



MEMORANDUM

July 13, 2020

To: Committee on Energy and Commerce Members and Staff

Fr: Committee on Energy and Commerce Staff

Re: Full Committee Markup of H.R. 1426, H.R. 3079, H.R. 3361, H.R. 5541, H.R. 5758, H.R. 2477, H.R. 5201, H.R. 5534, H.R. 7539, H.R. 1646, H.R. 2117, H.R. 2271, H.R. 2468, H.R. 4564, H.R. 4585, H.R. 4712, H.R. 4866, H.R. 5619, H.R. 5663, H.R. 5668, H.R. 7574, H.R. 451, H. Res. 549, H.R. 4194, H.R. 5567, H.R. 5918, H.R. 6096, H.R. 6624, and H.R. 7310

On Wednesday, July 15, 2020, at 11 a.m. (EDT), via Cisco Webex online video conferencing, the Committee on Energy and Commerce will hold a markup of the following 29 bills and one resolution:

H.R. 1426, the “Timely Review of Infrastructure Act”; **H.R. 3079**, the “Energy Savings through Public-Private Partnerships Act of 2019”; **H.R. 3361**, the “Reliable Investment in Vital Energy Reauthorization Act”; **H.R. 5541**, the “Tribal Power Act”; **H.R. 5758**, the “Ceiling Fan Improvement Act of 2020”; **H.R. 2477**, the “Beneficiary Enrollment Notification and Eligibility Simplification (BENES) Act of 2019”, as amended; **H.R. 3935**, the “Protecting Patients Transportation to Care Act”; **H.R. 5201**, the “Telemental Health Expansion Act of 2019”; **H.R. 5534**, the “Comprehensive Immunosuppressive Drug Coverage for Kidney Transplant Patients Act of 2019”, as amended; **H.R. 7539**, the “Strengthening Behavioral Health Parity Act”; **H.R. 1646**, the “Helping Emergency Responders Overcome Act of 2019” or the “HERO Act of 2019”; **H.R. 2117**, the “Food Allergy Safety, Treatment, Education, and Research Act of 2019” or the “FASTER Act of 2019”, as amended; **H.R. 2271**, the “Scarlett’s Sunshine on Sudden Unexpected Death Act”, as amended; **H.R. 2468**, the “School-Based Allergies and Asthma Management Program Act”, as amended; **H.R. 4564**, the “Suicide Prevention Lifeline Improvement Act of 2019”; **H.R. 4585**, the “Campaign to Prevent Suicide Act”; **H.R. 4712**, the “Fairness in Orphan Drug Exclusivity Act”, as amended; **H.R. 4866**, the “National Centers of Excellence in Continuous Pharmaceutical Manufacturing Act of 2019”, as amended; **H.R. 5619**, the “Suicide Prevention Act”; **H.R. 5663**, the “Safeguarding Therapeutics Act”; **H.R. 5668**, the “Making Objective Drug Evidence Revisions for New Labeling Act of 2020” or the “MODERN Labeling Act of 2020”, as amended; **H.R. 7574**, the “Strengthening America’s Strategic National Stockpile Act of 2020”; **H.R. 451**, the “Don’t Break Up the T-Band Act of 2019”, as amended; **H. Res. 549**, a resolution reaffirming the commitment to media diversity and pledging to work with media entities and diverse stakeholders to develop common ground solutions to eliminate barriers to media diversity; **H.R. 4194**, the “National Suicide Hotline Designation Act of 2019”, as amended; **H.R. 5567**, the “Measuring the Economics Driving Investments and Access for

Diversity Act of 2020” or the “MEDIA Diversity Act of 2020”; **H.R. 5918**, a bill to direct the Federal Communications Commission to issue reports after activation of the Disaster Information Reporting System and to make improvements to network outage reporting; **H.R. 6096**, the “Reliable Emergency Alert Distribution Improvement Act of 2020” or the “READI Act of 2020”; **H.R. 6624**, the “Utilizing Strategic Allied Telecommunications Act of 2020” or the “USA Telecommunications Act”; and **H.R. 7310**, the “Spectrum IT Modernization Act of 2020.”

