Summary of Division O – Division JJ of the Consolidated Appropriations Act

DIVISION O—EXTENDERS AND TECHNICAL CORRECTIONS

TITLE I—NATIONAL CYBERSECURITY PROTECTION SYSTEM AUTHORIZATION EXTENSION

Sec.101.Extension of DHS authority and reporting.

This would extend current DHS authorities to continue operating the National Cybersecurity Protection System (NCPS), commonly referred to as the Einstein program, which is an integrated system-of-systems that delivers a range of capabilities, such as intrusion detection, analytics, information sharing, and intrusion prevention.

TITLE II—NDAA TECHNICAL CORRECTIONS

Sec.201.Basic needs allowance technical correction.

As drafted, Section 611 of the FY 2023 NDAA was inoperable because it only modified section 402b(b) of the underlying statute, and it should have modified the full section, 402b. This had two effects:

1. It correctly raised eligibility for the Basic Needs Allowance to 150% of the federal poverty line (up from the existing 130% of the Federal poverty line), but it failed to raise the payment authorized to 150%. This is because the eligibility provision is in 37 USC 402b(b), while the payment provision is 37 USC 402b(c). The submitted correction modifies both the eligibility and payment provisions to 150% of the federal poverty line.
2. The final version of this bill also included an authorization for the secretaries of the military departments, on a case-by-case basis, to raise the payment (and eligibility) to up to 200% of the federal poverty line. However, again, the provision in Section 611 of the NDAA only modified the eligibility subsection (402b(b)), but did not make this modification in the payment subsection (402b(c)). The submitted correction modifies the payment subsection to allow for payments up to 200% of the federal poverty line in select cases.

Sec.202.Technical correction relating to applicability of agreement by a cadet or midshipman to play professional sport constituting breach of agreement to serve as an officer.

This technical change exempts cadets and midshipmen who have already affirmed their commitment to serve in their respective service, essentially those currently in their third or fourth year at a military service academy. More basically, this carves out those cadets and midshipmen currently in the graduating classes of 2023 and 2024.

TITLE III—IMMIGRATION EXTENSIONS

Sec. 301. E-Verify Extension

Extends through September 30, 2023 authority for the E-Verify employment authorization program.

Sec. 302. Nonminister Religious Worker Visa Program Extension

Extends through September 30, 2023 authority for the special immigrant status granted to religious workers other than ministers.

Sec. 303. H-2B Supplemental Visas Exemption

Extends through September 30, 2023 authority to grant the Secretary of Homeland Security discretion to add H-2B visas to the 66,000 H-2B visas currently authorized to be issued annually.

Sec. 304. Rural Healthcare Workers

Extends through September 30, 2023 authority for rural doctors employment visas.

TITLE IV—ENVIRONMENT AND PUBLIC WORKS MATTERS

Sec.401.Establishment of regional commission for the Great Lakes.

This section establishes the Great Lakes Authority under subtitle V of Title 40 of the U.S. Code, to support economic and infrastructure development in the watershed of the Great Lakes and the Great Lakes System in certain states. The subtitle establishes commission membership, voting structure, and staffing; outlines conditions for financial assistance; authorizes grants to local development districts; establishes an Inspector General for the commissions; and includes other provisions designed to produce a standard administrative framework

Sec.402.Reauthorization of National Wildlife Refuge System volunteer services, community partnership, and refuge education programs.

This section reauthorizes through Fiscal Year 2027 the volunteer services, community partnerships and refuge education programs of the National Wildlife Refuge System.

Sec.403.Numbering of segment.

This section makes a technical correction relating to the existing interstate designation for the Louis B. Nunn Cumberland Expressway (Expressway) in Kentucky. Under current law, there is duplicative interstate numbering along the Expressway. This section removes the original designation, which was established in the Intermodal Surface Transportation Efficiency Act of 1991, and maintains the other designation of the Expressway as an interstate spur of I-65.

Sec.404.Patrick Leahy Lake Champlain Basin Program.

This section amends section 120 of the Federal Water Pollution Control Act to: (1) reauthorize federal appropriations of $35 million annually for fiscal years 2023 through 2027 for the U.S. Environmental Protection Agency’s (EPA) Lake Champlain Basin regional watershed program; and (2) redesignates the program as the “Patrick Leahy Lake Champlain Basin Program,

Sec.405.Clean school bus program.

This section makes technical fixes to the Clean School Bus Program created in the Infrastructure Investment and Jobs Act (IIJA, P.L. 117-58, Section 71101). The section allows public charter schools and third-party school bus providers direct access to funding and provides additional flexibility in the requirement that there be five-year school bus contracts with local educational agencies.

TITLE V—SAFETY ENHANCEMENTS

Sec.501.Amendments to the flight crew alerting requirements.

- Codifies the Aircraft Certification, Safety, and Accountability Act (ACSAA) prohibition on issuing a type certificate for a transport category airplane after December 27, 2022, that does not incorporate a flight crew alerting system that, at a minimum, displays and differentiates among warnings, cautions, and advisories, and includes functions to assist the flight crew in prioritizing corrective actions and responding to systems failures.
- Provides an exception to this requirement if the application for the type certificate was submitted to the FAA prior to December 27, 2020, the date of enactment of the ACSAA. This is consistent with the original intention of ACSAA provision, Section 116(b)(1).
- Requires incorporation of additional safety enhancements – synthetic enhanced angle of attack and a means to shut off stall warnings and overspeed alerts – for the entire MAX aircraft fleet. The original equipment manufacturer is responsible for the costs of the safety enhancements retrofit for the operating fleet.
- Requires quarterly Congressional briefings by FAA on the status of type certification of the MAX-7 and MAX-10 and implementation of required safety enhancements.

TITLE VI—EXTENSION OF TEMPORARY ORDER FOR FENTANYL-RELATED SUBSTANCES

Sec.601.Extension of temporary order for fentanyl-related substances.

This provision extends until December 31, 2024 the temporary scheduling order issued by the Drug Enforcement Administration to place fentanyl-related substances in schedule I of the Controlled Substances Act. The current Congressional extension of the temporary order expires on December 31, 2022.

TITLE VII—FEDERAL TRADE COMMISSION OVERSIGHT OF HORSERACING INTEGRITY AND SAFETY AUTHORITY

Sec.701.Federal Trade Commission oversight of horseracing integrity and safety authority.

This amends the original Horseracing Integrity and Safety Act to give FTC sufficient oversight over HISA by giving FTC the authority to modify HISA-issued rules, modeled after the well-established SEC-FINRA framework.

TITLE VIII—UNITED STATES PAROLE COMMISSION EXTENSION

Sec.801.United States Parole Commission extension.

This provision extends the operations of the United States Parole Commission through October 31, 2023. Under the Sentencing Reform Act of 1984, the Commission was to cease operations by October 31, 1992. The most recent Congressional extension of this date expires with the current Continuing Resolution.

TITLE IX—EXTENSION OF FCC AUCTION AUTHORITY

Sec.901.Extension of FCC auction authority.

Extends the FCC's ability to auction spectrum until March 9 2023

TITLE X—BUDGETARY EFFECTS

Sec.1001.Budgetary effects.

Includes technical budgetary provisions. Rolls over the balances on the statutory PAYGO scorecards until 2025, thereby avoiding large, across-the-board cuts to certain mandatory spending programs beginning in 2023.

DIVISION P—ELECTORAL COUNT REFORM AND PRESIDENTIAL TRANSITION IMPROVEMENT

The *Electoral Count Reform and Presidential Transition Improvement Act* updates the *Electoral Count Act of 1887* to (1) clarify that the Vice President has only ministerial duties during the joint session of Congress to count electoral votes, (2) increase the threshold for Members to object to a state's electors or electoral votes from one Member of each chamber to one-fifth of each chamber, (3) require states to choose presidential electors in accordance with state laws enacted before Election Day; and (4) provide for expedited judicial review of a governor's certification of a state's electoral votes. The bill also provides clear guidelines for when eligible candidates for President and Vice President may receive government support for their transition into office.

DIVISION Q—AVIATION RELATED MATTERS

Sec.101.Advanced air mobility infrastructure pilot program.

S. 4246/H.R. 6270 as modified would establish a FAA planning grant program to assist in the preparation and development of infrastructure necessary to support the anticipated deployment of advanced air mobility (AAM) operations. Grants would be awarded to eligible recipients to facilitate the submission of comprehensive AAM infrastructure plans. Eligible grant recipients include states, localities, and Tribal governments, airport sponsors, transit agencies, port authorities, and metropolitan planning organizations.

CBO Score: On a preliminary basis, this would not affect direct spending or revenues over the 2023-2032 period.

Sec.102.Samya Rose Stumo National Air Grant Fellowship Program.

S. 4070 renames the National Air Grant Fellowship Program (Section 131 of the Aircraft Certification, Safety, and Accountability Act – P.L. 116-260) after Samya Rose Stumo, who died in the Ethiopian Airlines Flight 302 crash. The bill also includes a Sense of Congress to commemorate and recognize the lives lost in the Lion Air Flight 610 and Ethiopian Airlines Flight 302 crashes as well as the life of Indonesian diver Syachrul Anto, who died during search and recovery efforts in the aftermath of the Lion Air Flight 610 crash.

CBO Score: On a preliminary basis, this would not affect direct spending or revenues over the 2023-2032 period.

Sec.103.Temporary insurance for air carriers for certain terminated coverage.

If a "hostile nuclear detonation" event were to occur, causing existing air carrier insurance policies to be cancelled and air carriers to subsequently ground their fleets in the U.S. and around the world, the war risk proposal would allow the FAA to provide temporary insurance to air carriers for a period not to exceed 90 days. This 90 day time period would give the private insurance market time to respond, issue new commercial war risk insurance, and enable airlines to get their operations back up and running under these circumstances.

CBO Score: On a preliminary basis, this would affect direct spending over the 2023-2032 period by between -$500,000 and $500,000.

Sec.104.Removal of restriction on veterans concurrently serving in the Offices of Administrator and Deputy Administrator of the Federal Aviation Administration.

S. 3785 eliminates the restriction on veterans serving concurrently in the Offices of Administrator and Deputy Administrator of the Federal Aviation Administration.

CBO Score: This would not affect direct spending or revenues over the 2023-2032 period.

Sec.105.National aviation preparedness plan.

H.R. 884 as modified would direct DOT, in collaboration with HHS and DHS and other appropriate federal agencies, to develop a national aviation preparedness plan for communicable disease outbreaks. The preparedness plan would be required to prescribe the responsibilities of airports, air carriers, and government entities in responding to future pandemics; improve coordination among aviation stakeholders, and federal and international entities in preparing for future pandemics; and identify appropriate technologies, equipment, protective infrastructure and related policies to better respond to communicable disease outbreaks. GAO would also be directed to review and study the plan and submit their recommendations to congressional committees of jurisdiction.

CBO Score: On a preliminary basis, this would not affect direct spending or revenues over the 2023-2032 period.

Sec.106.Aerospace Supply Chain Resiliency Task Force.

H.R. 8049 as modified would direct the DOT to establish an aerospace supply chain resiliency task force, made up of a holistic group of industry and labor stakeholders, to identify vulnerabilities, assess risks, and recommend solutions to improve the domestic aerospace supply chain. The task force would terminate after issuing a report to CST and T&I no later than one year after the first meeting of the task force.

CBO Score: On a preliminary basis, this would not affect direct spending or revenues over the 2023-2032 period.

Sec.107.Covered operations elective standards.

The proposal would permit large private jet fractional (time-share) ownership programs to elect to impose an age cap of 70 years for their pilots. This authority to impose a pilot age cap is only extended to large private fractional ownership programs with high-volume operations (those that have performed 75,000 turbojet operations annually in 2019 or any subsequent year).

CBO Score: On a preliminary basis, this would not affect direct spending or revenues over the 2023-2032 period.

DIVISION R—NO TIKTOK ON GOVERNMENT DEVICES

This bill prohibits certain individuals from downloading or using TikTok on any device issued by the United States or a government corporation.

DIVISION S—OCEANS RELATED MATTERS

TITLE I - DRIFTNET MODERNIZATION AND BYCATCH REDUCTION ACT

This bill would prohibit the use of large mesh driftnets in United States waters and requires the National Oceanic and Atmospheric Administration to facilitate gear transition to reduce marine mammal, turtle, and bird bycatch. The only fishery impacted by this legislation would be the swordfish fishery off the coast of Southern California. This bill also allows for the collection of fees from halibut charter operators in the North Pacific, fees would be used to negotiate international halibut quotas and other conservation measures.

TITLE II - FISHERY RESOURCE DISASTERS IMPROVEMENT ACT

This bill would improve the process for fishery disaster determinations by providing additional clarity and timelines.

TITLE III - ALASKA SALMON RESEARCH TASK FORCE ACT

This bill would establish an Alaska Salmon Research Task Force at the Department of Commerce to review existing research and identify research gaps needed to support conservation and recovery of salmon that originate from watersheds in the State of Alaska.

TITLE IV - IUU TECHNICAL CORRECTIONS

This provision would make technical corrections to the Coast Guard provisions included in the National Defense Authorization Act relating to IUU fisheries

DIVISION T—SECURE 2.0 ACT OF 2022

TITLE I – EXPANDING COVERAGE AND INCREASING RETIREMENT SAVINGS

Section 101, Expanding automatic enrollment in retirement plans. One of the main reasons many Americans reach retirement age with little or no savings is that too few workers are offered an opportunity to save for retirement through their employers. However, even for those employees who are offered a retirement plan at work, many do not participate. But automatic enrollment in 401(k) plans – providing for people to participate in the plan unless they take the initiative to opt out – significantly increases participation. Since first defined and approved by the Treasury Department in 1998, automatic enrollment has boosted participation by eligible employees generally, and particularly for Black, Latinx, and lower-wage employees. An early study found that adoption of automatic enrollment increased participation in a 401(k) plan by short-tenure Latinx employees from 19 percent to 75 percent. An Ariel/Aon-Hewitt study found that, in plans using automatic enrollment, "[t]he most dramatic increases in enrollment rates are among younger, lower-paid employees, and the racial gap in participation rates is nearly eliminated among employees subject to auto-enrollment."

Section 101 requires 401(k) and 403(b) plans to automatically enroll participants in the respective plans upon becoming eligible (and the employees may opt out of coverage). The initial automatic enrollment amount is at least 3 percent but not more than 10 percent. Each year thereafter that amount is increased by 1 percent until it reaches at least 10 percent, but not more than 15 percent. All current 401(k) and 403(b) plans are grandfathered. There is an exception for small businesses with 10 or fewer employees, new businesses (i.e., those that have been in business for less than 3 years), church plans, and governmental plans. Section 101 is effective for plan years beginning after December 31, 2024.

Section 102, Modification of credit for small employer pension plan startup costs. The 3-year small business startup credit is currently 50 percent of administrative costs, up to an annual cap of $5,000. Section 102 makes changes to the credit by increasing the startup credit from 50 percent to 100 percent for employers with up to 50 employees. Except in the case of defined benefit plans, an additional credit is provided. The amount of the additional credit generally will be a percentage of the amount contributed by the employer on behalf of employees, up to a per-employee cap of $1,000. This full additional credit is limited to employers with 50 or fewer employees and phased out for employers with between 51 and 100 employees. The applicable percentage is 100 percent in the first and second years, 75 percent in the third year, 50 percent in

the fourth year, 25 percent in the fifth year – and no credit for tax years thereafter. Section 102 is effective for taxable years beginning after December 31, 2022.

Section 103, Saver's Match. Current law provides for a nonrefundable credit for certain individuals who make contributions to individual retirement accounts ("IRAs"), employer retirement plans (such as 401(k) plans), and ABLE accounts. Section 103 repeals and replaces the credit with respect to IRA and retirement plan contributions, changing it from a credit paid in cash as part of a tax refund into a federal matching contribution that must be deposited into a taxpayer's IRA or retirement plan. The match is 50 percent of IRA or retirement plan contributions up to $2,000 per individual. The match phases out between $41,000 and $71,000 in the case of taxpayers filing a joint return ($20,500 to $35,500 for single taxpayers and married filing separate; $30,750 to $53,250 for head of household filers). Section 103 is effective for taxable years beginning after December 31, 2026.

Section 104, Promotion of Saver's Match. Section 104 directs the Treasury Department to increase public awareness of the Saver's Match to increase use of the match by low and moderate income taxpayers. The promotion will make clear that the Saver's Match cannot be withdrawn without incurring penalties, including repayment to the Treasury Department in some cases where the Saver's Match is withdrawn from an individual retirement account before retirement. Taxpayers will have an election to designate a retirement account to receive the repaid Saver's Match. The Treasury Secretary must report to Congress on the Treasury Department's anticipated promotion efforts no later than July 1, 2026.

Section 105, Pooled employer plan modification. Section 105 clarifies that a pooled employer plan ("PEP") may designate a named fiduciary (other than an employer in the plan) to collect contributions to the plan. Such fiduciary would be required to implement written contribution collection procedures that are reasonable, diligent, and systematic. Section 105 is effective for plan years beginning after December 31, 2022.

Section 106, Multiple employer 403(b) plans. Multiple employer plans ("MEPs") provide an opportunity for small employers to band together to obtain more favorable retirement plan investment results and more efficient and less expensive management services. The Setting Every Community Up for Retirement Enhancement Act of 2019 ("SECURE Act") made MEPs more attractive by eliminating outdated barriers to the use of MEPs and improving the quality of MEP service providers. Section 106 allows 403(b) plans, which are generally sponsored by charities, educational institutions, and non-profits, to participate in MEPs and PEPs, including relief from the one bad apple rule so that the violations of one employer do not affect the tax treatment of employees of compliant employers. Section 106 is effective for plan years beginning after December 31, 2022.

Section 107, Increase in age for required beginning date for mandatory distributions. Under current law, participants are generally required to begin taking distributions from their retirement plans at age 72. The policy behind this rule is to ensure that individuals spend their retirement savings during their lifetime and not use their retirement plans for estate planning purposes to transfer wealth to beneficiaries. The SECURE Act of 2019 increased the required

minimum distribution age to 72. Section 107 further increases the required minimum distribution age further to 73 starting on January 1, 2023 – and increases the age further to 75 starting on January 1, 2033.

Section 108, Indexing IRA catch-up limit. Under current law, the limit on IRA contributions is increased by $1,000 (not indexed) for individuals who have attained age 50. Section 108 indexes such limit and is effective for taxable years beginning after December 31, 2023.

Section 109, Higher catch-up limit to apply at age 60, 61, 62, and 63. Under current law, employees who have attained age 50 are permitted to make catch-up contributions under a retirement plan in excess of the otherwise applicable limits. The limit on catch-up contributions for 2021 is $6,500, except in the case of SIMPLE plans for which the limit is $3,000. Section 109 increases these limits to the greater of $10,000 or 50 percent more than the regular catch-up amount in 2025 for individuals who have attained ages 60, 61, 62 and 63. The increased amounts are indexed for inflation after 2025. Section 109 is effective for taxable years beginning after December 31, 2024.

