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(Original Signature of Member)

110TH CONGRESS
1ST SESSION

H. R. _____

To amend the Public Health Service Act to improve the Nation's surveillance and reporting for diseases and conditions, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr. TERRY introduced the following bill; which was referred to the Committee on _____

A BILL

To amend the Public Health Service Act to improve the Nation's surveillance and reporting for diseases and conditions, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the ''National Integrated Public Health Surveillance Systems and Reportable Conditions Act''.

SEC. 2. STRENGTHENING PUBLIC HEALTH SURVEILLANCE SYSTEMS.

Title XXVIII of the Public Health Service Act (42 U.S.C. 300hh et seq.) is amended by adding at the end the following:

"Subtitle C—Strengthening Public Health Surveillance Systems

"SEC. 2821. EPIDEMIOLOGY-LABORATORY CAPACITY GRANTS.

"(a) IN GENERAL.—Subject to the availability of appropriations, the Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall establish an Epidemiology and Laboratory Capacity Grant Program to award grants to eligible entities to assist public health agencies in improving surveillance for, and response to, infectious diseases and other conditions of public health importance by—

"(1) strengthening epidemiologic capacity;

"(2) enhancing laboratory practice;

"(3) improving information systems; and

"(4) developing and implementing prevention and control strategies.

"(b) ELIGIBLE ENTITIES.—In this section, the term 'eligible entity' means an entity that—

"(1) is—

"(A) a State health department; or

''(B) a large local health department (as defined by the Director of the Centers for Disease Control and Prevention for purposes of this section); and

''(2) submits to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require.

''(c) USE OF FUNDS.—

''(1) IN GENERAL.—An eligible entity shall use amounts received under a grant under this section as provided for the core functions described in this subsection.

''(2) DEVELOPMENT AND MAINTENANCE OF STAFFING AND TECHNICAL INFRASTRUCTURE.—

''(A) NATIONAL STANDARDS.—Not later than 180 days after the date of enactment of this subtitle, the Secretary, in consultation with the Director of the Centers for Disease Control and Prevention and the National Health Information Technology Coordinator, as established by Executive Order 13335, shall establish guidelines for implementing nationally interoperable information system standards. Such guidelines shall be designed to ensure that all State and local health departments and public

health laboratories have access to information systems to receive, monitor, and report infectious diseases and other urgent conditions of public health importance.

''(B) SECURE INFORMATION SYSTEMS.—An eligible entity shall use amounts received through a grant under this section to ensure that the entity has access, within 4 years of receiving such grant, to a web-based, secure information system that complies with the guidelines developed under subparagraph (A). Such a system shall be designed—

''(i) to receive automated case reports of national reportable conditions from clinical systems and health care offices that use electronic health records and from clinical and public health laboratories, and to investigate and submit confirmed reports of nationally reportable conditions to the Director of the Centers for Disease Control and Prevention;

''(ii) to receive and analyze, within 24 hours, de-identified electronic clinical data for situational awareness and to forward

such reports instantaneously to the Centers for Disease Control and Prevention;

''(iii) to manage, link, and process different types of data, including information on newly reported cases, exposed contacts, laboratory results, number of people vaccinated or given prophylactic medications, adverse events monitoring and follow-up, in an integrated electronic outbreak management system;

''(iv) to analyze, display, report, and map, using Geographic Information System technology, accumulated data and to share data with other local health departments, State health departments, and the Centers for Disease Control and Prevention;

''(v) to receive, manage, and disseminate alerts, protocols, and other information, including Health Alert Network and Epi-X information, for public health workers, health care providers, and public health partners in emergency response within each health department's jurisdiction and to automate the exchange and

cascading of such information with external partners using national standards;

''(vi) to have information technology security and critical infrastructure protection as appropriate to protect public health information;

''(vii) to have the technical infrastructure needed to ensure availability, backup and disaster recovery of data, application services, and communications systems during natural disasters such as floods, tornados, hurricanes, and power outages; and

''(viii) to provide for other capabilities as the Secretary determines appropriate.