I. H.R. 1426, THE “TIMELY REVIEW OF INFRASTRUCTURE ACT”

H.R. 1426, the “Timely Review of Infrastructure Act”, introduced by Reps. Olson (R-TX) and Doyle (D-PA), addresses insufficient compensation of employees and other personnel at the Federal Energy Regulatory Commission (FERC). On January 9, 2020, the Subcommittee on Energy favorably forwarded H.R. 1426, without amendment, to the full Committee by a voice vote.

The bill amends section 401 of the Department of Energy Organization Act by adding a new subsection (k) at the end. The new subsection grants the FERC Chairman additional authority to adjust compensation for a category of employees and other personnel without regard to certain civil service laws. The Chairman must publicly certify that other approaches to retaining and attracting employees are inadequate and that the adjustment to compensation is necessary to carry out the functions of the Commission in a timely, efficient, and effective manner. The bill also requires that the Chairman periodically submit to Congress a report including information related to hiring, vacancies, compensation, and efforts to retain and attract employees.

II. H.R. 3079, THE “ENERGY SAVINGS THROUGH PUBLIC-PRIVATE PARTNERSHIPS ACT OF 2019”

H.R. 3079, the “Energy Savings Through Public-Private Partnerships Act of 2019”, introduced by Reps. Welch (D-VT) and Kinzinger (R-IL), would amend the National Energy Conservation Policy Act to encourage the increased use of performance contracting in federal facilities. The Committee reported an identical version of the legislation, H.R. 723, in the 115th Congress by unanimous consent. On January 9, 2020, the Subcommittee on Energy favorably forwarded H.R. 3079, without amendment, to the full Committee by a voice vote.

Performance contracting is a method of financing by which an entity may fund energy efficiency upgrades over time with savings generated from capital improvements, typically using Energy Savings Performance Contracts (ESPCs) or Utility Energy Service Contracts (UESCs). Entities engaged in an ESPC or UESC are generally able to recuperate savings generated by efficiency improvements following a period of repayment to the individual or company performing those facility upgrades. Current law requires federal facility energy managers to evaluate and identify energy and water efficiency measures for federal facilities. Agencies are not required under federal law, however, to implement those measures. This bill would require that agencies implement those measures, provided they are cost-effective.

H.R. 3079 also enables the development of more renewable energy and resiliency projects by allowing agencies to utilize existing revenue streams, such as rebates, grid services revenue, and Renewable Energy Certificates (RECs), to help fund a project. The bill prohibits the use of performance contracting at federal hydroelectric facilities.

III. H.R. 3361, THE “RELIABLE INVESTMENT IN VITAL ENERGY REAUTHORIZATION ACT”

H.R. 3361, the “Reliable Investment in Vital Energy Reauthorization Act”, introduced by Reps. McKinley (R-WV), Tonko (D-NY), and Loeb (D-IA), would amend section 242 of the Energy Policy Act of 2005 (EPA05) to reauthorize the hydroelectric production incentives program. Additionally, the bill reauthorizes the hydroelectric efficiency improvement program set forth in EPA05 section 243. On January 9, 2020, the Subcommittee on Energy favorably forwarded H.R. 3361, without amendment, to the full Committee by a voice vote.

The hydroelectric production incentives program provides payments to owners or operators of hydroelectric facilities that are added to existing dams or conduits. The hydroelectric efficiency improvement program similarly provides payments, but for the purpose of making changes in a facility that improve its efficiency by three percent or more.

H.R. 3361 reauthorizes both programs from Fiscal Year (FY) 2019 through FY 2036 at the originally authorized level of \$10 million each year.

IV. H.R. 5541, THE “TRIBAL POWER ACT”

H.R. 5541, the “Tribal Power Act”, introduced by Reps. O’Halleran (D-AZ) and Mullin (R-OK), would amend sections 2601 and 2602 of the Energy Policy Act of 1992 (EPA92), reauthorizing programs to assist consenting Indian tribes in meeting energy education, planning, and management needs. On January 9, 2020, the Subcommittee on Energy favorably forwarded H.R. 5541, without amendment, to the full Committee by a voice vote.

Congress authorized the establishment of an Indian energy resources development program in EPA92 and it established an Office of Indian Energy Policy and Programs at the Department of Energy (DOE) in EPA05. The legislation amends the definition of Indian Land to extend eligibility for grant funding to consenting Alaskan Native Tribes. The bill also provides DOE’s Director of the Office of Indian Energy Policy and Programs the authority to expand programmatic access by reducing applicable cost-share based on criteria such as proven financial need. Finally, the bill reauthorizes the program at \$30 million annually from FY 2021 through FY 2025.

