

ONE HUNDRED NINETEENTH CONGRESS

# Congress of the United States

## House of Representatives

### COMMITTEE ON ENERGY AND COMMERCE

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April 13, 2026

#### MEMORANDUM

To: Subcommittee on Health Members and Staff  
From: Committee on Energy and Commerce Majority Staff  
Re: Subcommittee on Health Hearing on April 15, 2026

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#### I. INTRODUCTION

The Subcommittee on Health will hold a hearing on Wednesday, April 15, 2026, at 10:15 a.m. (ET) in 2123 Rayburn House Office Building. The hearing is entitled “Healthier America: Legislative Proposals to Improve Public Health.” The Subcommittee intends to discuss the following pieces of legislation:

- H.R. 4348, To reauthorize the Kay Hagan Tick Act, and for other purposes. (Reps. Smith-NJ and Doggett)
- H.R. 4541, EARLY Act Reauthorization of 2025 (Reps. Wasserman Schultz and Miller-Meeks)
- H.R. 3747, Accelerating Access to Dementia and Alzheimer’s Provider Training Act (Reps. Balderson and Barragán)
- H.R. 8209, School-Based Health Centers Reauthorization Act of 2026 (Reps. Tonko and Balderson)
- H.R. 5160, Stem Cell Therapeutic and Research Reauthorization Act of 2025 (Reps. Smith-NJ and Matsui)
- H.R. 8205, Accelerating Access to Critical Therapies for ALS Reauthorization Act of 2026 (Reps. Quigley and Calvert)
- H.R. 6121, Promoting Physical Activity for Americans Act (Reps. Moore and Panetta)
- H.R. \_\_\_\_, [Nutrition Education and Chronic Disease Prevention in Community Health Centers Act of 2026] (Rep. Harshbarger)
- H.R. 8201, Expanding Community Access to Health Services Act (Rep. Lee-NV)
- H.R. \_\_\_\_, [Digital Health Screeners Act of 2026] (Rep. Balderson)

#### II. WITNESSES

- **Jamie Ulmer, MA**, President and CEO, Healthcare Network

- **Rachel F. Brem, MD, FACR, FSBI**, Co-Founder, Chief Medical Officer, Brem Foundation to Defeat Breast Cancer and Professor and Vice-Chair Emeritus, The George Washington University
- **Holly Ahern, MS, MT(ASCP)**, Associate Professor of Microbiology, State University of New York Adirondack
- **Amy L. Ronneberg, MBA**, Chief Executive Officer, National Marrow Donor Program
- **Brian Wallach & Sandra Abrevaya**, Co-Founders, I AM ALS
- **René Quashie, JD**, Vice President, Digital Health, Consumer Technology Association

### III. BACKGROUND

The Trump Administration has identified rising rates of chronic disease in the United States as a critical public health challenge. Federal public health agencies, including the Food and Drug Administration (FDA), the Centers for Disease Control and Prevention (CDC), and the National Institutes of Health (NIH), and the Health Resources and Services Administration (HRSA) play key roles in implementing elements of this agenda.

According to the CDC, most chronic diseases are caused by certain risk factors such as tobacco use, poor nutrition, and physical inactivity.<sup>1</sup> The CDC administers key programs aimed at addressing chronic diseases, which include but are not limited to, efforts to improve nutrition, prevent diabetes, detect cancer early, and combat vector borne diseases, among others.<sup>2</sup>

HRSA provides critical resources to providers in the community, such as Federally Qualified Health Centers, the National Health Service Corps, Teaching Health Centers, and School-Based Health Centers.<sup>3</sup> These practitioners are tasked with providing primary care, pediatric care, obstetrics and gynecology, preventative care, and often focus on chronic diseases and conditions.

The FDA is responsible for protecting public health by ensuring the safety of food, drugs, medical devices, cosmetics, and other consumer products regulated under the Federal Food, Drug, and Cosmetic Act (FDCA). In addition to more traditional product categories overseen by the FDA, stakeholders have identified the growing role of wearable health technologies, including devices that monitor physical activity, heart rate, sleep patterns, and other physiological metrics, as tools that may empower individuals to better understand and manage their health. Secretary Kennedy has described wearable devices as an important component of the Make America Healthy Again (MAHA) agenda, specifically focusing on the idea that greater access to personal health data could encourage healthier lifestyle choices and earlier identification of potential health risks.<sup>4</sup>

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<sup>1</sup> U.S. CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC), *About Chronic Diseases* (Mar. 4, 2025), <https://www.cdc.gov/chronic-disease/about/index.html>.