Section 110, Treatment of student loan payments as elective deferrals for purposes of matching contributions. Section 110 is intended to assist employees who may not be able to save for retirement because they are overwhelmed with student debt, and thus are missing out on available matching contributions for retirement plans. Section 110 allows such employees to receive those matching contributions by reason of repaying their student loans. Section 110 permits an employer to make matching contributions under a 401(k) plan, 403(b) plan, or SIMPLE IRA with respect to "qualified student loan payments." A qualified student loan payment is broadly defined as any indebtedness incurred by the employee solely to pay qualified higher education expenses of the employee. Governmental employers are also permitted to make matching contributions in a section 457(b) plan or another plan with respect to such repayments. For purposes of the nondiscrimination test applicable to elective contributions, Section 110 permits a plan to test separately the employees who receive matching contributions on student loan repayments. Section 110 is effective for contributions made for plan years beginning after December 31, 2023.

Section 111, Application of credit for small employer pension plan startup costs to employers which join an existing plan. Section 111 ensures the startup tax credit is available for 3 years for employers joining a MEP, regardless of how long the MEP has been in existence. Under both pre- and post-SECURE Act law, the startup tax credit only applies for the first 3 years that a plan is in existence. For example, if a small business joins a MEP that has already been in existence for 3 years, the startup credit is not available. If, for example, the MEP has been existence for 1 or 2 years when a small business joins, the small business may be able to claim the credit for 1 or 2 years, respectively. Section 111 fixes this issue so that employers joining a MEP (which includes PEPs) are eligible for the credit for all 3 years. Section 111 is effective retroactively for taxable years beginning after December 31, 2019.

Section 112, Military spouse retirement plan eligibility credit for small employers. Military spouses often do not remain employed long enough to become eligible for their employer's

retirement plan or to vest in employer contributions. Section 112 provides small employers a tax credit with respect to their defined contribution plans if they (1) make military spouses immediately eligible for plan participation within two months of hire, (2) upon plan eligibility, make the military spouse eligible for any matching or nonelective contribution that they would have been eligible for otherwise at 2 years of service, and (3) make the military spouse 100 percent immediately vested in all employer contributions. The tax credit equals the sum of (1) $200 per military spouse, and (2) 100 percent of all employer contributions (up to $300) made on behalf of the military spouse, for a maximum tax credit of $500. This credit applies for 3 years with respect to each military spouse – and does not apply to highly compensated employees. An employer may rely on an employee's certification that such employee's spouse is a member of the uniformed services. Section 112 is effective for taxable years beginning after the date of enactment of this Act.

Section 113, Small immediate financial incentives for contributing to a plan. Under current law, employers may provide matching contributions as a long-term incentive for employees to contribute to a 401(k) plan. However, immediate financial incentives (like gift cards in small amounts) are prohibited even though individuals may be especially motivated by them to join their employers' retirement plans. Section 113 enables employers to offer de minimis financial incentives, not paid for with plan assets, such as low-dollar gift cards, to boost employee participation in workplace retirement plans by exempting de minimis financial incentives from section 401(k)(4)(A) and from the corresponding rule under section 403(b). Section 113 is effective for plan years beginning after the date of enactment of this Act.

Section 114, Deferral of tax for certain sales of employer stock to employee stock ownership plan sponsored by S corporation. Under section 1042 of the Internal Revenue Code ("Code"), an individual owner of stock in a non-publicly traded C corporation that sponsors an employee stock ownership plan ("ESOP") may elect to defer the recognition of gain from the sale of such stock to the ESOP if the seller reinvests the sales proceeds into qualified replacement property, such as stock or other securities issued by a U.S. operating corporation. After the sale, the ESOP must own at least 30 percent of the employer corporation's stock. Section 114 expands the gain deferral provisions of Code section 1042 with a 10 percent limit on the deferral to sales of employer stock to S corporation ESOPs. Section 114 is effective for sales made after December 31, 2027.

Section 115, Withdrawals for certain emergency expenses. Generally, an additional 10 percent tax applies to early distributions from tax-preferred retirement accounts, such as 401(k) plans and IRAs, unless an exception applies. Section 115 provides an exception for certain distributions used for emergency expenses, which are unforeseeable or immediate financial needs relating to personal or family emergency expenses. Only one distribution is permissible per year of up to $1,000, and a taxpayer has the option to repay the distribution within 3 years. No further emergency distributions are permissible during the 3 year repayment period unless repayment occurs. Section 115 is effective for distributions made after December 31, 2023.

Section 116, Allow additional nonelective contributions to SIMPLE plans. Current law requires employers with SIMPLE plans to make employer contributions to employees of either 2

percent of compensation or 3 percent of employee elective deferral contributions. Section 116 permits an employer to make additional contributions to each employee of the plan in a uniform manner, provided that the contribution may not exceed the lesser of up to 10 percent of compensation or $5,000 (indexed). Section 116 is effective for taxable years beginning after December 31, 2023.

Section 117, Contribution limit for SIMPLE plans. Under current law, the annual contribution limit for employee elective deferral contributions to a SIMPLE IRA plan is $14,000 (2022) and the catch-up contribution limit beginning at age 50 is $3,000. A SIMPLE IRA plan may only be sponsored by a small employer (100 or fewer employees), and the employer is required to either make matching contributions on the first 3 percent of compensation deferred or an employer contribution of 2 percent of compensation (regardless of whether the employee elects to make contributions). Section 117 increases the annual deferral limit and the catch-up contribution at age 50 by 10 percent, as compared to the limit that would otherwise apply in the first year this change is effective, in the case of an employer with no more than 25 employees. An employer with 26 to 100 employees would be permitted to provide higher deferral limits, but only if the employer either provides a 4 percent matching contribution or a 3 percent employer contribution. Section 117 makes similar changes to the contribution limits for SIMPLE 401(k) plans. Section 117 is effective for taxable years beginning after December 31, 2023. The Secretary of Treasury shall report to Congress on data related to SIMPLE IRAs by December 31, 2024, and annually thereafter.

Section 118, Tax treatment of certain nontrade or business SEP contributions. Section 118 permits employers of domestic employees (e.g., nannies) to provide retirement benefits for such employees under a Simplified Employee Pension ("SEP"). Section 118 is effective for taxable years beginning after date of enactment of this Act.

Section 119, Application of section 415 limit for certain employees of rural electric cooperatives. Under current law, section 415 generally limits the amount that may be paid by a pension plan in annual benefits to a participant to the lesser of $245,000 (2022) or 100 percent of the participant's average compensation. Section 119 eliminates the compensation-based limit for participants who are non-highly compensated employees and participate in a rural electric cooperative retirement plan. Section 119 is effective for limitation years ending after the date of enactment of this Act.

Section 120, Exemption for certain automatic portability transactions. Under current law, an employer is permitted to distribute a participant's account balance without participant consent if the balance is under $5,000 and the balance is immediately distributable (e.g., after a termination of employment). Current law also requires an employer to roll over this distribution into a default IRA if the account balance is at least $1,000 and the participant does not affirmatively elect otherwise. Section 120 permits a retirement plan service provider to provide employer plans with automatic portability services. Such services involve the automatic transfer of a participant's default IRA (established in connection with a distribution from a former employer's plan) into the participant's new employer's retirement plan, unless the participant

affirmatively elects otherwise. Section 120 is effective for transactions occurring on or after the date which is 12 months after the date of enactment of this Act.

Section 121, Starter 401(k) plans for employers with no retirement plan. Section 121 permits an employer that does not sponsor a retirement plan to offer a starter 401(k) plan (or safe harbor 403(b) plan). A starter 401(k) plan (or safe harbor 403(b) plan) would generally require that all employees be default enrolled in the plan at a 3 to 15 percent of compensation deferral rate. The limit on annual deferrals would be the same as the IRA contribution limit, which for 2022 is $6,000 with an additional $1,000 in catch-up contributions beginning at age 50. Section 121 is effective for plan years beginning after December 31, 2023.

Section 122, Assist States in locating owners of applicable savings bonds. To facilitate efforts to locate the owners of matured and unredeemed savings bonds, Section 122 requires the Treasury Secretary to share certain relevant information with a state that relates to an applicable savings bond registered to an owner with a last known or registered address in that state. The state is permitted to use that information to locate the registered owner in accordance with the state's standards for recovery of abandoned property. Section 122 further requires the Treasury Secretary to develop guidance as may be necessary to carry out the proper disclosure and protection of such information. The Treasury Secretary also is required to submit to the Senate Appropriations and Finance Committees and House Appropriations and Ways and Means Committees an annual report assessing its efforts to provide states with information on unclaimed savings bonds. Section 122 is effective on the date of enactment of this Act.

Section 123, Certain securities treated as publicly traded in case of employee stock ownership plans. Section 123 updates certain ESOP rules related to whether a security is a "publicly traded employer security" and "readily tradeable on an established securities market." Section 123 allows certain non-exchange traded securities to qualify as "publicly traded employer securities" so long as the security is subject to priced quotations by at least four dealers on a Securities and Exchange Commission-regulated interdealer quotation system, is not a penny stock and is not issued by a shell company, and has a public float of at least 10 percent of outstanding shares. For securities issued by domestic corporations, the issuer must publish annual audited financial statements. Securities issued by foreign corporations are subject to additional depository and reporting requirements. The updated definitions in Section 123 will allow highly regulated companies with liquid securities that are quoted on non-exchange markets to treat their stock as "public" for ESOP purposes, thus making it easier for these companies to offer ESOPs to their U.S. employees. Section 123 is effective for plan years beginning after December 31, 2027.

Section 124, Modification of age requirement for qualified ABLE programs. Current law allows states to create qualified ABLE programs, which are tax-advantaged savings programs for certain people with disabilities. Distributions from an ABLE account are tax-free if used for qualified disability expenses of the account's designated beneficiary. Section 124 increases the age by which blindness or disability must occur for an individual to be an eligible individual by reason of such blindness or disability for an ABLE program. Section 124 is effective for taxable years beginning after December 31, 2025.

Section 125, Improving coverage for part-time workers. The SECURE Act requires employers to allow long-term, part-time workers to participate in the employers' 401(k) plans. The SECURE Act provision provides that – except in the case of collectively bargained plans – employers maintaining a 401(k) plan must have a dual eligibility requirement under which an employee must complete either 1 year of service (with the 1,000-hour rule) or 3 consecutive years of service (where the employee completes at least 500 hours of service). Section 125 reduces the 3 year rule to 2 years, effective for plan years beginning after December 31, 2024. Section 125 also provides that pre-2021 service is disregarded for vesting purposes, just as such service is disregarded for eligibility purposes under current law, effective as if included in the SECURE Act to which the amendment relates. This provision also extends the long-term part-time coverage rules to 403(b) plans that are subject to ERISA.

Section 126, Special rules for certain distributions from long-term qualified tuition programs to Roth IRAs. Section 126 amends the Internal Revenue Code to allow for tax and penalty free rollovers from 529 accounts to Roth IRAs, under certain conditions. Beneficiaries of 529 college savings accounts would be permitted to rollover up to $35,000 over the course of their lifetime from any 529 account in their name to their Roth IRA. These rollovers are also subject to Roth IRA annual contribution limits, and the 529 account must have been open for more than 15 years.

Families and students have concerns about leftover funds being trapped in 529 accounts unless they take a non-qualified withdrawal and assume a penalty. This has led to hesitating, delaying, or declining to fund 529s to levels needed to pay for the rising costs of education. Section 126 eliminates this concern by providing families and students with the option to avoid the penalty, resulting in families putting more into their 529 account. Families who sacrifice and save in 529 accounts should not be punished with tax and penalty years later if the beneficiary has found an alternative way to pay for their education. They should be able to retain their savings and begin their retirement account on a positive note. Section 126 is effective with respect to distributions after December 31, 2023.

Section 127, Emergency savings accounts linked to individual account plans. Though individuals can save on their own, far too many fail to do so. According to a report by the Federal Reserve, almost half of Americans would struggle to cover an unexpected $400 expense. Many are forced to tap into their retirement savings. A recent study found that, in the past year, almost 60 percent of retirement account participants who lack emergency savings tapped into their long-term retirement savings, compared to only 9 percent of those who had at least a month of emergency savings on hand. Separating emergency savings from one's retirement savings account will provide participants a better understanding that one account is for short-term emergency needs and the other is for long-term retirement savings, thus empowering employees to handle unexpected financial shocks without jeopardizing their long-term financial security in retirement through emergency hardship withdrawals.

Section 127 provides employers the option to offer to their non-highly compensated employees pension-linked emergency savings accounts. Employers may automatically opt employees into these accounts at no more than 3 percent of their salary, and the portion of an account

attributable to the employee's contribution is capped at $2,500 (or lower as set by the employer). Once the cap is reached, the additional contributions can be directed to the employee's Roth defined contribution plan (if they have one) or stopped until the balance attributable to contributions falls below the cap. Contributions are made on a Roth-like basis and are treated as elective deferrals for purposes of retirement matching contributions with an annual matching cap set at the maximum account balance – i.e., $2,500 or lower as set by the plan sponsor. The first four withdrawals from the account each plan year may not be subject to any fees or charges solely on the basis of such withdrawals. At separation from service, employees may take their emergency savings accounts as cash or roll it into their Roth defined contribution plan (if they have one) or IRA.

Section 128, Enhancement of 403(b) plans. Under current law, 403(b) plan investments are generally limited to annuity contracts and publicly traded mutual funds. This limitation cuts off 403(b) plan participants – generally, employees of charities and public schools, colleges, and universities– from access to collective investment trusts, which are often used by 401(a) plans to expand investment options for plan participants at a lower overall cost. Section 128 would permit 403(b) custodial accounts to participate in group trusts with other tax-preferred savings plans and IRAs, and would be effective after date of enactment.

TITLE II – PRESERVATION OF INCOME

Section 201, Remove required minimum distribution barriers of life annuities. Section 201 eliminates certain barriers to the availability of life annuities in qualified plans and IRAs that arise under current law due to an actuarial test in the required minimum distribution regulations. The test is intended to limit tax deferral by precluding commercial annuities from providing payments that start out small and increase excessively over time. In operation, however, the test commonly prohibits many important guarantees that provide only modest benefit increases under life annuities. For example, guaranteed annual increases of only 1 or 2 percent, return of premium death benefits, and period certain guarantees for participating annuities are commonly prohibited by this test. Without these types of guarantees, many individuals are unwilling to elect a life annuity under a defined contribution plan or IRA. Section 201 is effective for calendar years ending after the date of enactment of this Act.

Section 202, Qualifying longevity annuity contracts. In 2014, the Treasury Department published final regulations on qualifying longevity annuity contracts ("QLACs"). QLACs are generally deferred annuities that begin payment at the end of an individual's life expectancy. Because payments start so late, QLACs are an inexpensive way for retirees to hedge the risk of outliving their savings in defined contribution plans and IRAs. The minimum distribution rules were an impediment to the growth of QLACs in defined contribution plans and IRAs because those rules generally require payments to commence at age 72, before QLACs begin payments. The 2014 regulations generally exempted QLACs from the minimum distribution rules until payments commence. However, due to a lack of statutory authority to provide a full exemption, the regulations imposed certain limits on the exemption that have prevented QLACs from achieving their intended purpose in providing longevity protection. Section 202 addresses these limitations by repealing the 25 percent limit w and allowing up to $200,000 (indexed) to be used

from an account balance to purchase a QLAC. Section 202 also facilitates the sales of QLACs with spousal survival rights – and clarifies that free-look periods are permitted up to 90 days with respect to contracts purchased or received in an exchange on or after July 2, 2014. Section 202 is effective for contracts purchased or received in an exchange on the date of enactment of this Act, and the Treasury Secretary must update the relevant regulations within 18 months of the date of enactment of this Act.

Section 203, Insurance-dedicated exchange-traded funds. Exchange-traded funds ("ETFs") are pooled investment vehicles that are traded on stock exchanges. They are similar to mutual funds, except the shares can be traded throughout the day on the stock market, rather than having to be held until after the market closes. ETFs are widely available through retirement plans, IRAs, and taxable investment accounts. However, outdated Treasury Department regulations have prevented ETFs from being widely available through individual variable annuities. Simply because the regulations were written before ETFs existed, ETFs cannot satisfy the regulatory requirements to be "insurance-dedicated." Section 203 directs the Treasury Department to update the regulations to reflect the ETF structure to provide that ownership of an ETF's shares by certain types of institutions that are necessary to the ETF's structure would not preclude look-through treatment for the ETF, as long as it otherwise satisfies the current-law requirements for look-through treatment. This essentially would facilitate the creation of a new type of ETF that is "insurance-dedicated." Section 203 is effective for segregated asset account investments made on or after 7 years after the date of enactment of this Act, and directs the Treasury Secretary to update the relevant regulations by that time.

Section 204, Eliminating a penalty on partial annuitization. If a tax-preferred retirement account also holds an annuity, current law requires that the account be bifurcated between the portion of the account holding the annuity and the rest of the account for purposes of applying the required minimum distribution rules. This treatment may result in higher minimum distributions than would have been required if the account did not hold an annuity. Section 204 permits the account owner to elect to aggregate distributions from both portions of the account for purposes of determining minimum distributions and is effective on the date of enactment of this Act. The Treasury Secretary is to update the relevant regulations accordingly.

TITLE III – SIMPLIFICATION AND CLARIFICATION OF RETIREMENT PLAN RULES

Section 301, Recovery of retirement plan overpayments. Sometimes retirees mistakenly receive more money than they are owed under their retirement plans. These mistakes cause problems when they occur over time, and plan fiduciaries later seek to recover the overpayments from unsuspecting retirees. When an overpayment has lasted for years, plans often compel retirees to repay the amount of the overpayment, plus interest, which can be substantial. Even small overpayment amounts can create a hardship for a retiree living on a fixed income. Section 301 allows retirement plan fiduciaries the latitude to decide not to recoup overpayments that were mistakenly made to retirees. If plan fiduciaries choose to recoup overpayments, limitations and protections apply to safeguard innocent retirees. This protects both the benefits of future retirees and the benefits of current retirees. Rollovers of the overpayments also remain valid.

Section 301 is effective on the date of enactment of this Act, and further outlines how plan fiduciaries may proceed with respect to determinations made prior to the date of enactment of this Act to seek or not to seek recovery of overpayments.

Section 302, Reduction in excise tax on certain accumulations in qualified retirement plans. Section 302 reduces the penalty for failure to take required minimum distributions from 50 to 25 percent. Further, if a failure to take a required minimum distribution from an IRA is corrected in a timely manner, as defined under this Act, the excise tax on the failure is further reduced from 25 percent to 10 percent. Section 302 is effective for taxable years beginning after the date of enactment of this Act.

Section 303, Retirement savings lost and found. Every year, thousands of people approach retirement but are unable to find and receive the benefits that they earned often because the company they worked for moved, changed its name, or merged with a different company. Similarly, every year there are employers around the country ready to pay benefits to retirees, but they are unable to find the retirees because the former employees changed their names or addresses. Section 303 creates a national online searchable lost and found database for Americans' retirement plans at the Department of Labor ("DOL"). The database will enable retirement savers, who might have lost track of their pension or 401(k) plan, to search for the contact information of their plan administrator. Section 303 directs the creation of the database no later than 2 years after the date of enactment of this Act.