A Manager’s Amendment will be offered to make technical and conforming changes to the bill.

V. H.R. 5758, THE “CEILING FAN IMPROVEMENT ACT OF 2020”

H.R. 5758, the “Ceiling Fan Improvement Act of 2020”, introduced by Reps. Guthrie (R-KY) and Schakowsky (D-IL), would amend the Energy Policy and Conservation Act to make technical corrections to the energy conservation standard for large-diameter ceiling fans. On February 12, 2020, the Subcommittee on Energy held a legislative hearing on H.R. 5758.

DOE issued a final rule in January 2017 setting energy efficiency standards for ceiling fans with a compliance date of January 2020. The bill amends the final rule to adjust compliance requirements related to total airflow and power consumption for large-diameter ceiling fans.

VI. H.R. 2477, THE “BENEFICIARY ENROLLMENT NOTIFICATION AND ELIGIBILITY SIMPLIFICATION ACT OF 2019” (THE “BENES ACT OF 2019”)

H.R. 2477, the “Beneficiary Enrollment Notification and Eligibility Simplification Act of 2019”, or the “BENES Act of 2019”, introduced by Reps. Ruiz (D-CA), Walorski (R-IN), Schneider (D-IL), and Bilirakis (R-FL), would improve beneficiary outreach and education, reduce gaps in coverage, and simplify the Part B enrollment process. On March 11, 2020, the Subcommittee on Health favorably forwarded H.R. 2477, as amended, to the full Committee by a voice vote

Specifically, the BENES Act of 2019 would require the Federal Government to send advance notice about the enrollment process to individuals approaching Medicare eligibility (aged 63-65). It would require that Part B coverage begin during the first month after an individual enrolls, through either the initial enrollment period or general enrollment period. The bill would also require the Secretary of the Department of Health and Human Services (HHS) to submit a report to Congress on how to most effectively align the Part B general enrollment period with the coordinated election period for Medicare Advantage and Part D. It would also allow for the Secretary to establish a special enrollment period for Part B coverage for individuals experiencing exceptional circumstances such as residing in an emergency or disaster area.

A Manager’s Amendment will be offered to make technical and conforming changes to the bill.

VII. H.R. 3935, THE “PROTECTING PATIENTS TRANSPORTATION TO CARE ACT”

H.R. 3935, the “Protecting Patients Transportation to Care Act”, introduced by Reps. Carter (R-GA), Cárdenas (D-CA), Graves (R-GA), and Bishop (D-GA), would amend the Medicaid statute to include non-emergency medical transportation (NEMT) in the list of mandatory Medicaid benefits by codifying current Medicaid NEMT regulations. The bill would also require state Medicaid programs to have in place a utilization management process for the benefit.

On March 11, 2020, the Subcommittee on Health favorably forwarded H.R. 3935, without amendment, to the full Committee by a voice vote.

An AINS will be offered to make technical and conforming changes to the bill.

VIII. H.R. 5201, THE “TELEMENTAL HEALTH EXPANSION ACT OF 2019”

H.R. 5201, the “Telemental Health Expansion Act of 2019”, introduced by Reps. Matsui (D-CA) and Johnson (R-OH), would permanently include a patient’s home as an eligible originating site for mental health services delivered via telehealth and remove Medicare’s geographic restrictions for such services, enabling providers to be reimbursed by Medicare for mental health services delivered via telehealth in urban and rural areas and in the patient’s home. On June 30, 2020, the Subcommittee on Health held a legislative hearing on H.R. 5201.

An AINS will be offered to make technical and conforming changes to the bill.

IX. H.R. 5534, THE “COMPREHENSIVE IMMUNOSUPPRESSIVE DRUG COVERAGE FOR KIDNEY TRANSPLANT PATIENTS ACT OF 2019”

H.R. 5534, the “Comprehensive Immunosuppressive Drug Coverage for Kidney Transplant Patients Act of 2019”, introduced by Reps. Kind (D-WI) and Burgess (R-TX), would permanently remove the 36-month limit for Medicare coverage of immunosuppressive drugs following a kidney transplant.

On March 11, 2020, the Subcommittee on Health favorably forwarded H.R. 5534, as amended, to the full Committee by a voice vote.

An AINS will be offered to make technical and conforming changes to the bill.

