shall
24 be deposited into the Treasury as miscellaneous receipts.”.

1 (2) CONFORMING AMENDMENTS.—Title
2 XXXIII of the Public Health Service Act (42 U.S.C.
3 300mm et seq.) is amended—

4 (A) in section 3311(a)(4)(B)(i)(II) (42
5 U.S.C. 300mm–21(a)(4)(B)(i)(II)), by striking
6 “section 3351” and inserting “sections 3351
7 and 3352”;

8 (B) in section 3321(a)(3)(B)(i)(II) (42
9 U.S.C. 300mm–31(a)(3)(B)(i)(II)), by striking
10 “section 3351” and inserting “sections 3351
11 and 3352”;

12 (C) in section 3331 (42 U.S.C. 300mm–
13 41)—

14 (i) in subsection (a), by inserting
15 “and the World Trade Center Health Pro-
16 gram Supplemental Fund” before the pe-
17 riod at the end; and

18 (ii) in subsection (d)—

19 (I) in paragraph (1)(B), by in-
20 serting “(excluding any expenditures
21 from amounts in the World Trade
22 Center Health Program Supplemental
23 Fund under section 3352)” before the
24 period at the end; and

1 (II) in paragraph (2), in the
2 flush text following subparagraph (C),
3 by inserting “(excluding any expendi-
4 tures from amounts in the World
5 Trade Center Health Program Sup-
6 plemental Fund under section 3352)”
7 before the period at the end; and

8 (D) in section 3351(b) (42 U.S.C.
9 300mm–61(b))—

10 (i) in paragraph (2), by inserting “or
11 as available from the World Trade Center
12 Health Program Supplemental Fund under
13 section 3352” before the period at the end;
14 and

15 (ii) in paragraph (3), by inserting “or
16 as available from the World Trade Center
17 Health Program Supplemental Fund under
18 section 3352” before the period at the end.

19 (b) RESEARCH COHORT FOR EMERGING HEALTH IM-
20 PACTS ON YOUTH.—

21 (1) IN GENERAL.—Section 3341 of the Public
22 Health Service Act (42 U.S.C. 300mm–51) is
23 amended—

24 (A) by redesignating subsections (c) and
25 (d) as subsections (d) and (e), respectively; and

1 (B) by inserting after subsection (b) the
2 following:

3 “(c) RESEARCH COHORT FOR EMERGING HEALTH
4 IMPACTS ON YOUTH.—The WTC Program Administrator
5 shall establish a research cohort of sufficient size to con-
6 duct research studies on the health and educational im-
7 pacts of exposure to airborne toxins, or any other hazard
8 or adverse condition, resulting from the September 11,
9 2001, terrorist attacks on the population of individuals
10 who were 21 years of age or younger at the time of expo-
11 sure and who are enrolled in the WTC Program or other-
12 wise eligible for enrollment in the Program under section
13 3321.”.

14 (2) SPENDING LIMITATION EXEMPTION.—Sec-
15 tion 3351(c)(5) of such Act (42 U.S.C. 300mm-
16 61(c)(5)) is amended in the matter preceding sub-
17 paragraph (A), by inserting “(other than subsection
18 (c) of such section)” after “section 3341”.

19 (3) CONFORMING AMENDMENT.—Section
20 3301(f)(2)(E) of such Act (42 U.S.C.
21 300mm(f)(2)(E)) is amended by striking “section
22 3341(a)” and inserting “subsection (a) or (c) of sec-
23 tion 3341”.