Section 304, Updating dollar limit for mandatory distributions. Under current law, employers may transfer former employees' retirement accounts from a workplace retirement plan into an IRA if their balances are between $1,000 and $5,000. Section 307 increases the limit from $5,000 to $7,000, effective for distributions made after December 31, 2023.

Section 305, Expansion of Employee Plans Compliance Resolution System. Because of the ever growing complexity of retirement plan administration, Section 305 expands the Employee Plans Compliance Resolution System ("EPCRS") to (1) allow more types of errors to be corrected internally through self-correction, (2) apply to inadvertent IRA errors, and (3) exempt certain failures to make required minimum distributions from the otherwise applicable excise tax. For example, Section 305 allows for correction of many plan loan errors through self-correction, which are a frequent area of error and can be burdensome to correct a single loan error through the Internal Revenue Service. Section 305 is effective on the date of enactment of this Act. Any guidance or revision of guidance required by Section 305 shall be promulgated no later than 2 years after the date of enactment of this Act. Revenue Procedure 2021–30 (or any successor guidance) shall be updated to take into account the provisions of this section no later than 2 years after the date of enactment of this Act.

Section 306, Eliminate the "first day of the month" requirement for governmental section 457(b) plans. Under current law, participants in a governmental 457(b) plan must request changes in their deferral rate prior to the beginning of the month in which the deferral will be made. This rule does not exist for other defined contribution plans. Section 306 allows such elections to be made at any time prior to the date that the compensation being deferred is

available. Section 306 is effective for taxable years beginning after the date of enactment of this Act.

Section 307, One-time election for qualified charitable distribution to split-interest entity; increase in qualified charitable distribution limitation. Section 307 expands the IRA charitable distribution provision to allow for a one-time, $50,000 distribution to charities through charitable gift annuities, charitable remainder unitrusts, and charitable remainder annuity trusts, effective for distributions made in taxable years beginning after the date of enactment of this Act. Section 307 also indexes for inflation the annual IRA charitable distribution limit of $100,000**,** effective for distributions made in taxable years ending after the date of enactment of this Act.

Section 308, Distribution to firefighters. Under current law, if an employee terminates employment after age 55 and takes a distribution from a retirement plan, the 10 percent early distribution tax does not apply. However, there is a special rule for "qualified public safety employees" in governmental plans, under which age 50 is substituted for age 55 for purposes of this exception from the 10 percent tax. This exemption applies to public sector firefighters, but not private sector firefighters. Section 308 extends the age 50 rule to private sector firefighters, who merit the same treatment for distributions. Section 308 is effective for distributions made after the date of enactment of this Act.

Section 309, Exclusion of certain disability-related first responder treatment payments. Section 309 permits first responders to exclude service-connected disability pension payments from gross income after reaching retirement age. Section 309 is effective for amounts received in taxable years beginning after December 31, 2026.

Section 310, Application of top heavy rules to defined contribution plans covering excludable employees. Under current law, qualified retirement plans must pass the top-heavy test, in addition to other nondiscrimination tests. Plans that are deemed top-heavy are required to provide employees with a minimum of a 3 percent of pay nonelective contribution, which is a significant cost to small businesses. Other nondiscrimination tests that apply to 401(k) plans allow an employer to test otherwise excludable employees (e.g., those who are under age 21 and have less than 1 year of service) separately. This was intended to encourage plan sponsors to permit employees to defer earlier than the minimum age and service conditions permitted under the law because it reduces the situations where plans would fail the nondiscrimination tests if these employees were included when performing the test. However, this separate testing is not allowed for the top-heavy test. Small business retirement plans often do not cover excludable employees because, if the plan is or becomes top heavy, the employer may be required to contribute a top-heavy employer contribution for all employees who are eligible to participate in the plan, straining the budget for these small businesses. Section 310 allows an employer to perform the top-heavy test separately on the non-excludable and excludable employees. This removes the financial incentive to exclude employees from the 401(k) plan and increase retirement plan coverage to more workers. Section 310 is effective for plan years beginning after December 31, 2023.

Section 311, Repayment of qualified birth or adoption distribution limited to 3 years. The SECURE Act included a provision that allows individuals to receive distributions from their retirement plan in the case of birth or adoption without paying the 10 percent additional tax under Code section 72(t) (known as a qualified birth or adoption distribution, or "QBAD"). The distributions can be recontributed to a retirement plan at any time and are treated as rollovers. The problem with current law is the allowance of recontributions at any time. Code section 6511 prevents a refund from being provided to a taxpayer after the period of limitations for the return has closed, which is generally a 3 year period. Thus, there would not be a mechanism under the Code allowing someone who took a birth/adoption distribution to recontribute the distribution more than 3 years later and amend their return to receive a refund for the taxes that were paid in the year of the withdrawal. Section 311 amends the QBAD provision to restrict the recontribution period to 3 years. Section 311 is effective to distributions made after the date of the enactment of this Act and retroactively to the 3 year period beginning on the day after the date on which such distribution was received.

Section 312, Employer may rely on employee certifying that deemed hardship distribution conditions are met. Section 312 provides that, under certain circumstances, employees are permitted to self-certify that they have had an event that constitutes a hardship for purposes of taking a hardship withdrawal. This is a logical step in light of the success of the coronavirus-related distribution self-certification rules and the current hardship regulations that already permit employees to self-certify that they do not have other funds available to address a hardship. Section 312 is effective for plan years beginning after the date of enactment of this Act.

Section 313, Individual retirement plan statute of limitations for excise tax on excess contributions and certain accumulations. Under current law, the statute of limitations for excise taxes imposed on excess contributions, or required minimum distribution failures start running as of the date that a specific excise tax return (Form 5329) is filed for the violation. Individuals often are not aware of the requirement to file Form 5329, and this can lead to an indefinite period of limitations that can cause hardship for taxpayers due to the accumulation of interest and penalties (see Paschall v. C.I.R., 137 T.C. 8 (2011)). In order to provide finality for taxpayers in the administration of these excise taxes, Section 313 provides that a 3 year period of limitations begins when the taxpayer files an individual tax return (Form 1040) for the year of the violation, except in the case of excess contributions, in which case the period of limitations runs 6 years from the date Form 1040 is filed. There is a further exception from this 6 year rule for taxes that arise out of a bargain sale to the IRA. In general, these changes are intended to ensure that there is a reasonable period of limitations for violations of which taxpayers were not aware and thus did not file an excise tax return, while retaining existing law in fact scenarios that involve a bargain sale. Section 313 is effective on the date of enactment of this Act.

Section 314, Penalty-free withdrawal from retirement plans for individual case of domestic abuse. A domestic abuse survivor may need to access his or her money in their retirement account for various reasons, such as escaping an unsafe situation. Section 314 allows retirement plans to permit participants that self-certify that they experienced domestic abuse to withdraw a small amount of money (the lesser of $10,000, indexed for inflation, or 50 percent of the

participant's account). A distribution made under Section 314 is not subject to the 10 percent tax on early distributions. Additionally, a participant has the opportunity to repay the withdrawn money from the retirement plan over 3 years and will be refunded for income taxes on money that is repaid. Section 318 is effective for distributions made after December 31, 2023.

Section 315, Reform of family attribution rule. Under the Code, certain related businesses must be aggregated when performing the coverage and nondiscrimination tests. The aggregation rules are generally based on the degree of common ownership of the businesses. In determining the level of ownership in a business, the tax laws have certain attribution rules whereby an individual is deemed to own stock held by other individuals or entities. Section 315 updates two stock attribution rules. The first update addresses inequities where spouses with separate businesses reside in a community property state when compared to spouses who reside in separate property states. The second update modifies the attribution of stock between parents and minor children. Section 315 is effective for plan years beginning after December 31, 2023.

Section 316, Amendments to increase benefit accruals under plan for previous plan year allowed until employer tax return due date. The SECURE Act permits an employer to adopt a new retirement plan by the due date of the employer's tax return for the fiscal year in which the plan is effective. Current law, however, provides that plan amendments to an existing plan must generally be adopted by the last day of the plan year in which the amendment is effective. This precludes an employer from adding plan provisions that may be beneficial to participants. Section 316 amends these provisions to allow discretionary amendments that increase participants' benefits to be adopted by the due date of the employer's tax return. Section 316 is effective for plan years beginning after December 31, 2023.

Section 317, Retroactive first year elective deferrals for sole proprietors. Under the SECURE Act, an employer may establish a new 401(k) plan after the end of the taxable year, but before the employer's tax filing date and treat the plan as having been established on the last day of the taxable year. Such plans may be funded by employer contributions up to the employer's tax filing date. Section 317 allows these plans, when they are sponsored by sole proprietors or single-member LLCs, to receive employee contributions up to the date of the employee's tax return filing date for the initial year. Section 317 is effective for plan years beginning after the date of enactment of this Act.

Section 318, Performance benchmarks for asset allocation funds. The DOL's participant disclosure regulation requires that each designated investment alternative's historical performance be compared to an appropriate broad-based securities market index. However, the rule does not adequately address increasingly popular investments like target date funds that include a mix of asset classes. Section 318 directs the Labor Secretary to update the DOL's regulations so that an investment that uses a mix of asset classes can be benchmarked against a blend of broad-based securities market indices, provided (a) the index blend reasonably matches the fund's asset allocation over time, (b) the index blend is reset at least once a year, and (c) the underlying indices are appropriate for the investment's component asset classes and otherwise meet the rule's conditions for index benchmarks. This change in the disclosure rule allows better comparisons and aids participant decision-making. The DOL is to update its regulations no later

than two years after enactment of this Act. Section 318 also requires DOL to report to Congress on the effectiveness of its benchmarking requirements no later than 3 years after the applicability date of the regulations.

Section 319, Review and report to Congress relating to reporting and disclosure requirements. Section 319 directs the Treasury Department, DOL, and Pension Benefit Guaranty Corporation to review reporting and disclosure requirements for pension plans as soon as practicable after enactment of this Act. Section 319 further directs the agencies to make recommendations to Congress to consolidate, simplify, standardize, and improve such requirements no later than 3 years after the date of enactment of this Act.

Section 320, Eliminating unnecessary plan requirements related to unenrolled participants. Under current law, employees eligible to participate in a retirement plan are required to receive a broad array of notices that are intended to inform them of their various options and rights under the plan. In the case of eligible employees who have not elected to participate in the plan ("unenrolled participants"), these notices – such as notices regarding the different investment options available under the plan – are generally unnecessary, and can even have adverse effects on savings and coverage.

Section 320 no longer requires employers provide certain intermittent ERISA or Code notices to unenrolled participants who have not elected to participate in a workplace retirement plan. However, to further encourage participation of unenrolled participants, the plan is required to send (1) an annual reminder notice of the participant's eligibility to participate in the plan and any applicable election deadlines, and (2) any otherwise required document requested at any time by the participant. This rule applies only with respect to an unenrolled participant who received the summary plan description, in connection with initial eligibility under the plan, and any other notices related to eligibility under the plan required to be furnished. Section 320 is effective for plan years beginning after December 31, 2022.

Section 321, Review of pension risk transfer interpretive bulletin. Section 321 requires the DOL to review the current interpretive bulletin governing pension risk transfers to determine whether amendments are warranted and to report to Congress its finding, including an assessment of any risk to participant, no later than 1 year after enactment of this Act.

Section 322, Tax treatment of IRA involved in a prohibited transaction. When an individual engages in a prohibited transaction with respect to their IRA, the IRA is disqualified and treated as distributed to the individual, irrespective of the size of the prohibited transaction. Section 322 clarifies that if an individual has multiple IRAs, only the IRA with respect to which the prohibited transaction occurred will be disqualified. Section 322 is effective for taxable years beginning after the date of enactment of this Act.

Section 323, Clarification of substantially equal periodic payment rule. Current law imposes a 10 percent additional tax on early distributions from tax-preferred retirement accounts, but an exception applies to substantially equal periodic payments that are made over the account owner's life expectancy. Section 323 provides that the exception continues to apply in the case of a rollover of the account, an exchange of an annuity providing the payments, or an annuity

that satisfies the required minimum distribution rules. Section 323 is effective for transfers, rollovers, exchanges after December 31, 2023 and effective for annuity distributions on or after the date of enactment of this Act.

Section 324, Treasury guidance on rollovers. Section 324 requires the Treasury Secretary to simplify and standardize the rollover process by issuing sample forms for direct rollovers that may be used by both the incoming and outgoing retirement plan or IRA. Development and release of the sample forms must be completed no later than January 1, 2025.

Section 325, Roth plan distribution rules. Under current law, required minimum distributions are not required to begin prior to the death of the owner of a Roth IRA. However, pre-death distributions are required in the case of the owner of a Roth designated account in an employer retirement plan (e.g., 401(k) plan). Section 325 eliminates the pre-death distribution requirement for Roth accounts in employer plans, effective for taxable years beginning after December 31, 2023. Section 325 does not apply to distributions which are required with respect to years beginning before January 1, 2024, but are permitted to be paid on or after such date.

Section 326, Exception to penalty on early distributions from qualified plans for individuals with a terminal illness. Under current law, an additional 10 percent tax applies to early distributions from tax-preferred retirement accounts. Section 326 provides an exception to the tax in the case of a distribution to a terminally ill individual and would be effective for distributions made after the date of enactment of this Act.

Section 327, Surviving spouse election to be treated as employee. Section 327 allows a surviving spouse to elect to be treated as the deceased employee for purposes of the required minimum distribution rules. Section 327 is effective for calendar years beginning after December 31, 2023.

Section 328, Repeal of direct payment requirement on exclusion from gross income of distributions from governmental plans for health and long-term care insurance. Current law provides an exclusion from gross income ($3,000) for a distribution from a governmental retirement plan to a public safety officer to pay for their health insurance premiums. The exclusion requires that the plan directly pay the insurance premiums. Section 328 repeals the direct payment requirement and is effective for distributions made after the date of enactment of this Act.

Section 329, Modification of eligible age for exemption from early withdrawal penalty. The 10 percent additional tax on early distributions from tax preferred retirement savings plans does not apply to a distribution from a governmental plan to a public safety officer who is at least age 50. Section 329 extends the exception to public safety officers with at least 25 years of service with the employer sponsoring the plan and is effective for distributions made after the date of enactment of this Act.

Section 330, Exemption from early withdrawal penalty for certain State and local government corrections employees. Section 330 extends the public safety officer exception to

the 10 percent early distribution tax to corrections officers who are employees of state and local governments, effective for distributions made after the date of enactment of this Act.

Section 331, Special rules for use of retirement funds in connection with qualified federally declared disasters. Section 331 provides permanent rules relating to the use of retirement funds in the case of a federally declared disaster. The permanent rules allow up to $22,000 to be distributed from employer retirement plans or IRAs for affected individuals. Such distributions are not subject to the 10 percent additional tax and are taken into account as gross income over 3 years. Distributions can be repaid to a tax preferred retirement account. Additionally, amounts distributed prior to the disaster to purchase a home can be recontributed, and an employer is permitted to provide for a larger amount to be borrowed from a plan by affected individuals and for additional time for repayment of plan loans owed by affected individuals. Section 331 is effective for disasters occurring on or after January 26, 2021.

Section 332, Employers allowed to replace SIMPLE retirement accounts with safe harbor 401(k) plans during a year. Section 332 allows an employer to replace a SIMPLE IRA plan with a SIMPLE 401(k) plan or other 401(k) plan that requires mandatory employer contributions during a plan year, and is effective for plan years beginning after December 31, 2023.

Section 333, Elimination of additional tax on corrective distributions of excess contributions. Current law requires a distribution if too much is contributed to an IRA. The corrective distribution includes the excessive contribution and any earnings allocable to that contribution. Section 333 exempts the excess contribution and earnings allocable to the excess contribution from the 10 percent additional tax on early distributions, and is effective for any determination of, or affecting, liability for taxes, interest, or penalties which is made on or after the date of enactment of this Act, without regard to whether the act (or failure to act) upon which the determination is based occurred before such date of enactment.

Section 334, Long-term care contracts purchased with retirement plan distributions. Section 334 permits retirement plans to distribute up to $2,500 per year for the payment of premiums for certain specified long term care insurance contracts. Distributions from plans to pay such premiums are exempt from the additional 10 percent tax on early distributions. Only a policy that provides for high quality coverage is eligible for early distribution and waiver of the 10 percent tax. Section 334 is effective 3 years after date of enactment of this Act.

Section 335, Corrections of mortality tables. Section 335 generally requires that for purposes of the minimum funding rules, a pension plan is not required to assume beyond the plan's valuation date future mortality improvements at any age greater than 0.78 percent. The Treasury Secretary shall amend the relevant regulation on the matter within 18 months, though Section 335 shall be deemed to take effect on the date of enactment of this Act.

Section 336, Report to Congress on section 402(f) notices. Section 402(f) notices are given by employer retirement plans in the case of a distribution to a participant that is eligible for rollover to another tax preferred retirement account and describes distribution options and tax consequences. Section 336 requires the Government Accountability Office to issue a report to

Congress on the effectiveness of section 402(f) notices within 18 months after the date of enactment of this Act.

Section 337, Modification of required minimum distribution rules for special needs trust. The SECURE Act placed limits on the ability of beneficiaries of defined contribution retirement plans and IRAs to receive lifetime distributions after the account owner's death. Special rules apply in the case of certain beneficiaries, such as those with a disability. Section 337 clarifies that, in the case of a special needs trust established for a beneficiary with a disability, the trust may provide for a charitable organization as the remainder beneficiary. Section 337 is effective for calendar years beginning after the date of enactment of this Act.

Section 338, Requirement to provider paper statements in certain cases. Section 338 amends ERISA to generally provide that, with respect to defined contribution plans, unless a participant elects otherwise, the plan is required to provide a paper benefit statement at least once annually. The other three quarterly statements required under ERISA are not subject to this rule (i.e., they can be provided electronically). For defined benefit plans, unless a participant elects otherwise, the statement that must be provided once every 3 years under ERISA must be a paper statement. The Labor Secretary must update the relevant sections of their regulations and corresponding guidance by December 31, 2024, and the annual paper statement is effective for plan years beginning after December 31, 2025.

Section 339, Recognition of tribal government domestic relations orders. Section 339 adds Tribal courts to the list of courts authorized under federal law to issue qualified domestic relations orders. Section 339 is effective to domestic relations orders received by plan administrators after December 31, 2022, including any such order which is submitted for reconsideration after such date.

Section 340, Defined contribution plan fee disclosure improvements. Section 340 builds on recommendations recently made to the DOL by the Government Accountability Office, and requires the agency to review its fiduciary disclosure requirements in participant-directed individual account plan regulations. A report must be submitted to Congress within 3 years on such findings, including recommendations for legislative changes.

Section 341, Consolidation of defined contribution plan notices. Current law requires certain retirement plan notices to be provided to participants as individual notices. Section 341 directs the Treasury and DOL Secretaries within 2 years to amend regulations to permit a plan to consolidate certain required plan notices.

Section 342, Information needed for financial options risk mitigation act. Section 342 requires pension plan administrators to provide plan participants and retirees with critical information that would allow people considering what is best for their financial futures to compare between benefits offered under the plan and the lump sum, and would explain how the lump sum was calculated, the ramifications of accepting a lump sum, such as the loss of certain federal protections, details about the election period, where to follow up with questions, and other information. The DOL Secretary must issue regulations implementing this provision not

earlier 1 year after enactment. Such regulations must be applicable not earlier than the issuance of a final rule and not later than 1 year after issuance of a final rule.