X. H.R. 7539, THE “STRENGTHENING BEHAVIORAL HEALTH PARITY ACT”

H.R. 7539, the “Strengthening Behavioral Health Parity Act”, introduced by Reps. Kennedy (D-MA) and Bilirakis, would help improve and strengthen enforcement of existing mental health parity laws.

Specifically, H.R. 7539 would prohibit health insurance plans from imposing less favorable benefit limitations on mental and substance use disorder treatments than on medical and surgical benefits. The bill would increase transparency with respect to how health insurance plans are applying mental health parity laws, by requiring plans to make available certain analyses of how plans are applying non-quantitative treatment limits (NQTLs) to mental health and substance use disorder benefits, in comparison to medical and surgical benefits.

H.R. 7539 also requires federal regulators to request comparative analyses for plans that involve potential violations or complaints regarding noncompliance with mental health parity standards and to request no fewer than twenty comparative analyses per year. In addition, HHS,

the Departments of Labor and the Treasury would be required to submit an annual report to Congress, including a summary of the comparative analyses and federal regulators' findings.

A Manager's Amendment will be offered to make technical and conforming changes to the bill.

XI. H.R. 1646, THE “HELPING EMERGENCY RESPONDERS OVERCOME ACT OF 2019” (THE “HERO ACT OF 2019”)

H.R. 1646, the “Helping Emergency Responders Overcome Act of 2019” or the “HERO Act of 2019”, introduced by Rep. Bera (D-CA), would create a data system at the Centers for Disease Control and Prevention (CDC) to capture public safety officer suicide incidences and study successful interventions, authorize grants for peer support behavioral health and wellness programs within fire departments and emergency medical service agencies, and require the development of best practices for addressing post-traumatic stress disorder (PTSD) in public safety officers and educational materials. On June 30, 2020, the Subcommittee on Health held a legislative hearing on H.R. 1646.

The bill defines a public safety officer as being an individual serving as public safety communicators, emergency medical service crew members, law enforcement officers, firefighters, chaplains, or Federal Emergency Management Agency employees performing duties relating and in response to a major disaster or emergency, among others.

An AINS will be offered that will add a grant program for frontline healthcare workers and make technical and conforming changes.

XII. H.R. 2117, THE “FOOD ALLERGY SAFETY, TREATMENT, EDUCATION, AND RESEARCH ACT OF 2019” (THE “FASTER ACT OF 2019”)

H.R. 2117, the “FASTER Act of 2019”, introduced by Rep. Matsui, would require CDC to expand the collection of information as to the prevalence of food allergies for specific allergens and to include that information in reports to Congress. The bill would also amend the Federal Food, Drug, and Cosmetic Act (FFDCA) to include sesame as a major allergen and allow the Food and Drug Administration (FDA), through regulation, to add other food ingredients as major allergens based on the prevalence and severity of allergic reactions to the food ingredient. Additionally, the bill would require FDA to include patient experience data on treatments for patients with food allergies in its reports on patient experience data.

On March 11, 2020, the Subcommittee on Health favorably forwarded H.R. 2117, as amended, to the full Committee by a voice vote.

XIII. H.R. 2271, THE “SCARLETT’S SUNSHINE ON SUDDEN UNEXPECTED DEATH ACT”

H.R. 2271, the “Scarlett’s Sunshine on Unexpected Death Act”, introduced by Reps. Moore (D-WI), Cole (R-OK), and Herresa Beutler (R-WA), would require CDC to revise the

Sudden Unexplained Infant Death Investigation Reporting Form to include doll re-enactments and scene investigation information on sleep-related deaths of children under the age of five, and to align the form with the National Fatality Review Case Reporting System.

The bill also authorizes CDC to make grants to improve the completion of comprehensive death scene investigations for sudden unexplained infant death (SUID) and sudden unexplained death in children (SUDC), to increase the rate of comprehensive, standardized autopsies in cases of SUID and SUDC, and to train medical examiners, coroners, death scene investigators, law enforcement, and health professionals on standard death scene investigation protocols. In addition, the bill authorizes grants through the Administration for Children and Families to assist states in investing in core capacity to review 100 percent of all infant and child deaths, and to develop review programs and prevention strategies.