''(C) LABORATORY SYSTEMS.—An eligible entity shall use amounts received under a grant under this section to ensure that State or local public health laboratories, within 4 years of receiving such grant, are utilizing web-based, secure systems, that are in compliance with the guidelines developed by the Secretary under subparagraph (A) and that—

''(i) are fully integrated laboratory information systems;

"(ii) provide for the reporting of electronic test results to the appropriate local and State health departments using currently existing national format and coding standards;

"(iii) have information technology security and critical infrastructure protection as appropriate to protect public health information (as determined by the Secretary);

"(iv) have the technical infrastructure needed to ensure availability, backup, and disaster recovery of data, application services, and communications systems during natural disasters including floods, tornadoes, hurricanes, and power outages; and

"(v) address other capabilities as the Secretary determines appropriate.

"(D) OTHER USES.—In addition to the activities described in this paragraph, an eligible entity (including the entity's public health laboratory) may use amounts received under a grant under this section for systems development and maintenance, hiring necessary staff, and staff technical training. Grantees under

this section may elect to develop their own systems or use federally developed systems in carrying out activities under this paragraph.

''(E) REPORTS.—Not later than September 30, 2009, and each September 30 thereafter, the Secretary shall submit to Congress an annual report on the activities carried out under this paragraph by recipients of assistance under this paragraph.

''(3) FELLOWSHIP TRAINING IN APPLIED PUBLIC HEALTH EPIDEMIOLOGY, PUBLIC HEALTH LABORATORY SCIENCE, AND PUBLIC HEALTH INFORMATICS.—

''(A) IN GENERAL.—The Secretary, acting through the Director of the Centers for Disease Control and Prevention, may carry out activities to address documented workforce shortages in State and local health departments in the critical areas of applied public health epidemiology and public health laboratory science and informatics.

''(B) SPECIFIC USES.—In carrying out subparagraph (A), the Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall provide for the

expansion of existing Council of State and Territorial Epidemiologists and Association of Public Health Laboratories fellowship programs operated through the Centers for Disease Control and Prevention in a manner that is designed to alleviate shortages of the type described in subparagraph (A).

''(C) OTHER PROGRAMS.—The Secretary, acting through the Director of the Centers for Disease Control and Prevention, may provide for the expansion of other applied epidemiology training programs that meet objectives similar to the objectives of the programs described in subparagraph (B).

''(D) WORK OBLIGATION.—Participation in fellowship training programs under this paragraph shall be deemed to be service for purposes of satisfying work obligations stipulated in contracts under section 338I(j).

''(E) GENERAL SUPPORT.—Amounts may be used from grants awarded under this section to expand the Public Health Informatics Fellowship Program at the Centers for Disease Control and Prevention to better support all

public health systems at all levels of government.

''(d) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section, $164,000,000 for each of fiscal years 2009 through 2012, of which—

''(1) not less than $60,000,000 shall be made available in each such fiscal year for activities under subsection (c)(2)(B);

''(2) not less than $32,000,000 shall be made available in each such fiscal year for activities under subsection (c)(2)(C);

''(3) not less than $5,000,000 shall be made available in each such fiscal year for epidemiology fellowship training program activities under subsection (c)(3)(B);

''(4) not less than $5,000,000 shall be made available in each such fiscal year for laboratory fellowship training programs under subsection (c)(3)(B); and

''(5) not less than $5,000,000 shall be made available in each such fiscal year for the Public Health Informatics Fellowship Program under subsection (c)(3)(E).

"SEC. 2822. NATIONALLY NOTIFIABLE DISEASES AND CONDITIONS.

"(a) IN GENERAL.—At the request of the Council of State and Territorial Epidemiologists, the Director of the Centers for Disease Control and Prevention shall assist the Council in developing or improving a process for States to conduct surveillance and submit reports to the Director on nationally notifiable diseases and conditions.