<sup>2</sup> *Id.*

<sup>3</sup> HEALTH RESOURCES AND SERVICES ADMINISTRATION (HRSA), *Who We Are*, <https://bphc.hrsa.gov/> (last accessed on Apr. 1, 2026).

<sup>4</sup> Alexa Mikhail, *RFK Jr. wants more people wearing health wearables in the name of 'MAHA'*, FORTUNE (Jul. 3, 2025), <https://fortune.com/2025/07/03/rfk-jr-health-wearables/>.

This hearing will explore several bills addressing various areas of public health, including disease research and prevention efforts, bolstering resources for rural medical services and health care providers, promoting healthy activities, and increasing access to care.

### **A. National Public Health Strategy for the Prevention and Control of Vector-Borne Diseases in People and Regional Centers of Excellence in Vector-Borne Disease**

Vector-borne diseases (VBD) are major causes of death and illness worldwide, and the United States continues strengthening its response to these threats. VBDs include, but are not limited to: Zika, West Nile virus, dengue, malaria, plague, Lyme disease, and Rocky Mountain spotted fever (RMSF). A vector is a living organism that can transmit infectious pathogens between humans, or from animals to humans. The most common vectors are mosquitoes, ticks, fleas, or lice. VBDs are increasingly posing a threat to Americans, with reported cases doubling over the last two decades.<sup>5</sup> Tickborne disease cases are particularly on the rise, and ticks are spreading to new geographic areas. Each year, approximately 90 percent of reported VBD cases are tickborne disease cases (50,865 of the total 56,045 reported cases in 2019).<sup>6</sup> Lyme disease is the leading cause of tickborne disease, accounting for more than 8 out of 10 reported tickborne disease cases annually. Recent estimates suggest that approximately 476,000 people are diagnosed and treated for Lyme disease each year in the United States.<sup>7</sup>

The National Public Health Strategy for the Prevention and Control of Vector-Borne Diseases in People identifies federal priorities and agency coordination to protect people from conditions caused by vectors in the United States.<sup>8</sup> The Centers of Excellence in Vector-Borne Diseases conduct applied research and professional training, collaborate between state and local partners, and develop, evaluate, and implement strategies that suppress ticks and mosquitoes and the pathogens they spread.<sup>9</sup>

### **B. Young Women's Breast Health Education and Awareness**

As directed by Congress, CDC develops initiatives to increase knowledge of breast health and breast cancer among women, particularly those younger than 40 and those at higher risk for developing the disease.<sup>10</sup> In 2022, a total of 27,136 new cases of breast cancer were reported in women younger than 45 years in the United States.<sup>11</sup> About 10 percent of all breast cancer cases in the United States are found in women younger than 45.<sup>12</sup>

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<sup>5</sup> CDC, *National Public Health Strategy to Prevent and Control Vector-Borne Diseases in People* (Dec. 22, 2025), <https://www.cdc.gov/vector-borne-diseases/media/pdfs/2024/05/VBD-National-Strategy-508.pdf>.

<sup>6</sup> *Id.*

<sup>7</sup> *Id.*

<sup>8</sup> *Id.*

<sup>9</sup> CDC, Vector-Borne Diseases, *Centers of Excellence in Vector-Borne Diseases* (Apr. 25, 2024), [https://www.cdc.gov/vector-borne-diseases/what-cdc-is-doing/centers-of-excellence-in-vector-borne-diseases.html?CDC\\_AAref\\_Val=https://www.cdc.gov/ncezid/dvbd/about/prepare-nation/coe.html](https://www.cdc.gov/vector-borne-diseases/what-cdc-is-doing/centers-of-excellence-in-vector-borne-diseases.html?CDC_AAref_Val=https://www.cdc.gov/ncezid/dvbd/about/prepare-nation/coe.html).

<sup>10</sup> CDC, Breast Cancer, *Advisory Committee on Breast Cancer in Young Women* (Sept. 3, 2025), <https://www.cdc.gov/breast-cancer/php/advisory-committee/index.html>.

<sup>11</sup> CDC, United States Cancer Statistics, *Breast Cancer Among Women Younger Than 45* (Aug. 15, 2025), <https://www.cdc.gov/united-states-cancer-statistics/publications/breast-cancer-among-young-women.html>.

<sup>12</sup> CDC, Bring Your Brave Campaign, *About the Bring Your Brave Campaign* (Sept. 24, 2024), <https://www.cdc.gov/bring-your-brave/about/index.html>.

CDC's efforts to encourage breast health and prevent young women's breast cancer include, but are not limited to, promoting an educational campaign for health care professionals, facilitated by CDC and HRSA; conducting research on breast cancer prevention in younger women; and awarding grants to provide support and health information to young women diagnosed with cancer and other pre-neoplastic diseases.

