



July 25, 2017

TO: Members, Committee on Energy and Commerce
FROM: Committee Majority Staff
RE: Full Committee Markup

I. INTRODUCTION

The Committee on Energy and Commerce will meet in open markup session on Thursday, July 27, 2017, at 10:00 a.m. in 2123 Rayburn House Office Building to consider the following:

- H.R. 767, SOAR to Health and Wellness Act of 2017;
- H.R. 772, Common Sense Nutrition Disclosure Act of 2017;
- H.R. 880, Military Injury Surgical Systems Integrated Operationally Nationwide to Achieve ZERO Preventable Deaths Act (MISSION ZERO Act);
- H.R. 931, Firefighter Cancer Registry Act of 2017;
- H.R. 2422, Action for Dental Health Act of 2017;
- H.R. 3387, Drinking Water System Improvement Act;
- H.R. 3388, Designating Each Car's Automation Level Act.

In keeping with Chairman Walden's announced policy, Members must submit any amendments they may have two hours before they are offered during this markup. Members may submit amendments by email to peter.kielty@mail.house.gov. Any information with respect to an amendment's parliamentary standing (e.g., its germaneness) should be submitted at this time as well.

II. LEGISLATION

A. H.R. 767, SOAR to Health and Wellness Act of 2017

Worldwide, nearly 21 million people are victims of human trafficking, forced labor, or sexual exploitation.⁵ H.R. 767, introduced by Rep. Steve Cohen (D-TN), provides health care

⁵ *ILO global estimate of forced labour*. (2012) (1st ed., p. 13). Geneva. http://www.ilo.org/wcmsp5/groups/public/---ed_norm/---declaration/documents/publication/wcms_182004.pdf

professionals training on how to identify and appropriately treat human trafficking victims. The Stop, Observe, Ask and Respond (SOAR) pilot initiative was originally launched in 2013 by the Administration for Children and Families to enhance the health care system's response to human trafficking. This legislation expands and further codifies the SOAR program by requiring the program to provide grants that support training in diverse health care sites, work with stakeholders to develop a flexible training module, provide technical assistance to health education programs, help disseminate best practices, and develop data collection and reporting on the number of trafficking victims served in health care settings. On June 29, 2017, the Subcommittee on Health forwarded the bill with an amendment in the nature of a substitute by voice vote.

B. H.R. 772, Common Sense Nutrition Disclosure Act of 2017

H.R. 772, introduced by Rep. McMorris Rodgers (R-WA) and Rep. Cardenas (D-CA), would amend the Food, Drug, and Cosmetic Act to establish workable standards for chain restaurants and similar retail food establishments in order to provide consumers with calorie information for standard menu items and avoid a patchwork of state and local requirements. This bipartisan bill passed the House in the 114th Congress.

C. H.R. 880, Military Injury Surgical Systems Integrated Operationally Nationwide to Achieve ZERO Preventable Deaths Act (MISSION ZERO Act)

H.R. 880, introduced by Rep. Burgess (R-TX), Rep. Green (D-TX), Rep. Hudson (R-NC), and Rep. Castor (D-FL), establishes a grant program for military-civilian partnerships in trauma care that will allow both sectors to benefit from the others' expertise and experience. The program is intended to address significant variation in trauma care delivery across the country, while also helping our troops maintain battlefield readiness between periods of active engagement. The bill stems from a June 2016 report from the National Academies of Sciences, Engineering and Medicine (NASEM) entitled "A National Trauma Care System: Integrating Military and Civilian Trauma Systems to Achieve Zero Preventable Deaths After Injury."¹ Among the report's recommendations, the NASEM proposed that the Secretary of Defense should take steps to develop integrated, permanent joint civilian and military trauma system training platforms, in order to create and sustain an expert trauma workforce between periods of active combat. On June 29, 2017, the Subcommittee on Health forwarded the bill with an amendment in the nature of a substitute by voice vote.

D. H.R. 931, Firefighter Cancer Registry Act of 2017

H.R. 931, introduced by Rep. Collins (R-NY), requires the Centers for Disease Control and Prevention (CDC) to develop and maintain a registry to collect data regarding the incidence of cancer in firefighters. Epidemiological studies have found a correlation between firefighters'

¹ National Academies of Sciences, Engineering, and Medicine. 2016. *A national trauma care system: Integrating military and civilian trauma systems to achieve zero preventable deaths after injury*. Washington, DC: The National Academies Press. <http://www.nationalacademies.org/hmd/Reports/2016/A-National-Trauma-Care-System-Integrating-Military-and-Civilian-Trauma-Systems.aspx>

occupational exposure and cancer.^{2,3} These data include the CDC's National Institute for Occupational Safety and Health (NIOSH) study that reviewed health effects in nearly 30,000 career firefighters followed from 1950 through 2009, and found that firefighters are at increased risk for developing cancer.⁴ On June 29, 2017, the Subcommittee on Health forwarded the bill, as amended, by voice vote.