"(b) LIST OF NATIONALLY NOTIFIABLE DISEASES AND CONDITIONS.—The process under subsection (a) shall include a list of nationally notifiable diseases and conditions as follows:

"(1) The Council of State and Territorial Epidemiologists and the Director of the Centers for Disease Control and Prevention will jointly develop—

"(A) not later than 1 year after the date of the enactment of the National Integrated Public Health Surveillance Systems and Reportable Conditions Act, a list of nationally notifiable diseases and conditions; and

"(B) a process for reviewing the list on an annual basis and, as appropriate, modifying the list, taking into account newly recognized diseases and conditions of public health importance and advances in diagnostic technology.

''(2) A disease or condition will be included on the list only if a majority of the States represented on the Council approve such inclusion.

''(3) The list will include standard definitions for confirmed, probable, and suspect cases for each nationally notifiable disease or condition.

''(4) The list will distinguish between—

''(A) diseases and conditions of urgent public health importance for which immediate action may be needed; and

''(B) diseases and conditions for which reporting is less urgent and mainly for the purpose of monitoring trends and evaluating public health intervention programs.

''(c) REPORTING.—The process under subsection (a) shall provide for reporting to the Director of the Centers for Disease Control and Prevention as follows:

''(1) For diseases and conditions described in subsection (b)(4)(A), reporting will occur—

''(A) by telephone or by using a system described in section 2821(c)(2)(B); and

''(B) within 24 hours of the State making a determination that a disease or condition meets the probable or confirmed case definition for that disease or condition.

''(2) For diseases and conditions described in subsection (b)(4)(B), reporting will occur—

''(A) by using a system described in section 2821(c)(2)(B); and

''(B) only if funding is sufficient for the State to conduct individual case surveillance and to have the necessary systems to support electronic reporting.

''(d) DEFINITIONS.—In this section, the term 'nationally notifiable', with respect to a disease or condition, means included on the list developed pursuant to subsection (b).

''SEC. 2823. EVALUATION OF BEST PRACTICES IN PUBLIC HEALTH SURVEILLANCE.

''(a) IN GENERAL.—The Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall establish a committee—

''(1) to evaluate best practices in public health surveillance, including human and animal disease surveillance and environmental health monitoring of harmful exposures through air, water, soil, or other means; and

''(2) to assess systems needed for improving coordination among public health surveillance and monitoring systems.

''(b) COMPOSITION.—The committee established under subsection (a) shall be composed of—

''(1) an epidemiologist employed and designated by the Director of the Centers for Disease Control and Prevention;

''(2) an informatics specialist designated by the Director of the Centers for Disease Control and Prevention;

''(3) an epidemiologist employed and designated by the Director of the Agency for Toxic Substances and Disease Registry;

''(4) a food scientist designated by the Secretary of Agriculture;

''(5) a food scientist designated by the Commissioner of Food and Drugs;

''(6) an individual designated by the Secretary of Agriculture from the Division of Veterinary Services;

''(7) a wildlife disease specialist designated by the Secretary of Agriculture;

''(8) an epidemiologist employed by a State and designated by the Council of State and Territorial Epidemiologists;

''(9) a public health laboratorian employed by a State and designated by the Association of Public Health Laboratories;

''(10) a public health veterinarian employed by a State and designated by the National Association of State Public Health Veterinarians;

''(11) a laboratorian designated by the American Association of Veterinary Laboratory Diagnosticians;

''(12) a State veterinarian designated by the National Assembly of State Animal Health Officials;

''(13) a State health official reporting to the Governor of a State and designated by the Association of State and Territorial Health Officials;

''(14) a local health official reporting to a county board, or its equivalent, and designated by the National Association of County and City Health Officials;

''(15) an environmental health scientist employed and designated by the Administrator of the Environmental Protection Agency; and

''(16) a State or local environmental health scientist designated by the Environmental Council of the States.

''(c) FUNCTIONS.—The committee established under subsection (a) shall—

''(1) review innovative approaches adopted by State and local agencies to improve disease detection;

''(2) evaluate best practices in public health surveillance;

''(3) develop model data sharing agreements among local, State, and Federal health agencies;

''(4) assess systems needed for coordinated animal and human disease surveillance and develop recommendations for the improvement of such surveillance; and

''(5) disseminate findings and recommendations to relevant local, State and Federal agencies.

''(d) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section, $750,000 for each of fiscal years 2009 through 2012.''.