Section 343, Defined benefit annual funding notices. Section 343 aims identify defined benefit pension plan funding issues more clearly on a plan's annual funding notice. Section 343 is effective for plan years beginning after December 31, 2023.

Section 344, Report on pooled employer plans. Section 344 requires the DOL Secretary to conduct a study on the new and growing pooled employer plan industry. A report on the findings of the study must be completed within 5 years, with subsequent reports completed every 5 years thereafter.

Section 345, Annual audits for group of plans. Under current law, generally, a Form 5500 for a defined contribution plan must contain an opinion from an independent qualified public accountant as to whether the plan's financial statements and schedules are fairly presented. However, no such opinion is required with respect to a plan covering fewer than 100 participants. Section 345 clarifies that plans filing under a Group of Plans need only to submit an audit opinion if they have 100 participants or more. In other words, DOL and Treasury would continue to receive full audit information on at least the number of plans as under current law. Section 345 is effective on the date of enactment of this Act.

Section 346, Worker Ownership, Readiness, and Knowledge (WORK) Act. Section 346 boosts employee ownership programs through the DOL, which may make grants to promote employee ownership through existing and new programs. Funds are authorized to be appropriated for the purpose of making grants for fiscal years 2025 to 2029.

Section 347, Report by the Secretary of Labor in the impact of inflation on retirement savings. Section 347 directs the DOL Secretary, in consultation with the Treasury Secretary, to study the impact of inflation on retirement savings and submit a report to Congress within 90 days on the findings of the study.

Section 348, Cash balance. Section 348 clarifies the application of the Code and ERISA's rules, prohibiting the backloading of benefit accruals, as they relate to hybrid plans that credit variable interest. Specifically, Section 348 clarifies that, for purposes of the applicable Code and ERISA rules, the interest crediting rate that is treated as in effect and as the projected interest crediting rate is a reasonable projection of such variable interest rate, subject to a maximum of 6 percent. This clarification will allow plan sponsors to provide larger pay credits for older longer service workers. Section 346 is effective for plan years beginning after the date of enactment of this Act.

Section 349, Termination of variable rate premium indexing. Section 349 removes the "applicable dollar amount" language in the rules for determining the premium fund target for purposes of unfunded vested benefits and replaces it with a flat $52 for each $1,000 of unfunded vested benefits. Section 349 is effective on the date of enactment of this Act.

Section 350, Safe harbor for corrections of employee elective deferral failures. Under current law, employers that adopt a retirement plan with automatic enrollment and automatic

escalation features could be subject to significant penalties if even honest mistakes are made. The Internal Revenue Service has issued guidance on the correction of failures relating to default enrollment of employees into retirement plans. This guidance includes a safe harbor, which expires December 31, 2023, that permits correction if notice is given to the affected employee, correct deferrals commence within certain specified time periods, and the employer provides the employee with any matching contributions that would have been made if the failure had not occurred. Employers are concerned about the lapse of the safe harbor at the end of 2023. Section 350 eases these concerns by allowing for a grace period to correct, without penalty, reasonable errors in administering these automatic enrollment and automatic escalation features. Errors must be corrected prior to 9 ½ months after the end of the plan year in which the mistakes were made. Section 350 is effective to errors after December 31, 2023.

TITLE IV – TECHNICAL AMENDMENTS

Section 401, Amendments relating to Setting Every Community Up for Retirement Enhancement Act of 2019. Section 401 includes three technical and five clerical amendments to the SECURE Act. These amendments are effective as if included in the section of the SECURE Act to which the amendment relates.

Title V – Administrative Provisions

Section 501, Provisions relating to plan amendments. Section 501 allows plan amendments made pursuant to this Act to be made on or before the last day of the first plan year beginning on or after January 1, 2025 (2027 in the case of governmental plans) as long as the plan operates in accordance with such amendments as of the effective date of a bill requirement or amendment. Section 501 also conforms the plan amendment dates under the SECURE Act, the CARES Act, and the Taxpayer Certainty and Disaster Tax Relief Act of 2020 to these new dates (instead of 2022 and 2025).

TITLE VI – REVENUE PROVISIONS

Section 601, SIMPLE and SEP Roth IRAs. Generally, all plans that allow pre-tax employee contributions are permitted to accept Roth contributions with one exception – SIMPLE IRAs. 401(k), 403(b), and governmental 457(b) plans are allowed to accept Roth employee contributions. Section 601 allows SIMPLE IRAs to accept Roth contributions too. In addition, aside from grandfathered salaried reduction simplified employee pension plans, under current law, simplified employee pension plans ("SEPs") can only accept employer money and not on a Roth basis. Section 601 allows employers to offer employees the ability to treat employee and employer SEP contributions as Roth (in whole or in part). The provisions in Section 601 are effective for taxable years beginning after December 31, 2022.

Section 602, Hardship withdrawal rules for 403(b) plans. Under current law**,** the distribution rules for 401(k) and 403(b) are different in certain ways that are historical anomalies for varied reasons. For example, for 401(k) plans, all amounts are available for a hardship distribution. For 403(b) plans, in some cases, only employee contributions (without earnings) are available for

hardship distributions. Section 602 conforms the 403(b) rules to the 401(k) rules, effective for plan years beginning after December 31, 2023.

Section 603, Elective deferrals generally limited to regular contribution limit. Under current law, catch-up contributions to a qualified retirement plan can be made on a pre-tax or Roth basis (if permitted by the plan sponsor). Section 603 provides all catch-up contributions to qualified retirement plans are subject to Roth tax treatment, effective for taxable years beginning after December 31, 2023. An exception is provided for employees with compensation of $145,000 or less (indexed).

Section 604, Optional treatment of employer matching or nonelective contributions as Roth contributions. Under current law, plan sponsors are not permitted to provide employer matching contributions in their 401(k), 403(b), and governmental 457(b) plans on a Roth basis. Matching contributions must be on a pre-tax basis only. Section 604 allows defined contribution plans to provide participants with the option of receiving matching contributions on a Roth basis, effective on the date of enactment of this Act.

Section 605, Charitable conservation easements. The tax deduction for charitable contributions of conservation easements has long played a crucial role in incentivizing the preservation of critical habitat, open spaces, and historically important areas and structures. However, since 2016 IRS has identified certain syndicated conservation easement transactions involving pass-through entities as "listed transactions" carrying a high potential for abusive tax avoidance. Section 605 disallows a charitable deduction for a qualified conservation contribution if the deduction claimed exceeds two and one half times the sum of each partner's relevant basis in the contributing partnership, unless the contribution meets a 3 year holding period test, substantially all of the contributing partnership is owned by members of a family, or the contribution relates to the preservation of a certified historic structure. In the case of a contribution for the preservation of a certified historic structure, a new reporting requirement applies. Section 605 also provides taxpayers the opportunity to correct certain defects in an easement deed (excluding easements involved in abusive transactions) and makes certain changes to statute of limitations and penalty provisions. Section 605 is generally effective for contributions made after the date of enactment of this Act.

Section 606, Enhancing retiree health benefits in pension plans. Under current law, an employer may use assets from an overfunded pension plan to pay retiree health and life insurance benefits. These rules sunset at the end of 2025. Section 606 extends the sunset date to the end of 2032 and would permit transfers to pay retiree health and life insurance benefits provided the transfer is no more than 1.75 percent of plan assets and the plan is at least 110 percent funded. Section 606 is effective for transfers made on or after the date of enactment of this Act.

TITLE VII – TAX COURT RETIREMENT PROVISIONS

Section 701, Provisions relating to judges of the Tax Court. Under current law, Tax Court judges are allowed to contribute to the Thrift Savings Plan ("TSP"), but Tax Court judges are prevented from receiving TSP automatic or matching contributions. Other federal judges, in contrast, may receive automatic and matching contributions if they are not covered by a judicial retirement plan. If those judges later elect to receive judicial retirement benefits, their retired pay is offset by an amount designed to recapture those TSP automatic and matching contributions. Section 701 provides parity between other federal judges and Tax Court judges by extending the same TSP matching contributions policy to Tax Court judges. Additionally, Tax Court judges may elect to participate in a plan providing benefits for the judge's surviving spouse and dependent children. Benefits currently vest only after the judge has performed at least 5 years of service and made contributions for at least 5 years of service. In contrast, other federal judges vest after 18 months of service, and the 18-month period is waived if the judge is assassinated. Section 701 provides parity between other federal judges and Tax Court judges by applying the 18-month vesting period and assassination waiver to Tax Court judges. Lastly, Section 701 provides that compensation earned by retired Tax Court judges (i.e., those who are disabled or meet the recall requirements) for teaching is not treated as outside earned income for purposes of limitations under the Ethics in Government Act of 1978, and makes technical amendments to coordinate Tax Court judicial retirement with the Federal Employees Retirement System ("FERS") and the retirement and survivors' annuities plans. Section 701 is effective on the date of enactment of this Act, unless otherwise stated.

Section 702, Provisions relating to special trial judges of the Tax Court. Special trial judges of the Tax Court are the only judicial officers who do not have an option to participate in a judicial retirement program. Section 702 establishes a retirement plan under which a special trial judge may elect to receive retired pay in a manner and under rules similar to the regular judges of the Court. The provision provides parity between special trial judges of the Tax Court and other federal judges. Eligible special trial judges are permitted to elect to receive retired pay 180 days after enactment of this Act, including special trial judges who retire on or after the date of enactment and before the date that is 180 days afterwards.

DIVISION U—JOSEPH MAXWELL CLELAND AND ROBERT JOSEPH DOLE MEMORIAL VETERANS BENEFITS AND HEALTH CARE IMPROVEMENT ACT OF 2022

TITLE I – HEALTH CARE MATTERS

Subtitle A – Access to Care

Sec. 101. Expansion of eligibility for hospital care, medical services, and nursing home care from the Department of Veterans Affairs to include veterans of World War II.

- Expands eligibility for Department of Veterans Affairs (VA) hospital care, medical services, and nursing home care to include veterans of World War II.

Based on S. 1040 and H.R. 5562, the WWII Veterans Hospital and Medical Eligibility Act

Sec. 102. Department of Veterans Affairs treatment and research of prostate cancer.

- Requires VA to establish a clinical pathway for all stages of prostate cancer, including:
    - A diagnosis pathway that includes early screening and screening recommendations for veterans at higher risk of prostate cancer
    - A treatment pathway that details how each office of VA will interact with veterans receiving treatment for prostate cancer
    - Treatment recommendations for all stages of prostate cancer that reflect the national standards
    - Other elements such as a protocol timeline and collaboration between VA facilities and community providers
    - In establishing this pathway, VA may collaborate with other government agencies such as the National Institutes of Health, Department of Defense (DOD), and others
    - VA is required to consult with and incorporate feedback from veterans who have received prostate cancer care at VA as well as national experts in cancer care and research
- Requires VA to submit to Congress a plan that provides for continuous VA research funding that supports prostate cancer research and positions the Department as a national resource for prostate cancer detection and research.

Based on S. 2720 and H.R. 4880, the Veterans Prostate Cancer Treatment and Research Act

Subtitle B – Health Care Providers

Sec. 111. Third party review of appointees in Veterans Health Administration who had a license terminated for cause and notice to individuals treated by those appointees if determined that an episode of care or services that they received was below the standard of care.

- Requires a nongovernmental, third-party organization to review the quality of care for any current VA provider who had their license terminated, for cause, by a state licensing board from care provided in a non-VA facility.
- Each review of a provider's care should be performed by an individual licensed to practice in the same specialty.

Based on S. 372 and H.R. 3059, the Ensuring Quality Care for our Veterans Act

Sec. 112. Compliance with requirements for examining qualifications and clinical abilities of health care professionals of Department of Veterans Affairs.

- Requires VA to conduct oversight of the credentialing of Veterans Health Administration (VHA) providers and continuous monitoring of provider certification, licensure, and registration related to provided care.
    - Mandates annual reports to HVAC and SVAC.
    - Based on sections of VHA Directive 1100.20.
- Requires VHA providers related to the prescribing, administering, dispensing, or conducting research related to controlled substances to maintain Drug Enforcement Administration registration.
- Requires VA to maintain regular reviews relating to the quality of care at each VA medical facility, and to alert VA of any concerns of failures by individuals or medical facilities.
    - Mandates five years of annual reports for this.
    - These reviews must be conducted by another Agency or NGO with specialty in these kinds of audits.
- Prohibits VA from entering into a settlement agreement relating to adverse action against a health care professional if the actions of the provider are to be concealed from their personnel files or records.
- Requires annual training for employees who oversee the documentation of credentials, review quality of care, oversee or implement disciplinary actions against providers found to have acted adversely to expected conduct.
- Mandates a report to SVAC and HVAC to update policies related to substantial failures to meet generally accepted standards of clinic practice.
    - Must be done in conjecture with:
        - State licensing boards
        - Centers for Medicare and Medicaid Services
        - National Practitioner Data Bank

Based on S. 2041 and H.R. 217, the Department of Veterans Affairs Provider Accountability Act

Subtitle C – Care From Non-Department of Veterans Affairs Providers

Chapter 1 – Wait Times for Care

Sec. 121. Calculation of wait time for purposes of eligibility under Veterans Community Care Program.

- Codifies VA's current regulation of how to measure wait times for community care eligibility. Wait times will be measured from the date the veteran requests the

appointment, unless a later date is agreed to by the veteran and their VA provider, to the first next available appointment date.

Sec. 122. Plan regarding informing veterans of expected wait times for appointments for care.

- Requires VA to develop a plan by October 1, 2023, to create a method for veterans to have access to expected community care wait times and expected VA wait times.
- This plan must be implemented within three years after being developed, and the Secretary must relay to Congress any needs VA would require for implementation – including IT systems, legislative authorities, and staffing.
- VA must update Congress on the implementation of this plan at least quarterly.

Chapter 2 – Improvement of Provision of Care

Sec. 125. Modifications to access standards for care furnished through Community Care Program of Department of Veterans Affairs.

- Requires VA to ensure community care providers can meet the Department access standards.
- Allows for waivers of requirement to meet access standards under specific circumstances.

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare Access to Personnel Who Served Act

Sec. 126. Strategic plan to ensure continuity of care in the case of the realignment of a medical facility of the Department.

- Requires VA to develop and routinely update a strategic plan to ensure continuity of care for veterans, through the use of in-house or community care, during a VA realignment.
- Strategic plan must be submitted to Congress no later than 180 days after enactment.

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare Access to Personnel Who Served Act

Chapter 3 – Community Care Self-Scheduling Pilot Program

Sec. 131. Definitions.

Sec. 132. Pilot program establishing community care appointment self-scheduling technology.

- Requires the creation of a pilot program, to include enhancing existing scheduling technology, to allow veterans to schedule their own community care appointments with community care providers. The program would be implemented in at least two VA selected Veterans Integrated Services Networks (VISNs). The pilot program is approved

for an 18 month duration, with conditions for extension if successful, and must begin within a year of bill enactment.

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare Access to Personnel Who Served Act

Sec. 133. Appointment self-scheduling capabilities.

- Outlines the requirements of the pilot program established in Section 132 to allow veterans to self-schedule, modify, and cancel community care appointments. The pilot program technology must have not fewer than two of the capabilities listed in the legislation to include:
    - The ability to view appointment availability in real time.
    - The option to filter based on eligibility, distance and other important factors a veteran may use to make the best decision for their health care.
    - The ability to integrate with VA's legacy VistA and Electronic Health Record Modernization programs.
- Requires the GAO to independently validate and verify that the pilot program contains the required capabilities as outlined in the legislation and separately for VA to certify to Congress whether the pilot program met the capability requirements outlined in this section.

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare Access to Personnel Who Served Act

Sec. 134. Report.

- Requires VA to report to Congress every 180 days after enactment and every 180 days thereafter through the end of the pilot program on a wide range of topics including program effectiveness, usage, quality, satisfaction, benefit to veterans, and expansion of the program.

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare Access to Personnel Who Served Act

Chapter 4 – Administration of Non-Department Care

Sec. 141. Credentialing verification requirements for providers of non-Department of Veterans Affairs health care services.

- Requires Third Party Administrators (TPAs) to conduct initial verification of provider history and license sanctions for all states and territories for a period of time including the period of time before a provider began providing non-Department health care services and dating back not less than 10 years.

- Requires TPAs to perform re-credentialing at least every three years, including verifying provider history.
- Requires TPAs to implement continuous monitoring of each provider through the National Practitioner Data Bank.

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare Access to Personnel Who Served Act

Sec. 142. Claims for payment from Department of Veterans Affairs for emergency treatment furnished to veterans.

- Provides a deadline of 180 days for the filing of claims for payment of veterans' non-service connected emergency treatment. Veterans may not be held liable for payment if a claim was submitted after 180 days due to administrative effort by either the individual or entity, or VA.
- For treatment of service-connected conditions – Removes veterans' financial liability for emergency care in the event individual or entity, or VA, make an error.

Based on S. 1875, the Veterans' Emergency Care Claims Parity Act

Sec. 143. Publication of clarifying information for non-Department of Veterans Affairs providers.

- Requires VA to make information and resources available regarding the authorization of emergency care from non-Department providers and a process map and relevant contact information for submitting claims for emergency non-VA care to assist veterans with filing timely claims for non-VA emergency care.

Based on S. 1875, the Veterans' Emergency Care Claims Parity Act

Sec. 144. Inapplicability of certain providers to provide non-Department of Veterans Affairs care.

- Extends MISSION Act authorities for the termination of Community Care provider eligibility for certain providers back to 2013. These providers include people previously punished by VA for medical errors or providers who have faced suspensions of their medical licenses.

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare Access to Personnel Who Served Act

Subtitle D – Improvement of Rural Health and Telehealth

Sec. 151. Establishment of strategic plan requirement for Office of Connected Care of Department of Veterans Affairs.

- Requires VA to develop a strategic plan to continue providing existing VA telehealth technologies and modalities and necessary improvements to ensure that veterans,

especially rural veterans, have access to virtual care options. The plan must be completed one year after enactment, updated at least every three years, and must contain:

  - A comprehensive list of all telehealth specialty areas currently offered by VA
  - An assessment of the effectiveness of all telehealth specialty areas currently offered by VA
  - An assessment of the satisfaction of veterans receiving telehealth care in all specialty areas currently offered by VA
  - An assessment of the percentage of virtual visits delivered by the Department through each modality including standard telephone telehealth, VA Video Connect, and the Accessing Telehealth through Local Area Stations program
  - An outline of all current partnerships maintained by VA to offer virtual care
  - An assessment of all barriers currently facing VA when it comes to delivery of telehealth services to highly rural veterans, as well as how VA plans to overcome them
  - A detailed plan on how VA is working with other Agencies, such as the Federal Communications Commission, to enhance connectivity in rural areas to reach all veterans
  - An outline on the feasibility and advisability of partnering with qualified health centers in rural areas to fill the gaps rural veterans face in receiving health care
  - An evaluation of the number of veterans who have previously received Community Care treatment

- A report on the plan must be submitted to Congress 180 days after completion, and every 180 days thereafter covering the efficacy of the plan, and the identification of areas which could be improved.

