Subtitle J—Public Health

PART 1—HEALTH CARE INFRASTRUCTURE AND WORKFORCE

SECTION 31001. FUNDING TO SUPPORT CORE PUBLIC HEALTH INFRASTRUCTURE FOR STATE, TERRITORIAL, LOCAL, AND TRIBAL HEALTH DEPARTMENTS AT THE CENTERS FOR DISEASE CONTROL AND PREVENTION.

(a) In General.—In addition to amounts otherwise available, there is appropriated to the Secretary of Health and Human Services (in this subtitle referred to as the “Secretary”) for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $7,000,000,000, to remain available until expended, to carry out, acting through the Director of the Centers for Disease Control and Prevention (in this section referred to as the “Director”), activities described in subsection (b).

(b) Use of Funds.—Amounts made available pursuant to subsection (a) shall be used to support core public
health infrastructure activities to strengthen the public health system of the United States, including by awarding grants under this section and expanding and improving activities of the Centers for Disease Control and Prevention under subsections (c) and (d).

(c) GRANTS.—

(1) AWARDS.—For the purpose of addressing core public health infrastructure needs, the Secretary shall award—

(A) a grant to each State or territorial health department, and to local health departments that serve counties with a population of at least 2,000,000 or a city with a population of at least 400,000 people; and

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

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

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

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

(A) Reallocation To Local Health Departments.—A State health department receiving funds under subparagraph (A) or (B) of paragraph (1) shall allocate at least 25 percent of the such funds to local health departments, as applicable, within the State to support contributions of the local health departments to core public health infrastructure.

(B) Progress In Meeting Accreditation Standards.—A health department receiving funds under this section that is not accredited shall report to the Secretary on an annual basis how the department is working to meet accreditation standards.

(4) Formula Grants To Health Departments.—In awarding grants under paragraph (1), the Secretary shall award funds to each health department in accordance with a formula which considers population size, the Social Vulnerability Index of the Centers for Disease Control and Prevention, and other factors as determined by the Secretary.

(5) Competitive Grants To State, Territorial, Local, And Tribal Health Departments.—In making grants under paragraph (1)(B),
the Secretary shall give priority to applicants demon-
strating core public health infrastructure needs
for all public health agencies in the applicant’s juris-
diction.

(6) PERMITTED USES.—

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

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

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

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

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

(i) funds received through the grant
will be expended only to supplement, and
not supplant, non-Federal and Federal funds otherwise available to the entity for the purpose of addressing core public health infrastructure needs; and

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

(C) agree to report annually to the Director regarding the use of the grant funds.

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

(1) IN GENERAL.—The Secretary, acting through the Director, shall expand and improve the core public health infrastructure and activities of the Centers for Disease Control and Prevention to support activities necessary to address unmet, ongoing, and emerging public health needs, including prevention, preparation for, and response to public health emergencies.

(2) LIMITATION.—Out of amounts appropriated under subsection (a) to carry out this section for a fiscal year, not more than 25 percent of the funds
awarded per fiscal year may be used by the Centers for Disease Control and Prevention to carry out this subsection.

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

(1) workforce capacity and competency;
(2) laboratory systems;
(3) all hazards public health and preparedness;
(4) testing capacity, including test platforms, mobile testing units, and personnel;
(5) health information, health information systems, and health information analysis;
(6) disease surveillance;
(7) contact tracing;
(8) communications;
(9) other relevant components of organizational capacity; and
(10) other related activities.

(f) SUPPLEMENT NOT SUPPLANT.—Amounts made available by this section shall be used to supplement, and not supplant, amounts otherwise made available for the purposes described in this Act.
SEC. 31002. FUNDING FOR HOSPITAL INFRASTRUCTURE.

(a) In General.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $10,000,000,000, to remain available until expended, to carry out subsection (b) consistent with enhancing the goals of parts B and C of title XVI of the Public Health Service Act (42 U.S.C. 300q et seq.).

(b) Use of Funds.—From amounts made available under subsection (a), the Secretary shall award grants to entities described in section 1610(a) of the Public Health Service Act (42 U.S.C. 300r(a)) for purposes of increasing capacity and updating hospitals and other medical facilities in order to better serve communities in need.

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

(1) The requirements related to reasonable volume of care described under section 1621(b)(1)(K)(ii) of such Act (42 U.S.C. 300s–1(b)(1)(K)(ii)).

(2) Section 1621(b)(1)(I) of such Act (42 U.S.C. 300s–1(b)(1)(I)).
(3) Any other provision of such parts that the Secretary determines (as prescribed by regulation) to be appropriate to carry out this section.

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

SEC. 31003. FUNDING FOR COMMUNITY HEALTH CENTER CAPITAL GRANTS.