E. H.R. 2422, Action for Dental Health Act of 2017

H.R. 2422, introduced by Rep. Kelly (D-IL), enhances the provision of oral health services and oral health education to underserved populations. The legislation reauthorizes the oral health promotion and disease prevention programs at the CDC and permits the Centers to award grants or enter into contracts with stakeholders to develop projects to improve oral health education and dental disease prevention. The legislation also reauthorizes Health Resources and Services Administration's (HRSA) Grants to States to Support Oral Health Workforce Activities and permits states to establish dental homes, mobile or portable dental clinics, initiatives to reduce the use of emergency departments by patients seeking dental services, and initiatives to provide dental care to nursing home residents. On June 29, 2017, the Subcommittee on Health forwarded the bill with an amendment in the nature of a substitute by voice vote.

F. H.R. 3387, Drinking Water System Improvement Act

The Safe Drinking Water Act (SDWA) was last reauthorized in 1996, providing appropriations of \$599 million for FY 1994 and \$1 billion per year for FY 1995 through FY 2003. H.R. 3387, introduced by Rep. Harper (R-MS), amends the SDWA to reauthorize \$8 billion in capitalization grants for FY 2018 through FY 2022. The bill also amends the SDWA to improve accuracy and availability of compliance data; enhance asset management practices used by public water systems; expand how States may use Drinking Water State Revolving Funds; provide additional assistance and reforms for disadvantaged communities; enhance the readability of consumer confidence reports; and expand the use of new methods, means, and technology to ensure the integrity of community water systems.

G. H.R. 3388, Designating Each Car's Automation Level Act

The Committee anticipates that it will consider an amendment in the nature of a substitute to H.R. 3388, introduced by Rep. Latta (R-OH) and Rep. Schakowsky (D-IL). The amendment in the nature of a substitute will likely clarify the federal and state roles for regulating highly automated vehicles (HAVs) to encourage the testing, development, and deployment of HAVs in

² LeMasters, G., Genaidy, A., Succop, P., Deddens, J., Sobeih, T., & Barriera-Viruet, H. et al. (2006). Cancer Risk Among Firefighters: A Review and Meta-analysis of 32 Studies. *Journal Of Occupational And Environmental Medicine*, 48(11), 1189-1202. <http://dx.doi.org/10.1097/01.jom.0000246229.68697.90>

³ Pukkala, E., Martinsen, J., Weiderpass, E., Kjaerheim, K., Lynge, E., & Tryggvadottir, L. et al. (2014). Cancer incidence among firefighters: 45 years of follow-up in five Nordic countries. *Occupational And Environmental Medicine*, 71(6), 398-404. <http://dx.doi.org/10.1136/oemed-2013-101803>

⁴ Daniels, R., Kubale, T., Yiin, J., Dahm, M., Hales, T., & Baris, D. et al. (2013). Mortality and cancer incidence in a pooled cohort of US firefighters from San Francisco, Chicago and Philadelphia (1950–2009). *Occupational And Environmental Medicine*, 71(6), 388-397. <http://dx.doi.org/10.1136/oemed-2013-101662>.

the United States. The legislation requires the submission of safety assessment certifications by manufacturers of HAVs and requires the National Highway Traffic Safety Administration (NHTSA) to publish a rulemaking and safety priority plan for HAVs. The legislation requires manufacturers to develop a written cybersecurity plan. The legislation expands existing exemption authority for NHTSA to evaluate and approve exemptions from Federal motor vehicle safety standards only if there is no reduction in safety. Further, the bill expands the testing provision from the FAST Act (Public Law No: 114-94) to include additional entities who meet specific reporting and obligations.

Additionally, the bill creates a Federal Advisory Committee within NHTSA with subcommittees: to examine mobility access for the disabled community; mobility access for senior citizens and populations underserved by public transportation; cybersecurity; the sharing of relevant, situational testing information; the testing and deployment of HAVs in rural and mountainous areas; labor and employment issues that may be affected by the deployment of HAVs; the impact of the development and deployment of HAVs on the environment; protection of consumer privacy and security of information collected by HAVs; and, cabin safety for HAV passengers. The legislation requires NHTSA to undertake a rulemaking requiring all new passenger motor vehicles weighing less than 10,000 pounds gross vehicle weight to be equipped with a system to alert the operator to check rear designated seating positions after the vehicle motor is deactivated by the operator. This legislation requires NHTSA to evaluate and initiate a rulemaking regarding safety standards or performance requirements for motor vehicle headlamps that would improve the performance of headlamps and improve overall safety.

III. STAFF CONTACTS

If you have any questions regarding the legislation to be considered during the markup, please contact the Committee staff at (202) 225-2927. For questions regarding H.R. 767, H.R. 772, H.R. 880, H.R. 931, and H.R. 2422, please contact Paul Edattel. For questions regarding H.R. 3387, please contact Jerry Couri. For questions regarding H.R. 3388, please contact Paul Nagle.