H.R. 2271 authorizes new grants through the Health Services and Resources Administration to develop and implement educational programs and outreach related to sleep-related SUID, and programs to develop and deploy support services for families who have had a child die of SUID or SUDC. Finally, the bill states that it is the sense of Congress that additional research is needed to improve the understanding of epidemiology of SUID and SUDC and requires HHS to report data on SUID and SUDC.

On March 11, 2020, the Subcommittee on Health favorably forwarded H.R. 2271, as amended, to the full Committee by a voice vote.

XIV. H.R. 2468, THE “SCHOOL-BASED ALLERGIES AND ASTHMA MANAGEMENT PROGRAM ACT”

H.R. 2468, the “School-Based Allergies and Asthma Management Program Act”, introduced by Reps. Hoyer (D-MD) and Roe (R-TN), would add a preference for grants to those states that have additional access to certain healthcare professionals and programs. To be eligible for this preference, states would have to require: (1) the presence of a school nurse or other trained personnel on school premises during school operating hours; (2) that there be a school-based allergies and asthma program, including a method to identify all students in the school with a diagnosis of allergies and asthma; (3) an individual student allergies and asthma action plan for each student with a diagnosis of allergies and asthma; (4) education for staff about allergies and asthma; (5) efforts to reduce environmental triggers of allergies and asthma; and (6) a coordinated support system for students.

On March 11, 2020, the Subcommittee on Health favorably forwarded H.R. 2468, as amended, to the full Committee by a voice vote.

XV. H.R. 4564, THE “SUICIDE PREVENTION LIFELINE IMPROVEMENT ACT OF 2019”

H.R. 4564, the “Suicide Prevention Lifeline Improvement Act of 2019”, introduced by Reps. Katko (R-NY), Beyer (D-VA), and Napolitano (D-CA), would increase the authorization funding level of the National Suicide Prevention Lifeline program to \$50 million each year, from

FY 2020 through FY 2022. The current authorization is only \$7.198 million each year. The bill also directs HHS to establish a plan for maintaining the program, including sharing certain data with CDC. In addition, the bill includes a pilot program to research, analyze, and employ various innovative technologies and platforms for suicide prevention and reports on the use and progress of the pilot. On June 30, 2020, the Subcommittee on Health held a legislative hearing on H.R. 4564.

XVI. H.R. 4585, THE “CAMPAIGN TO PREVENT SUICIDE ACT”

H.R. 4585, the “Campaign to Prevent Suicide Act”, introduced by Reps. Beyer and Gianforte (R-MT), would direct HHS, in coordination with CDC and the Substance Abuse and Mental Health Services Administration (SAMHSA), to carry out a national suicide prevention media campaign to advertise the new 9-8-8 number, when it becomes effective, raise awareness for suicide prevention resources, and cultivate a more effective discourse on how to prevent suicide. The bill would also provide guidance to TV and social media companies on how to talk about suicide by creating a best practices toolkit. On June 30, 2020, the Subcommittee on Health held a legislative hearing on H.R. 4585.

An AINS will be offered to make technical and conforming changes to the bill.

XVII. H.R. 4712, THE “FAIRNESS IN ORPHAN DRUG EXCLUSIVITY ACT”

H.R. 4712, the “Fairness in Orphan Drug Exclusivity Act”, introduced by Reps. Dean (D-PA), Veasey (D-TX), Carter (R-GA), and McKinley, updates the Orphan Drug Act to require drug manufacturers seeking orphan drug designations to demonstrate the absence of any reasonable expectation that the costs they incur in developing and making those drugs available in the United States for such disease or condition. The bill directs FDA and the drug manufacturer to take into consideration the sales of all drugs for the rare disease or condition developed by the same manufacturer as well as all drugs containing the same active moiety.

On March 11, 2020, the Subcommittee on Health favorably forwarded H.R. 4712, as amended, to the full Committee by a voice vote.

A Manager’s amendment will be offered that would direct FDA to take into consideration the sales of all drugs made by the manufacturer under the same orphan drug designation.

XVIII. H.R. 4866, THE “NATIONAL CENTERS OF EXCELLENCE IN CONTINUOUS PHARMACEUTICAL MANUFACTURING ACT OF 2019”

H.R. 4866, the “National Centers of Excellence in Continuous Pharmaceutical Manufacturing Act of 2019”, introduced by Chairman Pallone (D-NJ) and Rep. Guthrie, would amend the 21st Century Cures Act to direct FDA to designate National Centers of Excellence in Continuous Pharmaceutical Manufacturing (NCEs).