(a) IN GENERAL.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $10,000,000,000, to remain available until expended, for necessary expenses for awarding grants and entering into cooperative agreements for capital projects to health centers funded under section 330 of the Public Health Service Act (42 U.S.C. 254b) to be awarded without regard to the time limitation in subsection (e)(3) and subsections (e)(6)(A)(iii), (e)(6)(B)(iii), and (r)(2)(B) of such section 330, and for necessary expenses for awarding grants and cooperative agreements for capital projects to Federally qualified health centers, as described in section 1861(aa)(4)(B) of the Social Security Act (42 U.S.C. 1395x(aa)(4)(B)). The Secretary shall take such steps as
may be necessary to expedite the awarding of such grants to Federally qualified health centers for capital projects.

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

SEC. 31004. FUNDING FOR COMMUNITY-BASED CARE INFRA-
STRUCTURE.

(a) IN GENERAL.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $500,000,000, to remain available until expended, for purposes of making awards to qualified teaching health centers (as defined in section 340H of the Public Health Service Act (42 U.S.C. 256h)), and to behavioral health care centers (as defined by the Secretary to include both substance abuse and mental health care facilities).

(b) USE OF FUNDS.—Amounts made available pursuant to subsection (a) shall be used to support the improvement, renovation, or modernization of infrastructure at such centers, including to respond to public health emer-
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1. Agencies declared under section 319 of the Public Health
Service Act (42 U.S.C. 247d).

SEC. 31005. FUNDING FOR SCHOOLS OF MEDICINE IN UN-
DERSERVED AREAS.

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

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

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

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

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

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

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

(5) hire faculty, including faculty from racial
and ethnic groups who are underrepresented among
the medical and other health professions, and other
staff to serve at such a school or branch campus;
(6) support educational programs at such a school or branch campus, including modernizing curriculum;

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

(8) support other activities that the Secretary determines will further the establishment, improvement, or expansion of a school of medicine or osteopathic medicine or branch campus of a school of medicine or osteopathic medicine.

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

(d) DEFINITIONS.—In this section:


(2) BRANCH CAMPUS.—

(A) IN GENERAL.—The term “branch campus”, with respect to a school of medicine or osteopathic medicine, means an additional location of such school that is geographically apart and independent of the main campus, at which
the school offers at least 50 percent of the program leading to a degree of doctor of medicine or doctor of osteopathy that is offered at the main campus.

(B) INDEPENDENCE FROM MAIN CAMPUS.—For purposes of subparagraph (A), the location of a school described in such subparagraph shall be considered to be independent of the main campus described in such subparagraph if the location—

(i) is permanent in nature;

(ii) offers courses in educational programs leading to a degree, certificate, or other recognized educational credential;

(iii) has its own faculty and administrative or supervisory organization; and

(iv) has its own budgetary and hiring authority.

SEC. 31006. FUNDING FOR NURSING EDUCATION ENHANCEMENT AND MODERNIZATION GRANTS IN UNDERSERVED AREAS.

(a) IN GENERAL.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $1,000,000,000, to remain available until
expended, for purposes of making awards to schools of nursing (as defined in section 801 of the Public Health Service Act (42 U.S.C. 296)) to enhance and modernize nursing education programs and increase the number of faculty and students at such schools.

(b) USE OF FUNDS.—The Secretary, acting through the Administrator of the Health Resources and Services Administration, taking into consideration equitable distribution of awards among the geographical regions of the United States and the capacity of a school of nursing to provide care in underserved areas, shall use amounts appropriated by subsection (a) to award grants for purposes of—

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

(2) creating, supporting, or modernizing educational programs and curricula at such school;
(3) retaining current faculty, and hiring new
faculty, with an emphasis on faculty from racial or
ethnic groups that are underrepresented in the nurs-
ing workforce;

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

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

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

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

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

SEC. 31007. FUNDING FOR TEACHING HEALTH CENTER
GRADUATE MEDICAL EDUCATION.

(a) In General.—In addition to amounts otherwise
available, and notwithstanding the limitations referred to
in subsections (b)(2) and (d)(2) of section 340H of the Public Health Service Act (42 U.S.C. 256h), there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $6,000,000,000, to remain available until expended, for—

(1) the program of payments to teaching health centers that operate graduate medical education programs under such section; and

(2) the award of teaching health center development grants pursuant to section 749A of the Public Health Service Act (42 U.S.C. 293l–1).

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

(1) For making payments to establish new approved graduate medical residency training programs pursuant to section 340H(a)(1)(C) of the Public Health Service Act (42 U.S.C. 256h(a)(1)(C)).