### **C. Project ECHO (Expanding Capacity for Health Outcomes) Grant Program**

Through the Technology-enabled Collaborative Learning Program, HRSA issues grant awards to health care providers for recruitment and retention and to increase access to health care services. This program plays a crucial role for specialty care in rural and underserved areas, and for medically underserved populations. The Extension for Community Healthcare Outcomes (ECHO) is a tele-mentoring model of continuing medical education and care management instruction that uses video-conferencing technology to train, advise, and support clinicians to improve access to specialty treatment in rural and underserved areas.<sup>13</sup>

### **D. School-Based Health Centers Grant Program**

HRSA allocates resources to school-based health centers (SBHC), which offer primary care services in school settings.<sup>14</sup> Such services include, but are not limited to, routine check-ups, sick visits, chronic condition treatment, behavioral health care, and dental and vision care. Most recent data indicates that there are approximately 3,900 SBHCs nationwide and can be found in nearly every state, along with the District of Columbia and U.S. territories.<sup>15</sup>

### **E. C.W. Bill Young Cell Transplantation Program (CWBYCTP) and the National Cord Blood Inventory Program**

CWBYCTP supports patients in need of a bone marrow or cord blood transplant. These patients often have inherited metabolic or immune system disorders. Specifically, this program disseminates information about bone marrow and cord blood to relevant individuals, collects data, and expands research capacity for this patient population.<sup>16</sup>

### **F. FDA Rare Neurodegenerative Disease Grant Program, HHS/NIH-funded Expanded Access Programs (EAP), and the Public-Private Partnership for Neurodegenerative Diseases**

The Accelerating Access to Critical Therapies for ALS Act established grant programs at NIH and FDA for research and treatment development for ALS, as well as a public-private partnership for rare neurodegenerative diseases.<sup>17</sup> The CDC estimates that about 5,000 people are diagnosed with ALS each year and approximately 34,000 individuals in the United States

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<sup>13</sup> HRSA, Report to Congress, *Technology-Enabled Collaborative Learning Program 2024* (2024), [https://www.govinfo.gov/content/pkg/CMR-HE20\\_9000-00191079/pdf/CMR-HE20\\_9000-00191079.pdf](https://www.govinfo.gov/content/pkg/CMR-HE20_9000-00191079/pdf/CMR-HE20_9000-00191079.pdf).

<sup>14</sup> Public Health Service Act, 42 U.S.C. § 280h-5.

<sup>15</sup> School-Based Health Alliance, *Findings from the 2022 National Census of School-Based Health Centers*, <https://sbh4all.org/wp-content/uploads/2023/10/FINDINGS-FROM-THE-2022-NATIONAL-CENSUS-OF-SCHOOL-BASED-HEALTH-CENTERS-09.20.23.pdf> (last accessed on Apr. 6, 2026).

<sup>16</sup> HRSA, Blood Stem Cell, *About*, <https://bloodstemcell.hrsa.gov/about> (last accessed on Apr. 6, 2026).

<sup>17</sup> Accelerating Access to Critical Therapies for ALS Act, Pub. L. No. 117-79, 135 Stat. 1533.

were living with ALS in 2025.<sup>18</sup> It takes between 10 to 16 months on average to diagnose ALS after symptom onset.<sup>19</sup> ALS is a progressive neurodegenerative disease, and while disease progression varies for each individual, patients typically survive 2 to 5 years after diagnosis.<sup>20</sup>

According to a recent Government Accountability Office report, the variability of risk factors, symptom presentation, and disease progression have made it challenging to understand the natural history of the disease or how to prevent or treat ALS.<sup>21</sup> Developing a treatment for ALS is further complicated by the lack of clinically proven biomarkers, making it difficult to rapidly diagnose ALS.<sup>22</sup> Furthermore, the small population of individuals with ALS poses a challenge when testing the safety and efficacy of treatments in clinical trials. These factors compound to create significant barriers for sponsors seeking to develop therapies to treat ALS.

### **G. Wearable Device Regulation**

The 21st Century Cures Act of 2016 amended section 520 of the FDCA, removing certain software functions, including those intended for maintaining or encouraging a healthy lifestyle that are unrelated to the diagnosis, cure, mitigation, prevention, or treatment of a disease or condition, from the definition of a medical device.<sup>23</sup> In the decade since, general wellness products, including wearable devices, have grown in popularity as tools for users to monitor health-related metrics such as physical activity, sleep patterns, and heart rate.