NCEs would work with FDA and industry to craft a national framework for continuous manufacturing implementation, including supporting additional research and development of this

technology, workforce development, standardization, and collaborating with manufacturers to support adoption of continuous manufacturing. The bill authorizes \$80 million to be appropriated for NCEs each year from FY 2021 through FY 2025.

On March 11, 2020, the Subcommittee on Health favorably forwarded H.R. 4866, as amended, to the full Committee by a voice vote.

XIX. H.R. 5619, THE “SUICIDE PREVENTION ACT”

H.R. 5619, the “Suicide Prevention Act,” introduced by Reps. Stewart (R-UT) and Matsui, establishes two grant programs to prevent self-harm and suicide. CDC must award grants to State, local, and Tribal health departments to expand surveillance of self-harm, and SAMHSA must award grants to hospital emergency departments for programs to prevent self-harm and suicide attempts among patients after discharge. On June 30, 2020, the Subcommittee on Health held a legislative hearing on H.R. 5619.

An AINS will be offered to make technical and conforming changes to the bill.

XX. H.R. 5663, THE “SAFEGUARDING THERAPEUTICS ACT”

H.R. 5663, the “Safeguarding Therapeutics Act”, introduced by Reps. Guthrie and Engel (D-NY), would extend FDA’s administrative destruction authority to medical devices. This new authority would allow FDA to destroy certain imported medical devices, such as diagnostic tests or surgical masks, in instances where FDA believes such medical devices are adulterated, misbranded, or unapproved, and may pose a threat to the public health, as the agency currently does with regard to drugs.

On March 11, 2020, the Subcommittee on Health favorably forwarded H.R. 5663, without amendment, to the full Committee by a voice vote.

An AINS will be offered that will define the terms “counterfeit device”, “manufactured”, and “manufacturing” for purposes of extending this authority to medical devices.

XXI. H.R. 5668, THE “MAKING OBJECTIVE DRUG EVIDENCE REVISIONS FOR NEW LABELING ACT OF 2020” (THE “MODERN LABELING ACT OF 2020”)

H.R. 5668, the “MODERN Labeling Act of 2020”, introduced by Reps. Matsui and Guthrie, gives additional authority to FDA to require modifications of outdated labeling for generic drugs. The bill would require FDA to report any actions taken under this new authority to update labeling for covered drugs, including the number of drugs, description of the changes and the rationale, as well as any FDA recommendation(s) to modify the program, among other things.

On March 11, 2020, the Subcommittee on Health favorably forwarded H.R. 5668, as amended, to the full Committee by a voice vote.

An AINS will be offered that will clarify the process for selecting a drug and considering labeling changes under the MODERN Labeling framework.

XXII. H.R. 7574, THE “STRENGTHENING AMERICA’S STRATEGIC NATIONAL STOCKPILE ACT OF 2020”

H.R. 7574, the “Strengthening America’s Strategic National Stockpile Act of 2020,” introduced by Reps. Slotkin (D-MI) and Brooks (R-IN), along with nearly 20 bipartisan cosponsors, would make a number of improvements to the Strategic National Stockpile (SNS) and incorporates language from a number of bipartisan legislation introduced in the 116th Congress.

Specifically, the bill would improve the financial security of the SNS by authorizing the sale of products to other Federal departments or agencies from the SNS within six months of product expiration (H.R. 6517). The bill would also direct the Comptroller General to conduct a study of the public sector procurement process for single source materials from the SNS and examine the feasibility and benefits of a user fee agreement (H.R. 6875). H.R. 7574 would also improve the ability of the SNS to maintain and procure medical supplies by requiring the Secretary of HHS to ensure that contents of the SNS are in good working order and, as necessary, conduct maintenance on contents of the stockpile (H.R. 6876). It also improves domestic product availability for the SNS by enhancing medical supply chain elasticity through the domestic production of personal protective equipment, and partnering with industry to refresh and replenish existing stocks of medical supplies (H.R. 6531).

H.R. 7574 would also improve transparency around the SNS by directing the Assistant Secretary for Preparedness and Response (ASPR), in coordination with the Administrator of the Federal Emergency Management Agency (FEMA) to issue a report to Congress regarding all State, local, Tribal, and territorial requests for supplies from the SNS during the coronavirus disease of 2019 (COVID-19) crisis. Reporting must continue every 30 days until the end of the pandemic (H.R. 6877). In addition, H.R. 7574 would require the ASPR and CDC to develop and implement improved, transparent processes for the use and distribution of SNS supplies (H.R. 6878).