(2) For making payments under section 340H(a)(1)(A) of the Public Health Service Act (42 U.S.C. 256h(a)(1)(A)) to qualified teaching health centers for maintenance of filled positions at existing approved graduate medical residency training programs.
(3) For making payments under section 340H(a)(1)(B) of the Public Health Service Act (42 U.S.C. 256h(a)(1)(B)) for the expansion of existing approved graduate medical residency training programs.

(4) For making awards under section 749A of the Public Health Service Act (42 U.S.C. 293l–1) to teaching health centers for the purpose of establishing new accredited or expanded primary care residency programs.

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

SEC. 31008. FUNDING FOR NURSE CORPS.

In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $300,000,000, to remain available until expended, for carrying out section 846 of the Public Health Service Act (42 U.S.C. 297n).
PART 2—PANDEMIC PREPAREDNESS

SEC. 31021. FUNDING FOR LABORATORY ACTIVITIES AT THE CENTERS FOR DISEASE CONTROL AND PREVENTION.

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

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

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

(A) increasing and enhancing testing and response capacity;

(B) upgrades and expansion of the Laboratory Response Network for rapid outbreak detection;
(C) improving and expanding genomic sequencing capabilities to detect emerging diseases and variant strains;

(D) expanding biosafety and biosecurity capacity; and

(E) making other laboratory enhancements and modernization as determined by the Director to be important for maintaining public health.

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

(3) Enhancing the ability of the Centers for Disease Control and Prevention to monitor and exercise oversight over biosafety and biosecurity of State and local public health laboratories.

SEC. 31022. STRENGTHENING VACCINE CONFIDENCE.

(a) IN GENERAL.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $1,250,000,000, to remain available until expended, to carry out, acting through the Director of the Centers for Disease Control and Prevention, directly or by making grants to public or private entities, activities
described in subsection (b) in the United States, including
its territories and possessions.

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

(1) strengthen vaccine confidence;

(2) strengthen routinely recommended vaccine
programs; and

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

SEC. 31023. FUNDING FOR SURVEILLANCE ACTIVITIES AT
THE CENTERS FOR DISEASE CONTROL AND
PREVENTION.

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

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

(1) enhance and strengthen early warning and
detection systems, including public health and health
care surveillance, wastewater testing, and global and domestic genomic surveillance;

(2) enhance and strengthen surveillance based in hospitals and other health care providers or facilities, and outpatient facility surveillance for severe acute respiratory infection, influenza-like illness, acute febrile illness, and other diseases as determined by the Director of the Centers for Disease Control and Prevention to be in the interest of public health; and

(3) strengthen the antibiotic resistance initiative program to improve research, stewardship, genomic detection capabilities, and surveillance of existing and emerging antimicrobial resistant pathogens.

SEC. 31024. FUNDING FOR DATA MODERNIZATION AT THE CDC.

(a) IN GENERAL.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $500,000,000, to remain available until expended—

(1) to carry out, acting through the Director of the Centers for Disease Control and Prevention, di-
rectly or by making grants to public or private entities, activities described in subsection (b); and

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

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

(1) Supporting public health data surveillance, aggregation, and analytics infrastructure modernization initiatives.

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

(3) Expanding and maintaining efforts to modernize the United States disease warning system to forecast and track hotspots and emerging biological threats.

SEC. 31025. FUNDING FOR PUBLIC HEALTH AND PREPAREDNESS RESEARCH, DEVELOPMENT, AND COUNTERMEASURE CAPACITY.

(a) IN GENERAL.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $8,000,000,000, to remain available until expended, to carry out activities, acting through the As-
sistant Secretary for Preparedness and Response, to pre-
pare for, and respond to, public health emergencies de-
clared under section 319 of the Public Health Service Act
(42 U.S.C. 247d), as described in subsection (b).

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

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

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

(3) $2,000,000,000 shall be used to support ac-
tivities to mitigate supply chain risks and enhance
supply chain elasticity and resilience for critical
drugs and supplies (including essential medicines,
medical countermeasures, medical devices, and sup-
plies in shortage or at risk of shortage), active phar-
aceutical ingredients, drug and vaccine raw mate-
rials, and other supplies, as the Secretary deter-
mines appropriate, including construction, expan-
sion, or modernization of facilities and other activi-
ties to support domestic manufacturing of such sup-
plies;

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

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

**PART 3—INNOVATION**

**SEC. 31031. FUNDING FOR ADVANCED RESEARCH**

**PROJECTS FOR HEALTH.**

(a) IN GENERAL.—In addition to amounts otherwise
available, there is appropriated to the Secretary for fiscal
year 2022, out of any money in the Treasury not otherwise appropriated, $3,000,000,000, to remain available until expended, to establish the Advanced Research Projects Agency for Health (in this section referred to as the “ARPA–H”) for purposes of making pivotal investments in breakthrough technologies and broadly applicable platforms, capabilities, resources, and solutions that have the potential to transform important areas of medicine and health for the benefit of all individuals and that cannot readily be accomplished through traditional biomedical research or commercial activity.