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare Access to Personnel Who Served Act

Sec. 152. Comptroller General report on transportation services by third parties for rural veterans.

- Requires a Government Accountability Office (GAO) report on the rural and highly rural transportation programs including services provided, effectiveness of the program, staffing assessment, and program assets.

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare Access to Personnel Who Served Act

Sec. 153. Comptroller General report on telehealth services of the Department of Veterans Affairs.

- Requires a GAO report on VA's telehealth and virtual care programs, challenges faced in delivering telehealth to rural veterans, how VA overcomes telehealth barriers for rural veterans and partnerships utilized, how much VA has measured effectiveness of telehealth care, veterans' satisfaction with VA telehealth, and the Department's use of telehealth in comparison to community care referrals.

Based on S. 1863 and H.R. 4624 the Guaranteeing Healthcare Access to Personnel Who Served Act.

Subtitle E – Care for Aging Veterans

Sec. 161. Strategy for long-term care for aging veterans.

- Requires VA to develop a strategy for the long-term care of veterans, identifying current and future needs based on demographic data and availability of services.
- This strategy would be required to take into account the needs of an increasingly diverse aging veteran population - including women veterans, veterans with traumatic brain injury, veterans with memory loss, and other groups with unique needs.
- VA would be required to report to Congress on the strategy within one year of enactment.

Based on S. 1965 and H.R. 6332, the Planning for Aging Veterans Act of 2021

Sec. 162. Improvement of State veterans homes.

- Requires VA to standardize the process for entering into sharing agreements between State veterans homes and medical centers.
- Requires VA to monitor contractors used to conduct inspections of State homes. Deficiencies in those inspections would be required to be reported to VA and for VA to publish results of those inspections on its website, as well as corrective actions planned.
- Requires VA to ensure catastrophically disabled veterans in State homes are not paying medication copayments, for parity with those who reside elsewhere.

Based on S. 1965 and H.R. 6332, the Planning for Aging Veterans Act of 2021

Sec. 163. Geriatric psychiatry pilot program at State veterans homes.

- Requires a two-year VA pilot program to provide geriatric psychiatry assistance to veterans living at State veterans homes.
- State homes with a high proportion of residents with unmet mental health needs, State homes located in mental health professional shortage areas, and State homes in rural or highly rural areas should be given consideration for this pilot program.

Based on S. 1965 and H.R. 6332, the Planning for Aging Veterans Act of 2021

Sec. 164. Support for aging veterans at risk of or experiencing homelessness.

- Directs VA to work with public housing authorities and local organizations to assist aging homeless veterans in accessing existing housing and supportive services.

Based on S. 1965 and H.R. 6332, the Planning for Aging Veterans Act of 2021

Sec. 165. Secretary of Veterans Affairs contract authority for payment of care for veterans in non-Department of Veterans Affairs medical foster homes.

- Allows the Department of Veterans Affairs (VA) to pay for veterans to receive care in medical foster homes – an existing VA long-term care program for veterans who are unable to live independently and prefer a family setting – for five years after the enactment of this bill.
- Permits VA to pay for no more than a daily average of 900 veterans receiving care in a medical foster home in a given year.
- Requires VA to create a system to monitor this program and requires the Government Accountability Office to submit reports to Congress regarding the implementation of this program.

Based on S. 2852 and H.R. 7158, the Long-Term Care Veterans Choice Act

Subtitle F – Foreign Medical Program

Sec. 171. Analysis of feasibility and advisability of expanding assistance and support to caregivers to include caregivers of veterans in the Republic of the Philippines.

- Requires VA to complete an analysis of the feasibility and advisability of expanding assistance and support to veterans' caregivers in the Philippines.

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare Access to Personnel Who Served Act

Sec. 172. Comptroller General report on Foreign Medical Program of Department of Veterans Affairs.

- Requires a GAO report on the administration and utilization of the Foreign Medical Program.

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare Access to Personnel Who Served Act

Subtitle G – Research Matters

Sec. 181. Inapplicability of Paperwork Reduction Act.

- Excludes VHA research activities from certain requirements under the Paperwork Reduction Act.

Based on H.R. 5721, the VA Infrastructure Powers Exceptional Research (VIPER) Act

Sec. 182. Research and Development.

- Fixes an issue with how VA researchers are paid for research conducted outside of their VA allocated research hours, provided the research conducted still meets the VA criteria for compensation.

Based on H.R. 5721, the VA Infrastructure Powers Exceptional Research (VIPER) Act

Sec. 183. Expansion of hiring authorities for certain classes of research occupations.

- Expands VA's authority to hire statisticians, economists, informaticists, and data scientists for research purposes. These positions are crucial for VA research.

Based on H.R. 5721, the VA Infrastructure Powers Exceptional Research (VIPER) Act

Sec. 184. Comptroller General study on dedicated research time for certain personnel of the Department of Veterans Affairs.

- Mandates a GAO study on the time and resources dedicated to VA-appointed clinician-scientists.
- Report due two years after enactment and should include information on clinician-scientists with dedicated time for research (a common promise when these employees are hired) and what the effects of current policies are on recruitment, retention, and research productivity.

Based on H.R. 5721, the VA Infrastructure Powers Exceptional Research (VIPER) Act

Subtitle H – Mental Health Care

Sec. 191. Analysis of the feasibility and advisability of the Department of Veterans Affairs providing evidence-based treatments for the diagnosis of treatment-resistant depression.

- Requires VA to complete an analysis of the feasibility and advisability of making repetitive transcranial magnetic stimulation (rTMS) available at all VA medical facilities and electro-convulsive therapy (ECT) available at one medical center located within each VISN for the treatment of veterans who have a diagnosis of treatment-resistant depression. This was a recommendation from the Creating Options for Veterans Expedited Recovery (COVER) Commission, which was authorized as part of Public Law 114-198, the Jason Simcakoski Memorial and Promise Act.
- Mandates a report to Congress 180 days after completion of the assessment above on:
    - Results of the assessment
    - Number of facilities that could reasonably employ these treatments
    - Number of facilities that currently provide these options for treatment-resistant depression

- The amount of veterans who have treatment-resistant depression in the two years leading up the assessment
- The number of those veterans who could benefit from these new therapies

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare access to Personnel who Served Act

Sec. 192. Modification of resource allocation system to include peer specialists.

- Modifies VA's Veterans Equitable Resource Allocation (VERA) system to ensure that resource allocations include peer specialists.

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare access to Personnel who Served Act

Sec. 193. Gap analysis of psychotherapeutic interventions at the Department of Veterans Affairs.

- Mandates a gap analysis throughout VHA on psychotherapeutic interventions outlined and recommended by the final report of the COVER Commission. Gap analysis must be completed 270 days after enactment and must describe interventions in the report currently offered through VHA, and what barriers may exist to further implementation of said psychotherapeutic interventions widely across VA.
- Mandates a plan to Congress no later than 180 days after the gap analysis to implement the aforementioned treatments across VA.

Based on S. 1863 and H.R. 4624, the Guaranteeing Healthcare access to Personnel who Served Act

Sec.193A. Prohibition on collection of copayments for first three mental health care outpatient visits of veterans.

- Prevents VA from imposing or collecting copayments for a veteran's first three mental health care outpatient visits each calendar year, beginning 180 days after bill enactment.
- This provision will terminate five years after the enactment of this bill.

Based on S. 4951 and H.R. 7589, REMOVE Copays Act

Subtitle I – Other Matters

Sec. 194. Requirement for ongoing independent assessments of health care delivery systems and management processes of the Department of Veterans Affairs.

- Mandates a comprehensive independent assessment of the hospital care, medical services, and management processes across VA every ten years until 2055. The first report would be due by the end of 2025 and would need to cover:

    - Current and projected unique needs of VA patients, as well as how VA plans to meet those needs
    - Accuracy of forecasting models for health care needs
    - Accuracy of financial forecasting to meet expected health care costs
    - All authorities and mechanisms VA uses to provide health care, including those used to enter into contracts with third party providers to provide care
    - Staffing models at facilities and workflow processes to meet patient needs
    - Staff recruitment and retention efforts
    - Breakdown of VA providers' time spent treating patients and meeting other employment requirements
    - IT strategies to meet current and projected needs at VA facilities
    - Breakdown of financial mechanisms to cover the cost of community care
    - Business analysis of medications, medical supplies, etc. used to provide VA care
    - Outline of VA agreements to purchase and distribute pharmaceuticals
    - Competency study of VA leadership, both Department-wide and at individual facilities with respect to culture, readiness, growth, engagement, and other leadership expectations
    - Training processes utilized by VA
    - Other areas the Secretary feels should be studied
- Outlines the requirements for the third party entity which must conduct this study.

Based on H.R. 4626, VA AIM Act

Sec. 195. Improved transparency of, access to, and usability of data provided by Department of Veterans Affairs.

- Requires a review of data that is publicly available on the Access to Care VA website and for VA to consult with veterans service organizations, veterans, and caregivers of veterans to gather insights about potential modifications that could help improve users' understanding and use of the data.

Based on S. 1319 and H.R. 2775, the VA Quality Health Care Accountability and Transparency Act

TITLE II – BENEFITS MATTERS

Subtitle A – Benefits Generally

Sec. 201. Improvements to process of the Department of Veterans Affairs for clothing allowance claims.

- Currently, veterans with a clothing allowance must re-apply each year. This section improves the grant process to allow for continuous payments without re-application if veterans meet VA regulations that determine whether the wear or tear on clothing from a prosthetic, orthopedic appliance, or medication is as likely as not subject to no change for the duration of use.

Based on S. 2513, the Brian Neuman Department of Veterans Affairs Clothing Allowance Improvement Act of 2021 and H.R. 4772, the Mark O'Brien VA Clothing Allowance Improvement Act

Sec. 202. Medical opinions for certain veterans with service-connected disabilities who die of COVID–19.

- Requires VA to determine whether a previously identified service connected injury or ailment served as a principal or contributing factor for veterans who died from COVID-19 when survivors file for Dependency and Indemnity Compensation (DIC).
- Requires VA to provide information about applying for DIC when a veteran dies from COVID.
- Mandates an annual report on the effects of this provision on DIC compensation claims
- Mandates studies on denied claims where COVID-19 played a role in the death of the veteran.

Based on provisions from S. 89 and H.R. 746, the Ensuring Survivor Benefits during COVID-19 Act of 2021

Sec. 203. Enhanced loan underwriting methods.

- Amends the VA Home Loan Guarantee Program's Energy Efficient Mortgage process to adjust the residual income of a veteran a lender considers based on the energy efficiency report of the property under consideration to incentivize the purchase of energy efficient homes.
- Establishes an advisory group of industry professionals and VSOs to oversee this.

Sec. 204. Department of Veterans Affairs loan fees.

- Extends certain VA Home loan funding fees through November 14, 2031, to pay for this package.

Subtitle B - Education

Sec. 211. Native VetSuccess at Tribal Colleges and Universities Pilot Program.

- Establishes three regional pilot programs at no less than two Tribal Colleges and Universities for a VetSuccess program, which provides a VA vocation rehabilitation counselor and a VA Vet Center Outreach Coordinator on campus.
- Requires a report on the effectiveness of the program, including information on number of participants at program locations, types of services provided, graduation rate of participants, employment rates post-graduation, feedback on how to improve the program, and a detailed proposal on the possibility of extending the program permanently and/or expanding the amount of program locations.

Based on H.R. 2878, the Native VetSuccess at Tribal Colleges and Universities Pilot Program Act

Sec. 212. Education for separating members of the Armed Forces regarding registered apprenticeships.

- Requires the Department of Labor (DOL) to provide information concerning apprenticeship programs during Transition Assistance Program classes.

Based on H.R. 147, the BRAVE Act

Sec. 213. Websites regarding apprenticeship programs.

- Requires DOL to include information regarding apprenticeships on their websites.

Based on H.R. 147, the BRAVE Act

Sec. 214. Transfer of entitlement to Post-9/11 Educational Assistance Program of Department of Veterans Affairs.

- Provides for transfer of Post-9/11 GI Bill when a veteran dies after approval of transfer but before transferring entire entitlement.

Based on H.R. 5151, the Col. James Floyd Turner IV USMC GI Bill Transfer Act

Sec. 215. Use of entitlement under Department of Veterans Affairs Survivors' and Dependents' Educational Assistance Program for secondary school education.

- Clarifies that Survivors' and Dependents' Educational Assistance (DEA) eligibility is only for post-high school education.

Sec. 216. Establishment of protections for a member of the Armed Forces who leaves a course of education, paid for with certain educational assistance, to perform certain service.

- Prevents colleges and universities from failing or taking punitive action against a student using educational benefits who is forced to withdraw from courses in order to meet National Guard or Reserve obligations.

- Requires educational institutions to refund all money, including housing and administrative costs, to a student forced to withdraw due to National Guard or Reserve obligations.

Based on H.R. 5603, the Protections for Student Veterans Act

Subtitle C – GI Bill National Emergency Extended Deadline Act

Sec. 231. Short title.

Sec. 232. Extension of time limitation for use of entitlement under Department of Veterans Affairs educational assistance programs by reason of school closures due to emergency and other situations.

- Allows for the extension of GI Bill delimiting dates during national emergencies.

Based on S.1936 and H.R.2167, the GI Bill National Emergency Extended Deadline Act

Sec. 233. Extension of period of eligibility by reason of school closures due to emergency and other situations under Department of Veterans Affairs training and rehabilitation program for veterans with service-connected disabilities.

- Extends period of eligibility for Veteran Readiness and Employment (VR&E) during emergencies.

Based on S.1936 and H.R.2167, the GI Bill National Emergency Extended Deadline Act

Sec. 234. Period for eligibility under Survivors' And Dependents' Educational Assistance Program of Department of Veterans Affairs.

- Removes age restrictions for survivors using the VA DEA program after August 2023.

Based on S.1936 and H.R.2167, the GI Bill National Emergency Extended Deadline Act

Subtitle D – Rural Veterans Travel Enhancement

Sec. 241. Comptroller General of the United States report on fraud, waste, and abuse of the Department of Veterans Affairs beneficiary travel program.

- Directs GAO to conduct a study on waste, fraud, and abuse of the VA Beneficiary Travel program. This review has been long overdue and will be especially helpful in assessing the effectiveness of the new Beneficiary Travel Self-Service System in reducing fraud and errors.

Based on S. 2627 and H.R. 4961, the Rural Veterans Travel Enhancement Act of 2021

Sec. 242. Comptroller General study and report on effectiveness of Department of Veterans Affairs beneficiary travel program mileage reimbursement and deductible amounts.

- Directs GAO to conduct a study and issue a report on the effectiveness of the Department of Veterans Affairs' travel program mileage reimbursement and deductible amounts. This

report would focus on whether the current reimbursement rate is accurate and effective for mitigating the travel costs of veterans using the program to travel to and from VA facilities for medical appointments.

Based on S. 2627 and H.R. 4961, the Rural Veterans Travel Enhancement Act of 2021

Sec. 243. Department of Veterans Affairs transportation pilot program for low income veterans.

- Creates a five-year, five-site pilot program whereby the VA Beneficiary Travel program will provide mileage reimbursement in advance of confirmed medical appointments for low-income veterans. This program is intended to provide support to veterans for whom the cost of gas to and from health care appointments can mean forgoing necessary medical care.

Based on S. 2627 and H.R. 4961, the Rural Veterans Travel Enhancement Act of 2021

Sec. 244. Pilot program for travel cost reimbursement for accessing readjustment counseling services.

- Creates a five-year, five-site pilot program for providing veterans with financial support for transportation to and from Vet Center appointments. Previous programs were focused only on veterans eligible for the Veterans Health Administration Beneficiary Travel program, which has very different eligibility requirements and operates in an entirely different administration within VA.

Based on S. 2627 and H.R. 4961, the Rural Veterans Travel Enhancement Act of 2021

Subtitle E – VA Beneficiary Debt Collection Improvement Act

Sec. 251. Short title.

Sec. 252. Prohibition of debt arising from overpayment due to delay in processing by the Department of Veterans Affairs.

- Prohibits VA from establishing a debt due to an overpayment if that overpayment was a result of a processing delay by VA.
- Requires that notices of debts include detailed explanations regarding rights to dispute the overpayment and ability to request a waiver.
- Delays the Department's ability to act on overpayments until 90 days after the date of the Secretary's notice as established.
- Mandates an annual report on improvements to communication of debts and payment options for people who receive overpayments.

Based on H.R. 2935, the VA Beneficiary Debt Collection Improvement Act

Sec. 253. Prohibition on Department of Veterans Affairs interest and administrative cost charges for debts relating to certain benefits programs.

- Changes the incursion of interest for certain debts, including overpayments, loans, pensions, and education assistance. Effective to debts incurred after enactment.

Based on H.R. 2935, the VA Beneficiary Debt Collection Improvement Act

Sec. 254. Extension of window to request relief from recovery of debt arising under laws administered by the Secretary of Veterans Affairs.

- Extends the window to request relief from attempts to recover a debt by VA from 180 days to one year.
- This would go into effect two years after enactment.

Based on H.R. 2935, the VA Beneficiary Debt Collection Improvement Act

Sec. 255. Reforms relating to recovery by Department of Veterans Affairs of amounts owed by individuals to the United States.

- Prohibits VA from deducting existing benefits from veterans indebted to VA due to overpayments while the debt is being disputed.
- Requires VA to update their website with timely information on disputing a debt as well as how to access resources to dispute a debt.
- Prohibits VA from attempting to collect a debt when the cost of recovery would be greater than the amount owed.

Based on H.R. 2935, the VA Beneficiary Debt Collection Improvement Act

TITLE III – HOMELESSNESS MATTERS

Sec. 301. Adjustments of grants awarded by the Secretary of Veterans Affairs for comprehensive service programs to serve homeless veterans.

- Removes the matching grants requirement for VA capital grants for at least five years following enactment of this Act, at which point the Secretary will have the option to require matching funds up to 30% of the cost of a project.
- Removes real property or equipment disposition requirements for past, present, and future grantees.
- These grants are essential for transitional housing facilities to make necessary infrastructure changes to their facilities to improve health and safety of veterans by converting from congregate to individual housing models.

Based on S. 2172, the Building Solutions for Veterans Experiencing Homelessness Act of 2021

Sec. 302. Modifications to program to improve retention of housing by formerly homeless veterans and veterans at risk of becoming homeless.

- Expands the Grant and Per Diem case managers program to include assisting veterans with accessing resources available to them provided by Federal, State, local, and Tribal governments.
- Allows for Grant and Per Diem case managers in high-demand areas, who are undergoing training to meet requirements for their role, to provide these case management services under the supervision of an individual who does meet those requirements.

Based on S. 2172, the Building Solutions for Veterans Experiencing Homelessness Act of 2021

Sec. 303. Modifications to homeless veterans reintegration programs.