In addition to support for the SNS, H.R. 7574 would create a new pilot program to support the expansion and maintenance of state stockpiles in order for states to use in the event of a public health emergency. These funds shall only be awarded if the federal SNS is funded at amounts equal to or greater than the total funds for FY 2020 (H.R. 7507).

Finally, the legislation increases the annual authorization of appropriations for the SNS from \$610 million to \$705 million for FY 2020 through FY 2023.

A Manager’s Amendment will be offered to make technical and conforming changes to the bill.

XXIII. H.R. 451, THE “DON’T BREAK UP THE T-BAND ACT OF 2019”

H.R. 451, the “Don’t Break Up the T-Band Act of 2019,” introduced by Reps. Engel, Zeldin (R-NY), Green (D-TX), and King (R-NY), would repeal the requirement on the Federal Communications Commission (FCC) to reallocate and auction the 470-512 MHz spectrum band, also known as the T-Band. As part of the Middle Class Tax Relief and Job Creation Act of 2012, Congress directed the FCC to reallocate the T-Band spectrum used by public safety entities for commercial use. H.R. 451 also requires the FCC to adopt rules limiting the use of 9-1-1 fees by States or other taxing jurisdictions to (1) the support and implementation of 9-1-1 services and (2) operational expenses of public safety answering points.

On March 10, 2020, the Subcommittee on Communications and Technology favorably forwarded H.R. 451, as amended, to the full Committee by a voice vote.

XXIV. H. RES. 549, A RESOLUTION REAFFIRMING THE COMMITMENT TO MEDIA DIVERSITY AND PLEDGING TO WORK WITH MEDIA ENTITIES AND DIVERSE STAKEHOLDERS TO DEVELOP COMMON GROUND SOLUTIONS TO ELIMINATE BARRIERS TO MEDIA DIVERSITY

H. Res. 549, introduced by Rep. Demings (D-FL), would reaffirm the commitment of the House of Representatives to media diversity. It also pledges that Congress will work with media entities and diverse stakeholders to develop common ground solutions to eliminate barriers to media diversity.

On March 10, 2020, the Subcommittee on Communications and Technology favorably forwarded H. Res. 549, without amendment, to the full Committee by a voice vote.

XXV. H.R. 4194, THE “NATIONAL SUICIDE HOTLINE DESIGNATION ACT OF 2019”

H.R. 4194, the “National Suicide Hotline Designation Act of 2019”, introduced by Reps. Stewart and Moulton (D-MA), amends the Communications Act to designate 9-8-8 as the universal dialing code for the National Suicide Prevention Lifeline. The National Suicide Hotline Designation Act allows states to impose a fee or charge on commercial mobile or IP-enabled voice service subscribers’ bills for the support or implementation of 9-8-8 services. The National Suicide Hotline Designation Act also requires the FCC to evaluate, and submit a report to Congress on, the feasibility and cost of automatically providing the dispatchable location of calls to 9-8-8. The bill would also require a report from HHS detailing a strategy to train Lifeline counselors on issues specific to helping LGBTQ youth, and recommendations to facilitate access to service for LGBTQ populations and implementation of Integrated Voice Response to facilitate access to special services for LGBTQ callers.

The Subcommittee on Communications and Technology favorably forwarded H.R. 4194, as amended, to the full Committee by a voice vote.

An AINS will be offered to include modifications to the reports required by the bill and other technical and conforming edits.

XXVI. H.R. 5567, THE “MEASURING THE ECONOMICS DRIVING INVESTMENTS AND ACCESS FOR DIVERSITY ACT OF 2020” (THE “MEDIA DIVERSITY ACT” OF 2020)

H.R. 5567, the “Measuring the Economics Driving Investments and Access for Diversity Act of 2020” or the “MEDIA Diversity Act of 2020”, introduced by Reps. Long (R-MO) and Veasey, would require the FCC to consider, with the input of its Office of Communications Business Opportunities of the Commission, market entry barriers for socially disadvantaged individuals in the communications marketplace.

On March 10, 2020, the Subcommittee on Communications and Technology favorably forwarded, without amendment, H.R. 5567 to the full Committee by a voice vote.