On January 7, 2026, FDA updated previous draft guidance, “General Wellness: Policy for Low-Risk Devices,” clarifying the agency’s interpretation of these statutory provisions and its compliance policy for wellness products, including wearables.<sup>24</sup> The updated guidance expands and clarifies the scope of products considered non-device wellness products, including certain low-risk and noninvasive technologies such as wearable devices intended to promote healthy lifestyles rather than diagnose and treat.

## **IV. LEGISLATION**

### **A. H.R. 4348, To reauthorize the Kay Hagan Tick Act, and for other purposes. (Reps. Smith-NJ and Doggett)**

H.R. 4348 would reauthorize the National Strategy and Regional Centers of Excellence in Vector-Borne Disease and CDC’s cooperative agreements with health departments in areas at high risk of vector-borne diseases through Fiscal Year 2030.

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<sup>18</sup> GOVERNMENT ACCOUNTABILITY OFFICE, *Funding for Rare Neurodegenerative Disease Research and Access to ALS Investigational Drugs*, GAO-26-107691 at 1 (Feb. 2026), <https://www.gao.gov/assets/gao-26-107691.pdf>.

<sup>19</sup> *Id.*

<sup>20</sup> *Id.*

<sup>21</sup> *Id.* at 7.

<sup>22</sup> *Id.*

<sup>23</sup> Federal Food, Drug, and Cosmetic Act, 21 U.S.C. 360j(o).

<sup>24</sup> U.S. FOOD AND DRUG ADMINISTRATION, *General Wellness: Policy for Low Risk Devices: Guidance for Industry and Food and Drug Administration Staff*, (Jan. 6, 2026), <https://www.fda.gov/media/90652/download>.

**B. H.R. 4541, EARLY Act Reauthorization of 2025 (Reps. Wasserman Schultz and Miller-Meeks)**

H.R. 4541 would reauthorize educational resources for breast cancer early detection through Fiscal Year 2031.

**C. H.R. 3747, Accelerating Access to Dementia and Alzheimer's Provider Training Act (Reps. Balderson and Barragán)**

H.R. 3747 would reauthorize the Project ECHO (Expanding Capacity for Health Outcomes) Grant Program through Fiscal Year 2031.

**D. H.R. 8209, School-Based Health Centers Reauthorization Act of 2026 (Reps. Tonko and Balderson)**

H.R. 8209 would reauthorize the School-Based Health Centers grant program through Fiscal Year 2031.

**E. H.R. 5160, Stem Cell Therapeutic and Research Reauthorization Act of 2025 (Reps. Smith-NJ and Matsui)**

H.R. 5160 would reauthorize the C.W. Bill Young Cell Transplantation program and the National Cord Blood Inventory program through Fiscal Year 2031.

**F. H.R. 8205, Accelerating Access to Critical Therapies for ALS Reauthorization Act of 2026 (Reps. Quigley and Calvert)**

H.R. 8205 would reauthorize and make changes to the grant award authority, expanded access program, and public-private partnership for research on therapies for ALS.

**G. H.R. 6121, Promoting Physical Activity for Americans Act (Reps. Moore and Panetta)**

H.R. 6121 would direct the Secretary of HHS to publish a report at least every ten years on physical activity recommendations for Americans.

**H. H.R. \_\_\_\_\_, [Nutrition Education and Chronic Disease Prevention in Community Health Centers Act of 2026] (Rep. Harshbarger)**

This bill would establish the Nutrition Education and Chronic Disease Prevention Initiative, which would allow HRSA to support the integration of evidence-based nutrition education and counseling into primary care delivery and workforce training at community health centers.

**I. H.R. 8201, Expanding Community Access to Health Services Act (Rep. Lee-NV)**

H.R. 8201 would include behavioral and mental health and substance use disorder services as required services offered by community health centers.

**J. H.R. \_\_\_\_, [Digital Health Screeners Act of 2026] (Rep. Balderson)**

This bill would clarify that clinical decision software (CDS) exemptions from medical device regulations for a CDS that supports or provides recommendations to a health care professional about prevention, diagnosis, or treatment of a disease or condition may also include a CDS that only makes a single recommendation due to only one option being clinically appropriate.

This bill would also expand the medical device regulation exemptions for software functions intended to maintain or encourage a healthy lifestyle—and are unrelated to diagnosis, cure, mitigation, prevention, or treatment of a disease or condition—so that the exemption applies to a “general wellness product.” A “general wellness product” may be software, hardware, or both. This bill also clarifies the intended scope of a “general wellness product” and directs the Secretary of HHS to develop and establish criteria to determine whether a product is appropriately regulated as a “general wellness product” or as a medical device.

**VI. STAFF CONTACTS**

If you have questions regarding this hearing, please contact Annabelle Huffman of the Committee staff at (202) 225-3641.