- Makes the Homeless Veterans Reintegration Program (HVRP) offered through the Department of Labor permanent. This program helps connect homeless veterans connect with meaningful long term employment.
- Increases minimum authorized appropriations to $60,000,000 annually.
- Expands technical assistance and support to the whole grant and contract process, including during the application period when it is not currently available.
- Directs the Secretary of Labor to emphasize outreach and technical assistance in states that do not currently have any HVRP programs.
- Adds an annual report to Congress on the services provided through grantees and demographic data on veterans served and expands the biennial report to Congress to include further insight into the grantee applicant evaluation process, with a focus on applicants from states without existing grantees.

Based on S. 2172, the Building Solutions for Veterans Experiencing Homelessness Act of 2021 and S. 3094, the Reaching Every Homeless Veteran Act of 2021

Sec. 304. Expansion and extension of Department of Veterans Affairs housing assistance for homeless veterans.

- Reauthorizes and amends a VA program allowing the Secretary to sell, lease, rent, or donate a home repossessed due to VA Home Loan default to an entity providing services to at-risk or homeless veterans for the purpose of providing shelter or permanent housing for homeless veterans and their families.

Based on H.R. 2878, the Native VetSuccess at Tribal Colleges and Universities Pilot Program Act, originally introduced in H.R. 2419, the Affordable Housing for Homeless Veterans Act of 2021

Sec. 305. Training and technical assistance provided by Secretary of Veterans Affairs to certain entities.

- Requires VA to provide training and technical assistance, primarily for the purpose of sharing best practices, to entities which provide services to veterans at risk of, experiencing, or transitioning out of homelessness.
- Removes caps on funding for VA Homeless Program Office to provide technical support and training to participants in the Supportive Services for Veterans Families Program and Grant Per Diem recipients.

Based on S. 2172, the Building Solutions for Veterans Experiencing Homelessness Act of 2021 and S. 612, the Improving Housing Outcomes for Veterans Act

Sec. 306. Modification of eligibility requirements for entities collaborating with the Secretary of Veterans Affairs to provide case management services to homeless veterans in the Department of Housing and Urban Development-Department of Veterans Affairs supported housing program.

- Requires Department of Housing and Urban Development-Department of Veterans Affairs (HUD-VASH) case management contracting recipients to have experience providing those services.

Based on S. 2172, the Building Solutions for Veterans Experiencing Homelessness Act of 2021

Sec. 307. Department of Veterans Affairs sharing of information relating to coordinated entry processes for housing and services operated under Department of Housing and Urban Development Continuum of Care Program.

- Requires VA to share information with VA staff regarding best practices for collaboration between VA, homelessness service providers, and other local partners, including entities associated with HUD.

Based on S. 612, the Improving Housing Outcomes for Veterans Act of 2021

Sec. 308. Department of Veterans Affairs communication with employees responsible for homelessness assistance programs.

- Requires VA Under Secretary for Health to communicate the methods for performance measurement and how to obtain and provide feedback on performance measures to all employees working on issues related to homelessness assistance.

Based on S. 612, the Improving Housing Outcomes for Veterans Act of 2021

Sec. 309. System for sharing and reporting data.

- Requires VA and HUD to work together to develop a system of information sharing between Homeless Management Information System (HMIS) of HUD and the Homeless Operations Management and Evaluation System of VA within three years of enactment.

Based on S. 612, the Improving Housing Outcomes for Veterans Act of 2021

Sec. 310. Pilot program on grants for health care for homeless veterans.

- Requires VA to establish a five-year, five-site pilot program through which organizations providing transitional housing to veterans can apply for grants to fund hiring of on-site medical professionals and their supplies. Program must be distributed equitably across geographic regions, and must prioritize rural, tribal, and elderly veteran communities.

Based on provisions from S. 2172, the Building Solutions for Veterans Experiencing Homelessness Act of 2021

Sec. 311. Pilot program on award of grants for substance use disorder recovery for homeless veterans.

- Requires VA to establish a five-year, five-site pilot program providing grants to substance use disorder recovery programs in the community for those programs to provide their services to veterans who are homeless, were previously homeless and are transitioning to permanent housing, or are at risk of becoming homeless.

Based on S. 2172, the Building Solutions for Veterans Experiencing Homelessness Act of 2021

Sec. 312. Report by Comptroller General of the United States on affordable housing for veterans.

- Mandates a GAO study on the availability of affordable housing for veterans and the impact this availability has on veterans transitioning out of temporary housing provided by VA.

Based on S. 2172, the Building Solutions for Veterans Experiencing Homelessness Act of 2021

Sec. 313. Study on financial and credit counseling.

- Directs VA to study the efficacy and barriers to credit and financial counseling for homeless and unstably housed veterans, and to provide recommendations for improvements to these services.
- The Secretary is authorized to enter into a contract with an outside organization to conduct the study.
- The Secretary is required to submit an interim and final report to Congress on the study findings.

Based on H.R. 1257, the Homeless Veterans CREDIT Act.

TITLE IV – OTHER MATTERS

Sec. 401. Department of Veterans Affairs supply chain resiliency.

- Requires VA to submit a report to SVAC and HVAC no later than 90 days from enactment on the types of items the Secretary considers critical to the ongoing COVID-19 response and future pandemics.

- Requires VA and DOD to enter into an agreement no later than one year from enactment for the VA to participate in the Warstopper program currently run by the Defense Logistics Agency.
- Requires VA to submit a report no later than 450 days after enactment to SVAC and HVAC on the implementation of the plan for VA to join the Warstopper program.

Based on S. 887 and H.R. 2082, the VA Supply Chain Resiliency Act

Sec. 402. Improvements to equal employment opportunity functions of Department of Veterans Affairs.

- Clarifies the role of VA's Equal Employment Opportunity Director and VA facility Equal Employment Opportunity staff, and requires managers to report instances of harassment to Office of Resolution Management.
- Mandates additional annual training for all VA staff on sexual harassment and employment discrimination. Must begin within 180 days of enactment.
- Mandates reports to Congress every 180 days on progress related to sexual harassment and employment discrimination reporting requirements.

Based on S. 1243 and H.R. 2704, the Improving VA Accountability to Prevent Sexual Harassment and Discrimination Act of 2021

Sec. 403. Department of Veterans Affairs Information Technology Reform Act of 2022.

- This section, as well as Section 404, is intended to improve VA's project management, planning, and prioritization functions over its information technology programs and to more regularly report to Congress so as to increase accountability and improve VA IT performance.
- Requires VA to report to Congress before proceeding on major IT projects including those whose life cycle costs are projected at more than $1 billion or $200 million annually. Reports must include the project's estimated acquisition, implementation, and life cycle costs; implementation schedule and milestones; and key business, functional, and performance objectives.
- Requires VA to report to Congress on changes or variances to these projects' baseline plans when those changes meet the thresholds outlined in the section (i.e. if the project misses or changes significant cost, schedule, and IT functionality targets).
- Requires VA to ensure major IT projects are managed by interdisciplinary teams with relevant credentials and certifications.
- Brings oversight of VA Financial Services Center's IT employees/contractors, operations, security, and related functions under the authority of VA's Chief Information Officer.

- Requires VA to submit to Congress copies of annual reports it produces on VA's IT portfolio for the Office of Management and Budget (OMB).
- Requires VA's annual budget submission to include a list of active VA IT projects, a prioritized list of unfunded projects, and a projection of VA IT funding needs over the next three years.

Based on S. 731 and H.R. 2250, the Department of Veterans Affairs Information Technology Reform Act of 2021

Sec. 404. Report on information technology dashboard information.

- Requires VA to report to Congress on the ratings, rankings, and risk categorization of VA IT projects that VA uses to report to OMB under existing law.

Based on S. 731 and H.R. 2250, the Department of Veterans Affairs Information Technology Reform Act of 2021

Sec. 405. Improvements to transparency of law enforcement operations of Department of Veterans Affairs.

- Requires VA to establish policies and procedures related to the accountability and staffing of its police force.
- Improves reporting requirements for facility police staff, including pay grades, information on arrests, citations, and use of force incidents. Mandates annual reports to Congress on these matters.
- Requires VA police officers to wear body cameras that record and store audio and video. Additionally, the VA's guidance on the use of body cameras must be made publicly available.

Based on H.R. 2429, the VA Police Improvement and Accountability Act

Sec. 406. Plan for reduction of backlog of Freedom of Information Act requests.

- Requires VA to establish and implement a plan for reducing its backlog of requests under the Freedom of Information Act (FOIA) including through technology and improved procedures.
- Requires VA to request that the Office of Government Information Services of the National Archives and Records Administration conduct an assessment of VA's compliance with FOIA.
- Mandates, for five years, annual reports from VA on its FOIA compliance improvement efforts and make such reports available on its website.

Based on H.R. 2627 and S. 2163, the VA FOIA Reform Act of 2021

Sec. 407. Medal of Honor special pension technical correction.

- Corrects the amount of pension compensation provided to Medal of Honor recipients codified by the Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020.

Sec. 408. Imposition of cap on employees of the Department of Veterans Affairs who provide equal opportunity employment counseling.

- Places a cap on the number of equal opportunity counselors VA can hire at 76 full-time equivalent (FTE) for the first three years following passage of this bill, and 81 FTE after this initial three-year period.
- Requires VA to report to Congress if the number of FTE drops below necessary levels to meet legal obligations for handling equal opportunity employment counselors.
- Mandates a report due three years after enactment on informal cases handled by equal opportunity counselors at VA.
- Mandates an annual report, to be shared on a public-facing website, on employment discrimination complaints by VA employees.

Requires a GAO report assessing the ratio of VA employees whose duties include equal employment opportunity counseling functions relative to the number of FTE employees in the Department.

DIVISION V—STRONG VETERANS ACT OF 2022

TITLE I – TRAINING TO SUPPORT VETERANS' MENTAL HEALTH

Sec. 101. Mental health and suicide prevention outreach to minority veterans and American Indian and Alaska Native veterans.

- While Native Americans serve in the US military in disproportionately high rates, Native American veterans die by suicide at disproportionately high rates, as well.
- This bill directs VA to ensure that every VA medical center has at least one minority veteran coordinator, trained by VA in consultation with tribes and tribal programs in culturally appropriate mental health promotion and suicide prevention approaches.
- The minority veteran coordinators must work with facility suicide prevention coordinators to document and implement mental health outreach and services to tribes in their catchment areas.

Based on S. 5181 and H.R. 912, the American Indian and Alaska Native Veterans Mental Health Act

Sec. 102. Expansion of Vet Center workforce.

- This section increases Vet Center capacity by mandating the hiring of 50 additional full-time equivalent employees for Vet Centers.

Based on S. 3293, the Post-9/11 Veterans' Mental Health Care Improvement Act

Sec. 103. Expansion of mental health training for Department of Veterans Affairs.

- Within three years, this section directs VA to add an additional 250 paid trainee slots in covered mental health disciplines to the VA workforce.
- The term "covered mental health disciplines" refers to psychiatry, psychology, advanced practice nursing (with a focus on mental health or substance use disorder), social work, licensed professional mental health counseling, and marriage and family therapy.

Based on S. 3293, the Post-9/11 Veterans' Mental Health Care Improvement Act

Sec. 104. Expansion of scholarships and loan repayment programs for mental health providers.

- This section directs VA to include not fewer than an additional (as compared to academic year 2021) 50 awards per academic year under the Department of Veterans Affairs Health Professional Scholarship Program under subchapter II of chapter 76 of title 38, United States Code, for applicants otherwise eligible for such program who are pursuing degrees or training in mental health disciplines, including advanced practice nursing (with a focus on mental health or substance use disorder), psychology, and social work.

Based on S. 3293, the Post-9/11 Veterans' Mental Health Care Improvement Act

TITLE II – VETERANS CRISIS LINE

Sec. 201. Veterans Crisis Line.

Subtitle A—Veterans Crisis Line Training and Quality Management

Sec. 211. Staff training.

Sec. 212. Quality review and management.

Sec. 213. Guidance for high-risk callers.

Sec. 214. Oversight of training of social service assistants and clarification of job responsibilities.

Subtitle B—Pilot Programs and Research on Veterans Crisis Line

Sec. 221. Pilot programs.

Sec. 222. Authorization of appropriations for research on effectiveness and opportunities for improvement of Veterans Crisis Line.

Subtitle C—Transition of Crisis Line Number

Sec. 231. Feedback on transition of crisis line number.

Title II directs a series of actions to improve the Veterans Crisis Line training and quality management, evaluate its effectiveness, and ensure enough resources are available as the new 3-digit crisis line number goes into effect in July, 2022.

Based on S. 2283 and H.R. 5073, the REACH for Veterans Act

TITLE III – OUTREACH TO VETERANS

Sec. 301. Designation of Buddy Check Week by Secretary of Veterans Affairs.

- This directs the Secretary of VA to designate one week each year to organize outreach events and educate veterans on how to conduct peer wellness checks.

Based on S. 544, A bill to direct the Secretary of Veterans Affairs to designate one week each year as "Buddy Check Week" for the purpose of outreach and education concerning peer wellness checks for veterans, and for other purposes.

Sec. 302. Improvements to Veterans Justice Outreach Program.

- This provision requires VA to improve its outreach to justice-involved veterans, Veterans Service Organizations, and stakeholders in the criminal justice community (including law enforcement, court officials, and jail administrators), to improve awareness of VA's Veterans Justice Outreach (VJO) program.

- It also requires VA to increase the number of VJO specialists serving justice-involved veterans in rural, remote, or underserved areas. In addition, VA is directed to carry out mandatory annual training for VJO specialists and establish performance goals, measures, and implementation timelines for the VJO program and its outreach specialists.

Based on S. 3323 and H.R. 5529, the Veterans Justice Outreach Improvement Act

Sec. 303. Department of Veterans Affairs Governors Challenge Program.

- VA's Governors' Challenge program is an existing, collaborative effort with the Substance Abuse and Mental Health Services Administration (SAMHSA) to help states develop veteran suicide prevention proposals.

- This bill gives VA two new authorities within its existing Governors' Challenge veteran suicide prevention program: 1) it directs VA to treat tribes equal to states for the purpose of inclusion in the program; and 2) it allows VA to provide not only technical assistance to states and tribes, but also grants for actual implementation of state and tribal veteran suicide prevention proposals.

Based on H.R. 5317, the VA Governors Challenge Expansion

TITLE IV – MENTAL HEALTH CARE DELIVERY

Sec. 401. Expansion of peer specialist support program of Department of Veterans Affairs.

- Peer specialists at VA are veterans in recovery from their own challenges with mental illness and substance use, trained to help other veterans successfully engage in treatment. They have been both popular with veterans and effective.
- This bill gradually expands the number of VA peer specialists in all VA medical centers.

Based on S. 2386 and H.R. 4575, the Veteran Peer Specialist Act

Sec. 402. Expansion of Vet Center services.

- This section would make certain student veterans eligible for using Vet Centers even if they would not meet Vet Center eligibility criteria were they not currently students (for example, through lack of combat deployments).
- Transitions – from military to veteran status, and from non-student to student – are times of increased stress and suicide risk, and it is crucial to support increased access to the mental health and other services and benefits during this time.

Based on H.R. 4233, the Student Veterans Counseling Centers Eligibility Act

Sec. 403. Eligibility for mental health services.

- This section allows Vet Centers to provide readjustment counseling and related mental health services to family members of servicemembers or veterans who died by suicide.
- The definition of "family member" includes individuals who are the parent, spouse, child, step-family member, or extended family member of a veteran or servicemember; and someone who lives with the veteran or servicemember but is not a family member.

Based on S. 2817 and H.R. 5029, the Expanding the Families of Veterans Access to Mental Health Services Act

Sec. 404. Mental health consultations.

- This section amends the U.S. Code such that not later than thirty days after the date on which a veteran submits to the VA Secretary a claim for compensation under this chapter for service-connected disability relating to a mental health diagnosis, the Secretary shall offer the veteran a mental health consultation to assess the mental health needs of and care options for the veteran.

Based on S. 3293, the Post-9/11 Veterans' Mental Health Care Improvement Act

TITLE V – RESEARCH

Sec. 501. Veterans integration to academic leadership program of the Department of Veterans Affairs.

- This provision requires VA to submit to Congress within one year of enactment a report on the Veterans Integration to Academic Leadership (VITAL) program. Specifically, VA must assess the number of VA medical centers, institutions of higher learning, non-college degree programs, and student veterans supported by the program.
- In addition, the report must evaluate relevant trends since the program began, including the levels of staff and resources allocated to the program and the outcomes and effectiveness of the program.
- In addition, VA's report must examine barriers to expanding the program and how the Department plans to address these barriers.
- Finally, VA's report must assess whether the program should be expanded outside of VHA's Office of Mental Health and Suicide Prevention to support student veterans with needs unrelated to mental health or suicide.

Based on S. 3368 and H.R. 5516, the Veterans Integration to Academic Leadership (VITAL) Assessment Act

Sec. 502. Improvement of sleep disorder care furnished by Department of Veterans Affairs.

- This section directs the Secretary of VA to improve the assessment and treatment of veterans with sleep disorders, including by conducting in home sleep studies for veterans, following an analysis of the ability of VA to treat sleep disorders among veterans, including—
- (1) assessment and treatment options for such disorders;
- (2) barriers to care for such disorders, such as wait time, travel time, and lack of staffing;
- (3) the efficacy of the clinical practice guidelines of VA and the Department of Defense for such disorders; and
- (4) the availability of and efficacy of the use by VA of cognitive behavioral therapy for insomnia.

Based on S. 3293, the Post-9/11 Veterans' Mental Health Care Improvement Act.

Sec. 503. Study on inpatient mental health and substance use care from Department of Veterans Affairs.

- This section mandates that not later than one year after the date of the enactment of this Act, the Secretary of VA shall complete the conduct of a study on access of veterans to care under the residential rehabilitation treatment programs of the Department of Veterans Affairs to determine—
    - (1) if there are sufficient geographic offerings of inpatient mental health care, especially for veterans in rural and remote communities;

- (2) if there are sufficient bed spaces at each location, based on demand and drive time from the homes of veterans;
- (3) if there are any workforce-related capacity limitations at each location, including if beds are unable to be used because there are not enough providers to care for additional patients;
- (4) if there are diagnosis-specific or sex-specific barriers to accessing care under such programs; and
- (5) the average wait time for a bed in such a program, broken out by— (A) Veterans Integrated Service Network; (B) rural or urban area; (C) sex; and (D) specialty (general program, substance use disorder program, military sexual trauma program, etc.).

Based on S. 3293, the Post-9/11 Veterans' Mental Health Care Improvement Act

Sec. 504. Study on treatment from Department of Veterans Affairs for co-occurring mental health and substance use disorders.

- This section directs VA to conduct a study examining the availability of treatment programs for veterans with co-occurring mental health and substance use disorders (including both inpatient and outpatient care); any geographic disparities in access to such programs, such as for rural and remote veterans; and the average wait times for care under such programs.

Based on S. 3293, the Post-9/11 Veterans' Mental Health Care Improvement Act

Sec. 505. Study on workload of suicide prevention teams of Department of Veterans Affairs.

- This provision directs VA to conduct a study evaluating the workload of local suicide prevention teams of the Department of Veterans Affairs.
- The study shall identify the effects of the growth of the suicide prevention program of the Department on the workload of suicide prevention teams; incorporate key practices for staffing model design in determining suicide prevention staffing needs; and determine which facilities of the Department need increased suicide prevention coordinator staffing to meet the needs of veterans, with an emphasis placed on facilities with high patient volume and facilities located in States with high rates of veteran suicide.