(b) USE OF FUNDS.—The Secretary—

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

(2) acting through the Director of the ARPA–H, and in consultation with other agencies, as applicable, shall—

(A) ensure to the maximum extent practicable that the projects and activities of the ARPA–H funded by subsection (a) are coordinated with, and do not duplicate the efforts of, programs within, or research conducted or supported by, the Department of Health and Human Services; and

(B) in using amounts made available by subsection (a), expedite the development, application, and implementation of health breakthroughs to prevent, detect, and treat serious or life-threatening diseases, including—

(i) providing awards in the form of grants, contracts, cooperative agreements, cash prizes, and other transactions (as defined in section 319L(a) of the Public Health Service Act (42 U.S.C. 247d–7e(a))) to entities to carry out advanced research projects for health, including through multiyear contracts (subject to the availability of funds) and prize competitions;

(ii) developing funding criteria and evaluation criteria to assess projects funded under clause (i);

(iii) establishing metrics or criteria to prioritize investments and research that should be funded under clause (i), including the novelty, scientific, and technical merit of proposed projects, the future commercial applications of projects, and the unmet need within patient populations;
(iv) identifying and promoting potential advances in basic research that will assist in carrying out advanced health research and development;

(v) supporting collaboration and communication among public and private entities;

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

(I) collaboration with the Food and Drug Administration on the development of medical products to facilitate transformation of breakthroughs in biomedicine into tangible solutions for patients; and

(II) ensuring that medical product development programs gather non-clinical and clinical data necessary for approval as efficiently as practicable;

(vii) hiring and appointing personnel necessary to carry out activities described in this section, including—
(I) making and rescinding appointments of scientific, medical, and professional personnel;

(II) designating personnel to serve as program managers (for terms of no more than 3 years subject to one renewal period) to establish research and development goals for the ARPA–H, provide project oversight and management of strategic initiatives, recommend restructure, expansion, or termination of research projects under this section, as necessary and appropriate, and carry out other activities described in this subsection; and

(III) hiring and appointing administrative, financial, and information technology staff as necessary to carry out this subsection;

(viii) compensating personnel at a rate to be determined by the Director of the ARPA–H;

(ix) acquiring (by purchase, lease, condemnation, or otherwise), constructing,
improving, repairing, operating, and maintaining such real and personal property as are necessary to carry out this section; and

(x) entering into or terminating contracts, including multiyear contracts, as appropriate to support advanced research projects for health.

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

(d) Supplement Not Supplant.—Funds appropriated by this section shall be used to supplement and not supplant any appropriations for institutes and centers of the National Institutes of Health.

PART 4—MATERNAL MORTALITY

SEC. 31041. GRANTS TO LOCAL ENTITIES ADDRESSING SOCIAL DETERMINANTS OF MATERNAL HEALTH.

(a) In General.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $175,000,000, to remain available until expended, to award grants to community-based organiza-
tions or other nonprofit organizations working with a community-based organization, operating in areas with high rates of adverse maternal health outcomes or with significant racial or ethnic disparities in maternal health outcomes.

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

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

(A) hiring, training, or retaining staff;

(B) developing or distributing culturally and linguistically appropriate resources for social services programs;

(C) offering programs and resources to address social determinants of health;

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

(E) establishing a culturally and linguistically appropriate resource center that provides multiple social services programs in a single location; and

(F) consulting with pregnant and postpartum individuals to conduct an assess-
ment of the activities conducted under this section.

(2) Promoting evidence-based health literacy and pregnancy, childbirth, and parenting education for pregnant and postpartum individuals, and individuals seeking to become pregnant.

(3) Providing support from perinatal health workers and clinical and support providers to pregnant and postpartum individuals.

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

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

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

(c) Minimum for Community-Based Organizations.—Of the amounts made available by subsection (a), the Secretary shall award not less than $75,000,000 for the Office of Minority Health to award grants to community-based organizations to carry out the activities described in subsection (b).
SEC. 31042. FUNDING TO GROW AND DIVERSIFY THE NURSING WORKFORCE IN MATERNAL AND PERINATAL HEALTH.

(a) In General.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $150,000,000, to remain available until expended, for grants to accredited schools of nursing for the purpose of growing and diversifying the perinatal nursing workforce.