XXVII. H.R. 5918, A BILL TO DIRECT THE FEDERAL COMMUNICATIONS COMMISSION TO ISSUE REPORTS AFTER ACTIVATION OF THE DISASTER INFORMATION REPORTING SYSTEM AND TO MAKE IMPROVEMENTS TO NETWORK OUTAGE REPORTING

H.R. 5918, introduced by Reps. Matsui, Eshoo (D-CA), Thompson (D-CA), and Huffman (D-CA), which directs the FCC to issue reports following the activation of the Disaster Information Reporting System (DIRS) and to make improvements to network outage reporting. The bill requires the FCC to establish formal processes to take effect in instances when the FCC activates the DIRS.

Under H.R. 5918, the FCC would be required to issue a preliminary report, not later than six weeks after the deactivation of DIRS, covering the scale and scope of communications service outages. After issuing a preliminary report, the FCC would be required to hold at least one public field hearing in communities affected by the disaster not later than four months following the deactivation of DIRS. The FCC would then be required, not later than eight months after deactivating DIRS, to issue a comprehensive final report on the event, including recommendations to improve the resiliency of affected communications networks and recovery efforts. Finally, H.R. 5918 instructs the FCC to initiate a rulemaking to establish requirements within the Network Outage Reporting System for alerting PSAPs of communications service disruptions that may affect the origination or transmission of 9-1-1 calls or relevant caller location information.

On March 10, 2020, the Subcommittee on Communications and Technology favorably forwarded, without amendment, H.R. 5918 to the full Committee by a voice vote.

An AINS will be offered to make technical and conforming changes to the bill.

XXVIII. H.R. 6096, THE “RELIABLE EMERGENCY ALERT DISTRIBUTION IMPROVEMENT ACT OF 2020” (THE “READI ACT”)

H.R. 6069, the “Reliable Emergency Alert Distribution Improvement (READI) Act of 2020”, introduced by Reps. McNerney (D-CA), Bilirakis, Olson, and Gabbard (D-HI), amends the Warning, Alert, and Response Network Act to include emergency alerts from FEMA as a type of alert that subscribers of mobile service may not block from their devices. Currently, alerts from the President may not be blocked.

The READI Act also directs the FCC to adopt regulations to facilitate coordination with State Emergency Communications Committees (SECCs) over alerts issued under the EAS. The READI Act requires the FCC to review and certify SECC-submitted State EAS plans not less than once per year, and to create a State EAS plan content checklist for evaluating such submissions. The bill also requires the FCC to complete rulemakings to establish a process for receiving reports of false alerts, modify the EAS protocols to allow for repeating messages when alerts remain pending, and examine the feasibility of enabling EAS distribution over the internet, including content streaming services.

On March 10, 2020, the Subcommittee on Communications and Technology favorably forwarded H.R. 6096, without amendment, to the full Committee by a voice vote.

XXIX. H.R. 6624, THE “UTILIZING STRATEGIC ALLIED TELECOMMUNICATIONS ACT OF 2020” (THE “USA TELECOMMUNICATIONS ACT OF 2020”)

H.R. 6624, introduced by Chairman Pallone and Ranking Member Walden (R-OR), along with Reps. Guthrie and Matsui, would create a new grant program through the National Telecommunications and Information Administration (NTIA). The new program would, among other things, promote technology that will enhance competitiveness in the supply chains of Open Radio Access Networks (Open RAN) 5G Networks, accelerate the deployment of Open Network Equipment, and promote the inclusion of security features that enhance the integrity and availability of such equipment. NTIA would also have to establish the criteria for a grant award, establish a committee that advises on technology developments to inform both the grant program and government efforts to support Open RAN 5G Network supply chains, and report on the grant program and 5G network supply chains.

XXX. H.R. 7310, THE “SPECTRUM IT MODERNIZATION ACT OF 2020”

H.R. 7310, the “Spectrum IT Modernization Act of 2020”, introduced by Reps. Doyle, Latta (R-OH), Larsen (D-WA), and Walberg (R-MI), would, among other things, require NTIA, in consultation with the Policy and Plans Steering Group, to submit to Congress a report on its plans to modernize agency information technology systems relating to managing the use of federal spectrum. It would also require the Government Accountability Office to conduct oversight over the implementation of the plans.