Based on S. 3293, the Post-9/11 Veterans' Mental Health Care Improvement Act

Sec. 506. Expansion of suicide prevention and mental health research.

- This section authorizes an additional $10,000,000 to be used by VA's Center of Excellence for Suicide Prevention of the Department and the Rocky Mountain Mental Illness Research Education and Clinical Center for the purposes of conducting research

on the factors impacting veteran suicide and best practices for early intervention and support.

Based on S. 3293, the Post-9/11 Veterans' Mental Health Care Improvement Act

Sec. 507. Study on mental health and suicide prevention support for military families.

- This section directs the Secretary of VA, in collaboration with the Secretary of Defense, to conduct a study on secondary post-traumatic stress disorder and depression and its impact on spouses, children, and caregivers of members of the Armed Forces.

Based on S. 3293, the Post-9/11 Veterans' Mental Health Care Improvement Act

Sec. 508. Research on brain health.

- This section authorizes an additional $5,000,000 for ongoing and future research at VA's Translational Research Center for traumatic brain injury and stress disorders to provide better understanding of and improved treatment options for post-9/11 veterans with traumatic brain injury or post-traumatic stress disorder.

Based on S. 3293, the Post-9/11 Veterans' Mental Health Care Improvement Act

Sec. 509. Study on efficacy of clinical and at-home resources for post-traumatic stress disorder.

- This section mandates that not later than two years after the date of the enactment of this Act, the Secretary of VA, through VA's Office of Research and Development, shall conduct a study on the efficacy of clinical and at-home resources, such as mobile applications like COVID Coach, for providers, veterans, caregivers, and family members to use for dealing with stressors; the feasibility and advisability of developing more such resources; strategies for improving mental health care and outcomes for veterans with post-traumatic stress disorder; and best practices for helping family members of veterans deal with secondary post-traumatic stress disorder or mental health concerns.

Based on S. 3293, the Post-9/11 Veterans' Mental Health Care Improvement Act

DIVISION W—UNLEASHING AMERICAN INNOVATORS ACT OF 2022

This bill addresses access to the Patent Trademark Office (PTO) for individual inventors in underrepresented communities.

Specifically, the bill requires the PTO's satellite offices to conduct outreach to increase participation in the patent system by women, people of color, military veterans, individual inventors, and other groups that are underrepresented in the system. It further requires the PTO to study whether additional satellite offices are needed to increase those groups' participation in the patent system. Their bill also creates a network of smaller community outreach offices,

which will partner with local community organizations to create community-based programs to educate Americans about the patent system and the benefits of innovation and entrepreneurship.

The bill also establishes a patentability assessment pilot program to assist first-time prospective inventors in determining whether an idea they have is likely to meet the threshold for patentability.

DIVISION X—EXTENSION OF AUTHORIZATION FOR SPECIAL ASSESSMENT FOR DOMESTIC TRAFFICKING VICTIMS' FUND

Sec.101.Extension of authorization for special assessment for domestic trafficking victims' fund.

This legislation extends for two years a special assessment imposed under 18 USC 3014 on federal defendants convicted of certain offenses that is deposited into the Domestic Trafficking Victims Fund to support victims services and investigative efforts.

DIVISION Y—CONTRACT ACT OF 2022

Exempts certain air traffic controllers (participants in the Air Traffic Control Contract Program), from a required reduction in their retirement annuity payment on account of earnings from certain work performed while entitled to such annuity

DIVISION Z—COVS ACT

Requires the General Services Administration (GSA) to transfer certain surplus computers and technology equipment to nonprofit computer refurbishers for repair and eventual distribution to (1) schools (including home schools), veterans, seniors, and other specified populations in need; and (2) state and local agencies for donation to nonprofit and public entities.

DIVISION AA—FINANCIAL SERVICES MATTERS

TITLE I—REGISTRATION FOR INDEX-LINKED ANNUITIES ACT

Requires the SEC to establish a tailored form for registering the offering of index-linked annuities. This provision has passed the Senate by UC, and is similar to a bill that passed the House by suspension.

TITLE II—MASIH ALINEJAD HUNT ACT OF 2022

Creates an annual reporting requirement to assess the state of human rights inside Iran and authorizes mandatory sanctions on Iranian officials responsible for targeting dissidents and human rights advocates.

TITLE III—TRADING PROHIBITIONS

Amends the 2020 legislation and builds on recent PCAOB oversight efforts to increase accountability for foreign companies that refuse to submit to U.S. oversight of their audit firms and further close a loophole that companies based in China have used to avoid such oversight. Foreign companies traded on U.S. stock exchanges will have to comply with accounting transparency requirements in two years instead of three. This provision has passed the Senate by UC.

TITLE IV—ANTI-MONEY LAUNDERING WHISTLEBLOWER IMPROVEMENT ACT

Strengthens an existing anti-money laundering whistleblower program by setting a minimum whistleblower award amount and creating a funding mechanism to pay whistleblowers. Standalone legislation (S. 3316) passed the Senate by voice vote.

TITLE V— SMALL BUSINESS MERGERS, ACQUISITIONS, SALES, AND BROKERAGE SIMPLIFICATION ACT

This provision, which passed the House on suspension, codifies an SEC decision to exempt from SEC and FINRA registration requirements qualifying M&A brokers that facilitate the sale of small private companies.

TITLE VI— PUBLIC AND FEDERALLY ASSISTED HOUSING FIRE SAFETY ACT

Requires the installation of hardwired or tamper-resistant, battery-powered smoke alarms in federally assisted housing. This provision is similar to a bill that passed the House on suspension.

TITLE VII—BENJAMIN BERELL FERENCZ CONGRESSIONAL GOLD MEDAL

Recognizes the last living Nuremberg prosecutor, 102-year-old Benjamin Ferencz, with Congress's highest expression of civilian appreciation. Stand-alone legislation has already passed the House.

TITLE VIII— CONGRESSIONAL OVERSIGHT COMMITTEE EXPIRATION

Moves up the termination date to mid-2023 for the Congressional Oversight Commission. Created by the CARES Act, this five-member panel oversaw since-discontinued COVID emergency lending programs at the Federal Reserve.

TITLE IX—NFIP EXTENSION

Extends the National Flood Insurance Program's (NFIP) authorization and borrowing authority through September 30, 2023.

DIVISION BB—CONSUMER PROTECTION AND COMMERCE

TITLE I - Manufacturing.gov

This provision directs the Secretary of Commerce establish a section on the "manufacturing.gov" website to serve as the primary source of information related to all federal manufacturing programs. The "manufacturing.gov" hub shall (1) provide contact information for relevant program offices, (2) provide a means for public input and feedback regarding these programs, (3) establish web pages focusing on technology, research and development, trade, workforce development, supply chains, and small and medium manufacturers, and (4) use machine learning to identify frequently asked questions and disseminate answers.

TITLE II - STURDY

This provision directs the Consumer Product Safety Commission to develop a mandatory safety standard for clothing storage units to prevent tip-overs. The standard must protect children from tip-over-related death or injury and be developed in consultation with consumer groups, child product engineers and furniture manufacturers. If a voluntary standard exists that meets the safety requirements, the Commission must adopt such standard. The provision also provides a mechanism for revising an adopted voluntary standard.

TITLE III - Inform Consumers

This provision requires certain e-commerce platforms that permit third-party sellers of consumer products to verify the identity of high-volume third-party sellers, enable consumers to obtain basic information about such sellers, including contact information, and provides for Federal Trade Commission enforcement.

TITLE IV - Virginia Graeme Baker Pool and Spa Safety Act Reauthorization

This provision reauthorizes the Virginia Graeme Baker Pool and Spa Safety Act, authorizes $2.5 million for funding grants to states and Indian tribes to address pool and spa safety, and authorizes $2.5 million to the Consumer Product Safety Commission to establish and carry out implement an education and awareness program to inform the public of methods to prevent d drowning and entrapment in swimming pools and spas.

TITLE V – RANSOMWARE ACT

This provision requires the Federal Trade Commission to report on cross-border complaints received that involve ransomware and other cyber-security attacks committed by foreign individuals, companies, and governments, specifically those committed by the governments of North Korea, Iran, China, and Russia or by individuals located in or having ties to those countries.

TITLE VI - Travel and Tourism

This provision establishes and implements measures to support the U.S. travel and tourism industry, including by directing the Department of Commerce to develop a 10-year travel and tourism strategy with annual goals to boost the industry. The provision establishes an Assistant Secretary of Commerce for Travel and Tourism in the Department of Commerce, appointed by the President.

DIVISION CC—WATER RELATED MATTERS

Sec.101.Extension of authorizations related to fish recovery programs.

This section extends the authority and report deadline for the Department of the Interior to implement capital projects for the endangered fish recovery programs of the Upper Colorado and San Juan River basins through FY2024 and adjusts cost ceilings for the programs.

Sec.102.Colorado River System conservation pilot program.

This section extends the Bureau of Reclamation's legal authority for the Colorado River System Conservation Pilot Program through FY2024 and clarifies that new water conservation agreements will be eligible for funding under the program.

Sec.103.Salton Sea projects.

This section authorizes the Bureau of Reclamation to provide grants and enter into contracts and cooperative agreements to carry out projects in partnership with Salton Sea stakeholders to mitigate dust impacts; and improve water quality, fish and wildlife habitat, and recreational opportunities.

Sec.104.Authorization of Sun River project, Montana.

This section authorizes the U.S. Bureau of Reclamation to advance hydroelectric power generation at Montana's Sun River Project, consistent with reclamation laws and other requirements.

Sec.105.Eligibility under the Infrastructure Investment and Jobs Act of small water storage and groundwater storage projects.

This section changes the eligibility requirements under Bureau of Reclamation's Small Water Storage Program to allow projects larger than 200 acre-feet to be eligible for competitive grant funding.

DIVISION DD—PUBLIC LAND MANAGEMENT

Sec.1.Definition of Secretary.

This section defines the term "Secretary" to mean the Secretary of the Interior within the division.

TITLE I—DEPARTMENT OF THE INTERIOR PROVISIONS

Sec.101.Pilot program for native plant species.

This section establishes a pilot program for native plant species within geographically diverse units of the National Park System and public lands administered by the Bureau of Land

Management to promote and increase the use of native plants on Federal lands. [S. 557 was reported by the Senate Energy and Natural Resources Committee]

Sec.102.Reauthorization of the Highlands Conservation Act.

This section amends the Highlands Conservation Act (Public Law 108-42), to authorize Federal matching funds through fiscal year (FY) 2028, and to update and clarify other provisions of the Act. Congress enacted the Highlands Conservation Act in 2004 to recognize the importance of the water, forest, agricultural, wildlife, recreational, and cultural resources of the Highlands region, which extends from Connecticut through New Jersey, New York, and Pennsylvania. Under the Act, the Secretary of the Interior (through the U.S. Fish and Wildlife Service) is authorized to provide matching funds to help fund land conservation partnership projects. [S. 753 was reported by the Senate Energy and Natural Resources Committee; H.R. 2793 passed the House by voice vote]

Sec.103.Cadastre of Federal real property.

This section requires the Secretary of Agriculture, acting through the Chief of the Forest Service, and Secretary of the Interior to develop and maintain a publicly available cadastre (inventory) of Federal real property under the jurisdiction of the Secretaries. S.2433 was reported by the Senate Energy and Natural Resources Committee; H.R. 5522 was reported by the House Natural Resources Committee]

Sec.104.Sale or lease of land to federally recognized Indian Tribes under the Recreation and Public Purposes Act.

This section authorizes the Department of the Interior to sell or lease public lands to federally recognized Indian Tribes under the Recreation & Public Purposes Act. [The Senate Energy and Natural Resources Committee held a hearing on S. 4424; the House Natural Resources Committee ordered H.R. 8115 reported]

TITLE II—FOREST SERVICE PROVISIONS

Sec.201.Administration of the Land Between the Lakes National Recreation Area.

This section makes several amendments to the management provisions of the Land Between the Lakes (LBL) Protection Act of 1998, including: expanding the role of the LBL Advisory Board, using funds collected by fees for deferred maintenance instead of for general management and salaries, and encouraging the Forest Service to enter into Memorandum of Agreements with state and local governments, including local law enforcement, to clarify jurisdictional matters. [S. 3997 was reported by the Senate Energy and Natural Resources Committee; the House National Resources Committee held a hearing on H.R. 7399]

Sec.202.Hawaii National Forest study.

This section requires the Secretary of Agriculture to conduct a study on the establishment of, and the potential land that could be included in, a unit of the National Forest System in the State of

Hawaii. [H.R.297 passed the House and was reported by the Senate Energy and Natural Resources Committee]

TITLE III—LAND CONVEYANCES AND EXCHANGES

Sec.301.Gilt Edge Mine conveyance.

This section transfers approximately 266 acres of National Forest System land within the Gilt Edge Mine Superfund Site to the State of South Dakota. The State owns a portion of land base of the mine site and has an interest in consolidating adjoining Federal and private land within the Superfund site to mitigate acidic rock drainage. [S.569 was reported by the Senate Energy and Natural Resources Committee; H.R. 1638 passed the House]

Sec.302.Conveyances to the University of Alaska.

This section authorizes the transfer of up to 360,000 acres of land selections made by the State of Alaska to the University of Alaska. The University must manage any land received and income derived under this program in a trust capacity to support higher education. [S.1128 was reported by the Senate Energy and Natural Resources Committee]

Sec.303.Bonneville Shoreline Trail wilderness boundary adjustments.

This section removes 326 acres certain lands in the State of Utah as components of the National Wilderness Preservation System to allow for expanded uses of the Bonneville Shoreline Trail. Further, the bill designates an equal amount of land—326 acres—for addition to the Mount Olympus Wilderness in Utah. [S.1222 was reported by the Senate Energy and Natural Resources Committee; H.R. 2551 passed the House by voice vote]

Sec.304.Arizona Experiment Station land conveyance.

This section directs the Department of Agriculture, upon request of the Arizona Board of Regents, acting on behalf of the University of Arizona Experiment Station, to convey approximately 13.3 acres of National Forest System land within the Coconino National Forest in Arizona to the university. [This provision was reported by the Senate Energy and Natural Resources Committee]

Sec.305.Wind River Administrative Site conveyance.

This section directs the Secretary of Agriculture to transfer a 23.4-acre parcel of National Forest System land in the State of Washington to Skamania County, Washington if certain conditions are met. [H.R.5093 passed the House by voice vote]

Sec.306.Right-of-way permit for natural gas distribution main segment at Valley Forge NHP.

This section authorizes the Department of the Interior to issue a right-of-way permit for a specified segment of the natural gas distribution pipeline (including all appurtenances used in the operation of such pipeline) within Valley Forge National Historical Park if the pipeline segment

is relocated to a proposed realignment of Valley Forge Park Road and North Gulph Road within the park. [H.R. 7952 passed the House by voice vote]

TITLE IV—WILD AND SCENIC RIVER DESIGNATIONS

Sec.401.Designation of York Wild and Scenic River, Maine.

This section designates approximately 30.8 miles of the York River in Maine and its tributaries as a recreational component of the National Wild and Scenic Rivers System. [S. 491 was reported by the Senate Energy and Natural Resources Committee; the House Natural Resources Committee held a hearing on H.R. 1469]

Sec.402.Designation of Housatonic Wild and Scenic River, Connecticut.

This section designates specified segments of the Housatonic River in Connecticut as components of the National Wild and Scenic Rivers System. [The Senate Energy and Natural Resources Committee held a hearing on S. 4122]

Sec.403.Designation for study of wild and scenic river segments, Little Manatee River, Florida.

This section designates a segment of the Little Manatee River in Florida for study for potential addition to National Wild and Scenic Rivers System. [H.R. 4358 was passed by the House]

Sec.404.Designation for study of wild and scenic river segments, Kissimmee River, Florida.

This section designates for a study a restored segment of the Kissimmee River in Florida as a potential addition to the National Wild and Scenic Rivers System. [H.R. 4404 was passed by the House by a vote of 377-45]

TITLE V—NATIONAL TRAILS SYSTEM

Sec.501.Designation of the Chilkoot National Historic Trail.

This section designates the Chilkoot National Historic Trail in Alaska as a component of the National Trails System. [S. 1354 was reported by the Senate Energy and Natural Resources Committee]

Sec.502.Alaska Long National Scenic Trail study.

This section directs the Secretary of the Interior to study feasibility of designating the Alaska Long Trail as a component of the National Trails System. [S. 1354 was reported by the Senate Energy and Natural Resources Committee]

Sec.503.Buckeye National Scenic Trail feasibility study.

This section directs the Department of the Interior to study of the feasibility of designating the Buckeye Trail as a National Scenic Trail. [H.R. 6142 was reported by the House Natural Resources Committee]

TITLE VI—NATIONAL PARK SERVICE PROVISIONS

Subtitle A—Additions to the National Park System

Sec.601.New Philadelphia National Historic Site.

This section establishes the New Philadelphia Historic Site in Illinois as a unit of the National Park System. [S. 3141 was reported by the Senate Energy and Natural Resources Committee; H.R. 820 passed the House by voice vote]

Subtitle B—Modifications to Existing Units of the National Park System

Sec.611.Sunset Crater Volcano National Monument boundary adjustment.

This section modifies the boundary of the Sunset Crater Volcano National Monument in Arizona. [S. 1317 was reported by the Senate Energy and Natural Resources Committee]

Sec.612.Rosie the Riveter/World War II Home Front National Historical Park.

This section expands the Rosie the Riveter/World War II Home Front National Historical Park in California to include the Nystrom Elementary School, the Maritime Building, and other areas as the Department of the Interior deems appropriate. [S. 1718 was reported by the Senate Energy and Natural Resources Committee; a similar bill recieved a hearing in the House Natural Resources Committee]

Sec.613.Cape Cod National Seashore Advisory Commission.

This section extends the Cape Cod National Seashore Advisory Commission until September 26, 2029. [S. 2158 was reported by the Senate Energy and Natural Resources Committee]

Sec.614.Cane River Creole National Historical Park boundary modification.

This section modifies the boundary of the Cane River Creole National Historical Park in Louisiana. [S. 2438 was reported by the Senate Energy and Natural Resources Committee; H.R. 4648 was reported by the House Natural Resources Committee]

Sec.615.Use of certain roads within the Delaware Water Gap National Recreation Area.

This section extends until September 30, 2026, the use of a federally owned road within the boundaries of the Delaware Water Gap National Recreation Area by certain commercial vehicles that serve local businesses. [S. 3185 was reported by the Senate Energy and Natural Resources Committee; the House passed H.R. by voice vote]

Sec.616.Wilson's Creek National Battlefield boundary modification.

This section expands the boundary of the Wilson's Creek National Battlefield in Missouri. [S. 3307 was reported by the Senate Energy and Natural Resources Committee]

Sec.617.Ste. Genevieve National Historical Park boundary revision.

This section makes a minor boundary revision to the Ste. Genevieve National Historical Park in Missouri. [S. 3338 was reported by the Senate Energy and Natural Resources Committee; H.R. 6199 was reported by the House Natural Resources Committee]

Sec.618.Conveyance of certain Federal land in Maine for affordable workforce housing.