(b) Use of Funds.—Amounts made available by subsection (a) shall be used for the following activities:

(1) Providing scholarships to students seeking to become nurse practitioners whose education includes a focus on maternal and perinatal health.

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

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

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

(5) Developing and implementing strategies to recruit and retain a diverse pool of students seeking
to enter careers focused on maternal and perinatal health.

(6) Developing partnerships with practice settings in a health professional shortage area designated under section 332 of the Public Health Service Act (42 U.S.C. 254e) for the clinical placements of students at the schools receiving such grants.

(7) Developing curriculum for students seeking to enter careers focused on maternal and perinatal health that includes training programs on bias, racism, or discrimination.

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

(c) Priority.—Of the amounts made available by subsection (a), the Secretary shall give priority to accredited schools of nursing that will prioritize awarding scholarships under paragraphs (1) through (4) of subsection (b) to students and registered nurses who practice in a health professional shortage area designated under such section of the Public Health Service Act.

SEC. 31043. FUNDING TO GROW AND DIVERSIFY THE DOULA WORKFORCE.

(a) In General.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal
year 2022, out of any money in the Treasury not otherwise appropriated, $50,000,000, to remain available until expended, for grants to health professions schools, academic health centers, State or local governments, territories, Indian Tribes and Tribal organizations, urban Indian organizations, or other appropriate public or private nonprofit entities (or consortia of entities, including entities promoting multidisciplinary approaches), to establish or expand programs to grow and diversify the doula workforce.

(b) Use of Funds.—Amounts made available by subsection (a) shall be used for the following activities:

(1) Establishing programs that provide education and training to individuals seeking appropriate training or certification as doulas.

(2) Expanding the capacity of existing programs described in paragraph (1), for the purpose of increasing the number of students enrolled in such programs, including by awarding scholarships for students.

(3) Developing and implementing strategies to recruit and retain students from underserved communities, particularly from demographic groups experiencing high rates of maternal mortality and severe maternal morbidity, including racial and ethnic
minority groups, into programs described in paragraphs (1) and (2).

SEC. 31044. FUNDING TO GROW AND DIVERSIFY THE MATERNAL MENTAL HEALTH AND SUBSTANCE USE DISORDER TREATMENT WORKFORCE.

(a) IN GENERAL.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $75,000,000, to remain available until expended, for grants to health professions schools, academic health centers, State or local governments, territories, Indian Tribes and Tribal organizations, urban Indian organizations, or other appropriate public or private nonprofit entities (or consortia of entities, including entities promoting multidisciplinary approaches), to establish or expand programs to grow and diversify the maternal mental health and substance use disorder treatment workforce.

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

(1) Establishing programs that provide education and training to individuals seeking appropriate licensing or certification as mental health or substance use disorder treatment providers who plan to specialize in maternal mental health conditions or substance use disorders.
(2) Expanding the capacity of existing programs described in paragraph (1), for the purposes of increasing the number of students enrolled in such programs, including by awarding scholarships for students.

(3) Developing and implementing strategies to recruit and retain students from underserved communities into programs described in paragraphs (1) and (2).

SEC. 31045. MATERNAL MENTAL HEALTH EQUITY GRANT PROGRAMS.

(a) In General.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $100,000,000, to remain available until expended, for grants to community-based organizations, health care providers, accredited medical schools, accredited schools of nursing, teaching hospitals, midwifery programs, physician assistant education programs, residency or fellowship programs, or other schools or programs determined appropriate by the Secretary, to address maternal mental health conditions and substance use disorders with respect to pregnant, lactating, and postpartum individuals in areas with high rates of adverse maternal health
outcomes or with significant racial or ethnic disparities in maternal health outcomes.

(b) USE OF FUNDS.—Amounts made available pursuant to subsection (a) shall be for the following activities:

(1) Establishing or expanding maternity care programs to improve the integration of mental health and substance use disorder treatment services into primary care settings where pregnant individuals regularly receive health care services.

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

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

(4) Providing services and support for individuals with maternal mental health conditions and substance use disorders, starting in pregnancy and continuing through the postpartum period.

(5) Addressing stigma associated with maternal mental health conditions and substance use disorders, with a focus on racial and ethnic minority groups.
(6) Raising awareness of warning signs of maternal mental health conditions and substance use disorders, with a focus on pregnant, lactating, and postpartum individuals from racial and ethnic minority groups.

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

(8) Offering evidence-aligned programs at free-standing birth centers that provide maternal mental health and substance use disorder education, treatments, and services, and other services for individuals throughout the prenatal and postpartum period.

