

117TH CONGRESS  
2D SESSION

**S.** \_\_\_\_\_

To amend the Public Health Service Act to establish and support a network of Centers for Public Health Preparedness and Response.

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IN THE SENATE OF THE UNITED STATES

Mr. MARSHALL (for himself, Mr. LUJÁN, Mr. SCOTT of South Carolina, Mrs. GILLIBRAND, Mr. CASSIDY, and Mr. CARDIN) introduced the following bill; which was read twice and referred to the Committee on

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**A BILL**

To amend the Public Health Service Act to establish and support a network of Centers for Public Health Preparedness and Response.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Centers for Public  
5 Health Preparedness and Response Reauthorization Act”.

6 **SEC. 2. CENTERS FOR PUBLIC HEALTH PREPAREDNESS**  
7 **AND RESPONSE.**

8 (a) IN GENERAL.—Section 319F of the Public  
9 Health Service Act (42 U.S.C. 247d-6) is amended—

1           (1) by striking subsection (d) and inserting the  
2 following:

3           “(d) CENTERS FOR PUBLIC HEALTH PREPAREDNESS  
4 AND RESPONSE.—

5           “(1) IN GENERAL.—The Secretary, acting  
6 through the Director of the Centers for Disease  
7 Control and Prevention, may award grants, con-  
8 tracts, or cooperative agreements to institutions of  
9 higher education, including accredited schools of  
10 public health, or other nonprofit private entities to  
11 establish or support a network of Centers for Public  
12 Health Preparedness and Response (referred to in  
13 this subsection as ‘Centers’).

14           “(2) ELIGIBILITY.—To be eligible to receive an  
15 award under this subsection, an entity shall submit  
16 to the Secretary an application containing such in-  
17 formation as the Secretary may require, including a  
18 description of how the entity will—

19           “(A) coordinate relevant activities with  
20 State, local, and Tribal health departments and  
21 officials, health care facilities, and health care  
22 coalitions to improve public health preparedness  
23 and response, as informed by the public health  
24 preparedness and response needs of the commu-  
25 nity, or communities, involved;

1           “(B) prioritize efforts to implement evi-  
2           dence-informed or evidence-based practices to  
3           improve public health preparedness and re-  
4           sponse, including by helping to reduce the  
5           transmission of emerging infectious diseases;  
6           and

7           “(C) use funds awarded under this sub-  
8           section, including by carrying out any activities  
9           described in paragraph (3).

10          “(3) USE OF FUNDS.—As a condition of receiv-  
11          ing funds under this subsection, Centers established  
12          or supported shall carry out activities to advance  
13          public health preparedness and response capabilities,  
14          which may include by—

15               “(A) identifying, translating, and dissemi-  
16               nating promising research findings or strategies  
17               into evidence-informed or evidence-based prac-  
18               tices to inform preparedness for, and responses  
19               to, chemical, biological, radiological, or nuclear  
20               threats, including emerging infectious diseases,  
21               and other public health emergencies, which may  
22               include conducting research related to public  
23               health preparedness and response systems;

24               “(B) improving awareness of such evi-  
25               dence-informed or evidence-based practices and

1 other relevant scientific or public health infor-  
2 mation among health care professionals, public  
3 health professionals, other stakeholders, and the  
4 public, including through the development, eval-  
5 uation, and dissemination of trainings and  
6 training materials, consistent with section  
7 2802(b)(2), as applicable and appropriate, to  
8 support preparedness for, and responses to,  
9 such threats;

10 “(C) utilizing and expanding relevant tech-  
11 nological and analytical capabilities to inform  
12 public health and medical preparedness and re-  
13 sponse efforts;

14 “(D) expanding activities, including  
15 through public-private partnerships, related to  
16 public health preparedness and response, in-  
17 cluding participation in drills and exercises and  
18 training public health experts, as appropriate;  
19 and

20 “(E) providing technical assistance and ex-  
21 pertise related to responses to public health  
22 emergencies, as appropriate, to State, local, and  
23 Tribal health departments and other entities  
24 pursuant to paragraph (2)(A).

1           “(4) DISTRIBUTION OF AWARDS.—In awarding  
2           grants, contracts, or cooperative agreements under  
3           this subsection, the Secretary shall support not  
4           fewer than 10 Centers, subject to the availability of  
5           appropriations, and ensure that such awards are eq-  
6           uitably distributed among the geographical regions  
7           of the United States.”; and

8           (2) in subsection (f)(1)(C), by striking “, of  
9           which \$5,000,000 shall be used to carry out para-  
10          graphs (3) through (5) of such subsection”.

11          (b) REPEAL.—Section 319G of the Public Health  
12          Service Act (42 U.S.C. 247d-7) is repealed.