(9) Establishing or expanding programs to provide education and training to maternity care providers with respect to—

(A) identifying potential warning signs for maternal mental health conditions or substance use disorders in pregnant, lactating, and postpartum individuals, with a focus on individuals from racial and ethnic minority groups; and

(B) in the case where such providers identify such warning signs, offering referrals to
mental health substance use disorder treatment professionals.

(10) Developing a national website, or other source, that includes information on health care providers who treat maternal mental health conditions and substance use disorders.

(11) Establishing or expanding programs in communities to improve coordination between maternity care providers and mental and behavioral health care providers who treat maternal mental health conditions and substance use disorders.

(12) Carrying other programs aligned with evidence-based or evidence-informed practices for addressing maternal mental health conditions and substance use disorders for pregnant and postpartum individuals from racial and ethnic minority groups.

SEC. 31046. FUNDING FOR EDUCATION AND TRAINING AT HEALTH PROFESSIONS SCHOOLS TO IDENTIFY AND ADDRESS HEALTH RISKS ASSOCIATED WITH CLIMATE CHANGE.

(a) In General.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $85,000,000, to remain available until expended, for grants to accredited medical schools, accredited—
ited schools of nursing, teaching hospitals, midwifery programs, physician assistant education programs, residency or fellowship programs, or other schools or programs determined appropriate by the Secretary, to support the development and integration of education and training programs for identifying and addressing health risks associated with climate change for pregnant, lactating, and postpartum individuals.

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

(1) Identifying health risks associated with climate change for pregnant, lactating, and postpartum individuals and individuals with the intent to become pregnant.

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

(3) Racial and ethnic disparities in exposure to, and the effects of, health risks associated with climate change for pregnant, lactating, and postpartum individuals and individuals with the intent to become pregnant.
(4) Patient counseling and mitigation strategies relating to health risks associated with climate change for pregnant, lactating, and postpartum individuals.

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

(6) Implicit and explicit bias, racism, and discrimination in providing care to pregnant, lactating, and postpartum individuals and individuals with the intent to become pregnant.

SEC. 31047. GRANTS TO MINORITY-SERVING INSTITUTIONS TO STUDY MATERNAL MORTALITY, SEVERE MATERNAL MORBIDITY, AND ADVERSE MATERNAL HEALTH OUTCOMES.

(a) In General.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $50,000,000, to remain available until expended for minority-serving institutions described in section 371 of the Higher Education Act of 1965 (20 U.S.C. 1067q).
(b) USE OF FUNDS.—Amounts made available by subsection (a) shall be used for the following activities:

(1) Developing and implementing systematic processes of listening to the stories of pregnant and postpartum individuals from racial and ethnic minority groups, and perinatal health workers supporting such individuals, to fully understand the causes of, and inform potential solutions to, the maternal mortality and severe maternal morbidity crisis within their respective communities.

(2) Assessing the potential causes of relatively low rates of maternal mortality among Hispanic individuals and foreign-born Black women.

(3) Assessing differences in rates of adverse maternal health outcomes among subgroups identifying as Hispanic.

(4) Conducting outreach to eligible minority-serving institutions to raise awareness of the availability of the grants.

(5) Providing technical assistance on the application process for such grant.

(6) Promoting capacity building to eligible entities.
SEC. 31048. FUNDING FOR IDENTIFICATION OF MATERNITY CARE HEALTH PROFESSIONAL TARGET AREAS.

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

SEC. 31049. FUNDING FOR MATERNAL MORTALITY REVIEW COMMITTEES TO PROMOTE REPRESENTATIVE COMMUNITY ENGAGEMENT.

In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $50,000,000, to remain available until expended, for carrying out section 317K(d) of the Public Health Service Act (42 U.S.C. 247b–12(d)) to promote community engagement in maternal mortality review committees to increase the diversity of a committee’s membership with respect to race and ethnicity, location, and professional background.
SEC. 31050. FUNDING FOR THE SURVEILLANCE FOR
EMERGING THREATS TO MOTHERS AND BABIES.

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

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

(1) Expanding the Surveillance for Emerging Threats to Mothers and Babies activities of the Centers for Disease Control and Prevention.

(2) Working with public health, clinical, and community-based organizations to provide timely, continually updated, evidence-based guidance to families and health care providers on ways to reduce risk to pregnant and postpartum individuals and their newborns and tailor interventions to improve their long-term health.

(3) Partnering with more State, Tribal, territorial, and local public health programs in the collection and analysis of clinical data on the impact of
COVID–19 on pregnant and postpartum patients and their newborns, particularly among patients from racial and ethnic minority groups.

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

SEC. 31051. FUNDING FOR THE ENHANCING REVIEWS AND SURVEILLANCE TO ELIMINATE MATERNAL MORTALITY PROGRAM.

(a) In general.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $30,000,000, to remain available until expended, for carrying out the Enhancing Reviews and Surveillance to Eliminate Maternal Mortality program established under section 317K of the Public Health Service Act (42 U.S.C. 247b–12).

(b) Use of funds.—Amounts made available by subsection (a) shall be used for the following activities:

(1) Expanding the Enhancing Reviews and Surveillance to Eliminate Maternal Mortality program
(commonly known as the “ERASE MM program”)
of the Centers for Disease Control and Prevention.

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

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

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

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

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

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

(2) Conducting a rapid assessment of COVID–
19 awareness, impact on care and experiences, and
use of preventive measures among pregnant, labor-
ing and birthing, and postpartum individuals.
(3) Supporting the transition of the questionnaire described in paragraph (1) to an electronic platform and expanding the distribution of the questionnaire to a larger population, with a special focus on reaching underrepresented communities.

SEC. 31053. FUNDING FOR THE NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT. In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $15,000,000, to remain available until expended, for carrying out section 301 of the Public Health Service Act (42 U.S.C. 241) and title IV of the Public Health Service Act (42 U.S.C. 281 et seq.) with respect to child health and human development, to conduct or support research for interventions to mitigate the effects of the COVID–19 public health emergency on pregnant, lactating, and postpartum individuals, with a particular focus on individuals from racial and ethnic minority groups.

SEC. 31054. GRANTS TO EXPAND THE USE OF TECHNOLOGY-ENABLED COLLABORATIVE LEARNING AND CAPACITY MODELS FOR PREGNANT AND POSTPARTUM INDIVIDUALS. (a) IN GENERAL.—In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal
year 2022, out of any money in the Treasury not otherwise
appropriated, $30,000,000, to remain available until ex-
pended, for grants to community-based organizations,
health care providers, accredited medical schools, accred-
ited schools of nursing, teaching hospitals, midwifery pro-
grams, physician assistant education programs, residency
or fellowship programs, or other schools or programs de-
termined appropriate by the Secretary, that are operating
in health professional shortage areas designated under
section 332 of the Public Health Service Act (42 U.S.C.
254e) with high rates of adverse maternal health outcomes
or significant racial and ethnic disparities in maternal
health outcomes, to evaluate, develop, and expand the use
of technology-enabled collaborative learning.

(b) USE OF FUNDS.—

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

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

(i) enables distance learning and tech-

ical support; and
(ii) supports the secure exchange of
electronic health information; and

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

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

SEC. 31055. GRANTS TO PROMOTE EQUITY IN MATERNAL
HEALTH OUTCOMES THROUGH DIGITAL
TOOLS.

(a) IN GENERAL.—In addition to amounts otherwise
available, there is appropriated to the Secretary for fiscal
year 2022, out of any money in the Treasury not otherwise
appropriated, $30,000,000, to remain available until ex-
pended, for grants to community-based organizations,
health care providers, accredited medical schools, accred-
ited schools of nursing, teaching hospitals, midwifery pro-
grams, physician assistant education programs, residency
or fellowship programs, or other schools or programs de-
termined appropriate by the Secretary, that are operating
in health professional shortage areas designated under
section 332 of the Public Health Service Act (42 U.S.C.
254e) with high rates of adverse maternal health outcomes
or significant racial and ethnic disparities in maternal
health outcomes to reduce racial and ethnic disparities in
maternal health outcomes by increasing access to digital
tools related to maternal health care.

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

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

(2) Providing technical assistance to recipients
of grants awarded pursuant to subsection (a) on the
development, use, evaluation, and postgrant sustain-
ability of digital tools for purposes of promoting eq-

SEC. 31056. FUNDING FOR ANTIDISCRIMINATION AND BIAS
TRAINING.

(a) IN GENERAL.—In addition to amounts otherwise
available, there is appropriated to the Secretary for fiscal
year 2022, out of any money in the Treasury not otherwise
appropriated, $25,000,000, to remain available until expended, for the purpose described in subsection (b).

(b) USE OF FUNDS.—The Secretary shall use amounts appropriated under subsection (a) to award competitive grants or contracts to national nonprofit organizations focused on improving health equity, accredited schools of medicine or nursing, and other health professional training programs to develop, disseminate, review, research, and evaluate training for health professionals and all staff who interact with patients to reduce discrimination and bias in the provision of health care.

PART 5—OTHER PUBLIC HEALTH INVESTMENTS

SEC. 31061. FUNDING FOR MENTAL HEALTH AND SUBSTANCE USE DISORDER PROFESSIONALS.

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

SEC. 31062. NATIONAL SUICIDE PREVENTION LIFELINE.

In addition to amounts otherwise available, there is appropriated to the Secretary for fiscal year 2022, out of any money in the Treasury not otherwise appropriated, $75,000,000, to remain available until expended, for ad-
vancing infrastructure for the National Suicide Prevention Lifeline program under section 520E–3 of the Public Health Service Act (42 U.S.C. 290bb–36c) in order to expand existing capabilities for response in a manner that avoids duplicating existing capabilities for text-based crisis support.

SEC. 31063. FUNDING FOR COMMUNITY VIOLENCE AND TRAUMA INTERVENTIONS.

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

(1) $150,000,000 for fiscal year 2022.
(2) $250,000,000 for fiscal year 2023.
(3) $450,000,000 for fiscal year 2024.
(4) $550,000,000 for each of fiscal years 2025, 2026, and 2027.

(b) Use of Funding.—The Secretary, acting through the Director of the Centers for Disease Control and Prevention, and in consultation with the Assistant Secretary for Mental Health and Substance Use, the Administrator of the Health Resources and Services Administration, and the Deputy Assistant Secretary for Minority Health and with public health and medical professionals,
victim services community-based organizations, and other
violence reduction experts, shall use amounts appropriated
by subsection (a) to support public health approaches to
reduce community violence and trauma, taking into con-
sideration the needs of communities with high rates of,
and prevalence of risk factors associated with, violence-
related injuries and deaths, by—

(1) awarding competitive grants or contracts to
local governmental entities, States, territories, In-
dian Tribes and Tribal organizations, urban Indian
organizations, hospitals and community health cen-
ters, nonprofit community-based organizations, cul-
turally specific organizations, victim services pro-
viders, or other entities as determined by the Sec-
retary (or consortia of such entities) to support evi-
dence-based, culturally competent, and develop-
mentally appropriate strategies to reduce community
violence, including outreach and conflict mediation,
hospital-based violence intervention, violence inter-
ruption, and services for victims and individuals and
communities at risk for experiencing violence, such
as trauma-informed mental health care and coun-
seling, school-based mental health services, and
other services; and
supporting training, technical assistance, surveillance systems, and data collection to facilitate support for strategies to reduce community violence and ensure safe and healthy communities.

(c) SUPPLEMENT NOT SUPPLANT.—Amounts appropriated under this section shall be used to supplement and not supplant any Federal, State, or local funding otherwise made available for the purposes described in this section.

SEC. 31064. FUNDING FOR HIV HEALTH CARE SERVICES PROGRAMS.

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

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

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

“SEC. 3352. SUPPLEMENTAL FUND.

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

“(b) AMOUNT.—Out of any money in the Treasury not otherwise appropriated, there is appropriated for fiscal year 2022, $2,860,000,000, for deposit into the Supplemental Fund, which amounts shall remain available through fiscal year 2031.

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

“(d) RETURN OF FUNDS.—Any amounts that remain in the Supplemental Fund on September 30, 2031, shall be deposited into the Treasury as miscellaneous receipts.”.
CONFORMING AMENDMENTS.—Title XXXIII of the Public Health Service Act (42 U.S.C. 300mm et seq.) is amended—

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

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

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

(i) in subsection (a), by inserting “and the World Trade Center Health Program Supplemental Fund” before the period at the end; and

(ii) in subsection (d)—

(I) in paragraph (1)(B), by inserting “(excluding any expenditures from amounts in the World Trade Center Health Program Supplemental Fund under section 3352)” before the period at the end; and
(II) in paragraph (2), in the flush text following subparagraph (C), by inserting “(excluding any expenditures from amounts in the World Trade Center Health Program Supplemental Fund under section 3352)” before the period at the end; and

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

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

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

(b) RESEARCH COHORT FOR EMERGING HEALTH IMPACTS ON YOUTH.—

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

(A) by redesignating subsections (c) and (d) as subsections (d) and (e), respectively; and
(B) by inserting after subsection (b) the following:

“(c) RESEARCH COHORT FOR EMERGING HEALTH IMPACTS ON YOUTH.—The WTC Program Administrator shall establish a research cohort of sufficient size to conduct research studies on the health and educational impacts of exposure to airborne toxins, or any other hazard or adverse condition, resulting from the September 11, 2001, terrorist attacks on the population of individuals who were 21 years of age or younger at the time of exposure and who are enrolled in the WTC Program or otherwise eligible for enrollment in the Program under section 3321.”

(2) SPENDING LIMITATION EXEMPTION.—Section 3351(c)(5) of such Act (42 U.S.C. 300mm–61(c)(5)) is amended in the matter preceding subparagraph (A), by inserting “(other than subsection (c) of such section)” after “section 3341”.

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