This section conveys certain federal land in Bar Harbor, Maine, for affordable workforce housing. [S. 4114 was reported by the Senate Energy and Natural Resources Committee]

Sec.619.Designation of Pullman National Historical Park.

This section redesignates Pullman National Monument in Illinois as Pullman National Historical Park. [S. 1344 was reported by the Senate Energy and Natural Resources Committee; H.R. 2626 was reported by the House Natural Resources Committee]

Sec.620.Palo Alto Battlefield National Historic Park boundary addition.

This section adjusts the boundary of the Palo Alto Battlefield Historical Park in Texas. H.R. 268 passed the House by voice vote and the Senate Energy and Natural Resources Committee held hearing on the bill]

Sec.621.Installation of plaque commemorating slave rebellion on St. John.

This section directs the Department of the Interior to install on the Ram Head trail at the peak of the Ram Head in the Virgin Islands National Park on St. John, U.S. Virgin Islands, a suitable plaque to commemorate the slave rebellion that began on St. John on November 23, 1733. [The House passed H.R. 7496 by voice vote]

Subtitle C—National Park Service Studies

Sec.631.Special resource study of John P. Parker House.

This section directs the Department of the Interior to conduct a special resource study of the John P. Parker House in Ripley, Ohio, to evaluate the national significance of the area and determine the suitability and feasibility of designating it as a unit of the National Park System. [S. 3685 was reported by the Senate Energy and Natural Resources Committee; H.R. 6799 was reported by the House Natural Resources Committee]

Sec.632.Dearfield, Colorado, special resource study.

This section directs the Department of the Interior to conduct a special resource study of the Dearfield site in Weld County, Colorado, which was a historically black agricultural settlement founded by Oliver Toussaint Jackson, to evaluate the national significance of the area and determine the suitability and feasibility of designating it as a unit of the National Park System. [H.R. 6438 was reported by the House Natural Resources Committee]

Sec.633.Special resource study of lynching locations.

This section directs the Department of the Interior to conduct a special resource study of sites within approximately 100 miles of Memphis, Tennessee, at which lynchings took place, to evaluate the national significance of the area and determine the suitability and feasibility of designating it as a unit of the National Park System. [The House Natural Resources Committee held a hearing on H.R. 7912]

Sec.634.Resource study of the Los Angeles coastal area, California.

This section directs the Department of the Interior to conduct a special resource study of the coastline of Los Angeles, California, to evaluate the national significance of the area and determine the suitability and feasibility of designating it as a unit of the National Park System. [A similar provision passed the House as part of H.R. 803]

Subtitle D—National Park Service Programs

Sec.641.Acquisition of land for administrative purposes of Historic Preservation Training Center.

This section authorizes the National Park Service to acquire land in Frederick County, Maryland, for the Historic Preservation Training Center. [S. 2367 was reported by the Senate Energy and Natural Resources Committee; H.R. 4494 was reported by the House Natural Resources Committee]

Sec.642.Waiver of special use permit application fee for veterans' special events.

This section waives the application fee for any application for any special use permit of which the sole purpose is to hold veterans' special event at a war memorial on land administered by National Park Service in the District of Columbia. [S. 3240 was reported by the Senate Energy and Natural Resources Committee; the House passed H.R. 1029 by a vote of 421-3]

Sec.643.United States African-American Burial Grounds Preservation Program.

This section directs the Department of the Interior to establish the United States African-American Burial Grounds Preservation Program within the National Park Service. [S. 3667 was reported by the Senate Energy and Natural Resources Committee; the House Natural Resources Committee held a hearing on H.R. 6805]

Sec.644.Norman Y. Mineta Japanese American Confinement Education Grants.

This section reauthorizes and increases appropriations for the Japanese American Confinement Sites (JACS) grant program. The JACS grant program supports the preservation of U.S. confinement sites that were used to detain Japanese Americans during World War II. This section also establishes a program within JACS to provide grants to Japanese American nonprofits to educate individuals about the historical significance of these events. [The House passed H.R. 1931 by voice vote and the bill was reported by the Senate Energy and Natural Resources Committee]

Sec.645.Japanese American World War II History Network.

This section directs the Department of the Interior to establish the Japanese American World War II History Network within the National Park Service. [The House passed H.R. H.R. 6434 by voice vote and the bill was reported by the Senate Energy and Natural Resources Committee]

Sec.646.Authorization of appropriations for the National Park Foundation.

This section reauthorizes the National Park Foundation through FY 2030 and raises the annual authorization of appropriations from $5,000,000 to $15,000,000. [The Senate Energy and Natural Resources Committee held a hearing on S. 4168; the House passed H.R. 7693 passed the House by a vote of 397-22]

TITLE VII—COMMEMORATIVE WORKS AND NATIONAL MEMORIALS

Sec.701.Designation of the Kol Israel Foundation Holocaust Memorial as a national memorial.

This section designates the Kol Israel Foundation Holocaust Memorial in Bedford Heights, Ohio, as a national memorial. [S. 4121 was reported by the Senate Energy and Natural Resources Committee; H.R. 7618 passed the House by voice vote]

Sec.702.Authorization to establish commemorative work to commemorate the commitment and service represented by women who worked on the home front during World War II.

This section authorizes the Women Who Worked on the Home Front Foundation to establish a commemorative work on federal land in the District of Columbia in commemoration of women who worked on the home front during World War II. [S. 1814 was reported by the Senate Energy and Natural Resources Committee; H.R. 3531 passed the House by a vote of 425-1]

Sec.703.Extension of authority for establishment of National Liberty Memorial commemorative work.

This section extends through FY 2027 the authority of the National Mall Liberty Fund D.C. to establish a memorial in the District of Columbia to honor slaves and free black persons who served during the American revolution. [S. 1814 was reported by the Senate Energy and Natural Resources Committee; the House passed H.R. 6201 by voice vote]

Sec.704.Authorization to establish commemorative work to commemorate the heroic deeds and sacrifices of service animals and handlers of service animals in the United State.

This section authorizes the National Service Animals Monument Corporation to establish a commemorative work on federal land in the District of Columbia to commemorate the deeds and sacrifices of services animals and their handlers in the United States. [The Senate Energy and Natural Resources Committee held a hearing on S. 3447; H.R. 6353 passed the House by voice vote]

Sec.705.Authorization to establish commemorative work to honor Jean Monnet.

This section authorizes the Government of France to establish a commemorative work on federal land in the District of Columbia to honor the contributions of Jean Monnet, who was instrumental in founding the European Union. [The Senate Energy and Natural Resources Committee held a hearing on S. 3579; the House passed H.R. 6611 on suspension]

Sec.706.Designation of El Paso Community Healing Garden National Memorial.

This section designates the Healing Garden located in El Paso, Texas, as the El Paso Community Healing Garden National Memorial. [The Senate Energy and Natural Resources Committee held a hearing on S. 4377; the House passed H.R. 4380 by a vote of 403-25]

Sec.707.Authorization to establish commemorative work to commemorate the enslaved individuals who endured the Middle Passage.

This section authorizes the Georgetown African American Historic Landmark Project and Tour to establish a commemorative work on federal land in the District of Columbia to commemorate the enslaved individuals, the identities of whom may be known or unknown, who endured the Middle Passage. [The Senate Energy and Natural Resources Committee held a hearing on S. 4732; the House passed H.R. 4009 on suspension]

Sec.708.Approval of location of commemorative work to honor journalists who sacrificed their lives in service to a free press.

This section approves of the location in Area I (as defined by the Commemorative Works Act) of a memorial to commemorate the commitment of the United States to a free press by honoring journalists who sacrificed their lives in service to that cause. [The Senate Energy and Natural Resources Committee held a hearing on S.J. Res. 62]

Sec.709.Authorization of Thomas Paine commemorative work.

This section authorizes the Thomas Paine Memorial Association to establish a commemorative work on federal land in the District of Columbia in honor of the philosopher Thomas Paine. [H.R. 6720 was reported by the House Natural Resources Committee]

Sec.710.Designation of Ukrainian Independence Park.

This section designates unnamed parcels owned by the National Park Service in the District of Columbia as Ukrainian Independence Park. [H.R. 7075 was reported by the House Natural Resources Committee]

TITLE VIII—MISCELLANEOUS

Sec.801.Long-term abandoned mine land reclamation.

This section allows states receiving Abandoned Mine Land (AML) funding through the Infrastructure Investment and Jobs Act (IIJA) to set aside up to 30% of these funds in an interest-bearing account to address the long-term costs associated with acid mine drainage (AMD), subsidence, and mine fire abatement. States are already able to set aside up to 30% of their regular AML funds in an AMD account, but this authorization was not originally included for AML funds appropriated by IIJA. [The Senate passed S. 3957 by voice vote; the House passed H.R. 7283 by a vote of 391-9]

Sec.802.Consent of congress to amendment to the Constitution of the State of New Mexico.

This section consents to an amendment to the New Mexico State Constitution which would increase the annual distribution amount of funding dedicated to early childhood education and K-12 education derived from New Mexico's Land Grant Permanent Fund.

DIVISION EE—POST OFFICE DESIGNATIONS

Sec.101.Coya Knutson Post Office.

Sec.102.Robert Smalls Post Office.

Sec.103.Robert J. Dole Memorial Post Office Building.

Sec.104.Charles E. Fraser Post Office Building.

Sec.105.Harriet Tubman Post Office Building.

Sec.106.Corporal Benjamin Desilets Post Office.

Sec.107.Sgt. Jeremy C. Sherman Post Office Building.

Sec.108.Sergeant Bret D. Isenhower Memorial Post Office Building.

Sec.109.Cottle Centanni Post Office Building.

Sec.110.Captain Robert C. Harmon and Private John R. Peirson Post Office Building.

Sec.111.Corporal Mitchell Red Cloud, Jr. Post Office.

Sec.112.Corporal Joseph Rodney Chapman Post Office.

Sec.113.Harold Billow Post Office Building.

Sec.114.Romuald "Bud" Brzezinski Post Office.

Sec.115.Mitchell F. Lundgaard Post Office Building.

Sec.116.Judge James Perez Post Office.

Sec.117.Change of address for Marilyn Monroe Post Office.

Sec.118.Jesus Antonio Collazos Post Office Building.

Sec.119.Esteban E. Torres Post Office Building.

Sec.120.District of Columbia Servicemembers and Veterans Post Office.

Sec.121.Army Specialist Joseph "Joey" W. Dimock II Post Office Building.

Sec.122.Corporal Hunter Lopez Memorial Post Office Building.

Sec.123.Chief Rudy Banuelos Post Office.

Sec.124.Chairman Richard Milanovich Post Office.

Sec.125.U.S. Senator Dennis Cha1vez Post Office.

DIVISION FF—HEALTH AND HUMAN SERVICES

TITLE I – RESTORING HOPE FOR MENTAL HEALTH AND WELL-BEING

Subtitle A – Mental Health and Crisis Care Needs

Chapter 1 – Crisis Care Services and 9-8-8 Implementation

Section 1101. Behavioral Health Crisis Coordinating Office.

Section 1101 codifies the Behavioral Health Crisis Coordinating Office within the Substance Abuse and Mental Health Services Administration (SAMHSA) to convene partners and provide technical assistance to enhance access to crisis care.

Section 1102. Crisis response continuum of care.

Section 1102 requires the Secretary of Health and Human Services (HHS) to facilitate the publication of best practices for a crisis response continuum of care not later than one year after the date of enactment for use by health care providers, crisis services administrators, and crisis services providers; and, three years later, to facilitate the identification of any updates of such best practices, as appropriate. Directs the Government Accountability Office (GAO) to assess the extent to which relevant programs related to mental health and substance use disorder crises utilize best practices and recommendations identified under this section and submit its findings to Congress within three years.

Section 1103. Suicide Prevention Lifeline Improvement.

Section 1103 reauthorizes and expands the National Suicide Prevention Lifeline Program. It requires SAMHSA to develop a plan to ensure the provision of high-quality service and strengthens agreements, as appropriate, to facilitate the transmission of epidemiological data from the program to the Centers for Disease Control and Prevention (CDC) and ensure relevant analyses are made available to state and local agencies. It also requires the Secretary of HHS, acting through the Assistant Secretary for Mental Health and Substance Use, to implement a pilot program focused on innovative technologies for suicide prevention. The section also directs HHS to develop, implement, and complete a study on the goals and objectives of its plan and submit a report of its findings to Congress, and requires a GAO study of the program.

Chapter 2 – Into the Light for Maternal Mental Health and Substance Use Disorders

Section 1111. Screening and treatment for maternal mental health and substance use disorders.

Section 1111 reauthorizes section 317L-1 of the Public Health Service Act (PHSA) to award grants to states, Tribes, and Tribal organizations to establish, improve, or maintain maternal mental health and substance use disorder programs for pregnant or postpartum women.

Section 1112. Maternal mental health hotline.

Section 1112 establishes a national hotline to provide information and resources for pregnant and postpartum women at risk of, or affected by, maternal mental health and substance use disorders.

Section 1113. Task force on maternal mental health.

Section 1113 establishes a task force to make recommendations to coordinate and improve federal activities related to maternal mental health conditions.

Section 1114. Residential treatment program for pregnant and postpartum women pilot program reauthorization.

Section 1114 extends the residential treatment pilot program for pregnant and postpartum women.

Chapter 3 – Reaching Improved Mental Health Outcomes for Patients

Section 1121. Innovation for mental health.

Section 1121 reauthorizes the National Mental Health and Substance Abuse Policy Laboratory and requires a GAO report on the Policy Lab's activities. It also reauthorizes the Interdepartmental Serious Mental Illness Coordinating Committee, and reauthorizes the Priority Mental Health Needs of Regions of National Significance (PRNS).

Section 1122. Crisis care coordination.

Section 1122 establishes the Mental Health Crisis Response Partnership pilot program to allow for mobile crisis response teams. It also reauthorizes the Mental Health Awareness Training (MHAT) Grant program, and expands access to technical assistance for MHAT grantees. The section also reauthorizes and improves Adult Suicide Prevention program.

Section 1123. Treatment of serious mental illness.

Section 1123 reauthorizes the Assertive Community Treatment Grant. It requires a related report to Congress by the end of fiscal year (FY) 2026. It also reauthorizes the Assisted Outpatient Treatment Grant Program and directs GAO to examine the efficacy of the program compared to other community-based outpatient treatment programs and services and submit a report to respective Committees of jurisdiction within three years of enactment.

Section 1124. Study on the costs of serious mental illness.

Section 1124 requires a study to determine the true costs of untreated serious mental illness on families, health care systems, public housing, and law enforcement in America.

Chapter 4 – Anna Westin Legacy

Section 1131. Maintaining education and training on eating disorders.

Section 1131 authorizes the SAMHSA National Center of Excellence for Eating Disorders to award competitive subgrants or subcontracts to develop and provide training and technical assistance for primary and mental health providers and other paraprofessionals and relevant individuals. It also authorizes the center to collaborate and coordinate with SAMHSA, CDC, and the Health Resources and Services Administration (HRSA) on the identification, treatment, and ongoing support of individuals with eating disorders.

Chapter 5 – Community Mental Health Service Block Grant Reauthorization

Section 1141. Reauthorization of block grants for community mental health services.

Section 1141 reauthorizes the Community Mental Health Services Block Grants for states, territories, Tribes, and Tribal organizations to support community mental health services for

adults with serious mental illness and children with serious emotional disturbance, and to support the collection of performance and outcome data. It requires five percent of the funds to be used for crisis-care services.

Chapter 6 – Peer-Supported Mental Health Services

Section 1151. Peer-Supported Mental Health Services.

Section 1151 authorizes grants for consumer-run nonprofit organizations, Tribes and Tribal organizations, Urban Indian organizations, or Tribal consortia to provide peer-supported mental health services, including virtual peer support.

Subtitle B – Substance Use Disorder Prevention, Treatment, and Recovery Services

Chapter 1 – Native Behavioral Health Resources

Sec. 1201. Behavioral health and substance use disorder resources for Native Americans.

Section 1201 authorizes resources to provide services for the prevention of, treatment of, and recovery from mental health and substance use disorders for American Indians, Alaska Natives, and Native Hawaiians.

Chapter 2 – Summer Barrow Prevention, Treatment, and Recovery

Section 1211. Grants for the benefit of homeless individuals.

Section 1211 reauthorizes the Formula Grants for the Benefit of Homeless Individuals program.

Section 1212. Priority substance use disorder treatment needs of regional and national significance.

Section 1212 reauthorizes the Substance Use Disorder Treatment Programs of Regional and National Significance (PRNS) program.

Section 1213. Evidence-based prescription opioid and heroin treatment and interventions demonstration.

Section 1213 reauthorizes Prescription Opioid and Heroin Treatment and Interventions Demonstration Grants.

Section 1214. Priority substance use disorder prevention needs of regional and national significance.

Section 1214 reauthorizes Substance Use Disorder Prevention PRNS.

Section 1215. Sober Truth on Preventing (STOP) Underage Drinking Reauthorization.

Section 1215 reauthorizes underage drinking prevention programs at SAMHSA, including the Community-based Coalition Enhancement Grants to Prevent Underage Drinking, a National Media Campaign to Prevent Underage Drinking, and grants to Organizations Representing Pediatric Providers and Other Related Health Professionals. It also authorizes a National Academies of Sciences, Engineering, and Medicine review and report to Congress.

Section 1216. Grants for jail diversion programs.

Section 1216 reauthorizes the Grants for Jail Diversion Program.

Section 1217. Formula grants to States.

Section 1217 extends the Secretary's authority to allocate funds for Projects for Assistance in Transition from Homelessness formula grants to states.

Section 1218. Projects for Assistance in Transition from Homelessness.

Section 1218 reauthorizes the Projects for Assistance in Transition from Homelessness Program.

Section 1219. Grants for reducing overdose deaths.

Section 1219 reauthorizes the Grants for Reducing Overdose Deaths program, including supporting the development of strategic opioid crisis response plans.

Section 1220. Opioid overdose reversal medication access and education grant programs.

Section 1220 reauthorizes the Opioid Overdose Reversal Medication Access, Education, and Co-prescribing Grants.

Section 1221. Emergency department alternatives to opioids.

Section 1221 reauthorizes Emergency Department Alternatives to Opioids Demonstration Grants

Chapter 3 – Excellence in Recovery Housing

Section 1231. Clarifying the role of SAMHSA in promoting the availability of high-quality recovery housing.

Section 1231 requires the Secretary, acting through the Assistant Secretary for Mental Health and Substance Use, to collaborate with federal agencies and relevant stakeholders to promote the availability of high-quality recovery housing and services for individuals with substance use disorders.

Section 1232. Developing guidelines for States to promote the availability of high-quality recovery housing.

Section 1232 requires the Secretary to develop and periodically update consensus-based best practices for operating, and promoting the availability of, high-quality recovery housing.

Section 1233. Coordination of Federal activities to promote the availability of recovery housing.

Section 1233 requires the Secretary, acting through the Assistant Secretary for Mental Health and Substance Use and the Secretary of Housing and Urban Development, to convene an interagency working group and report to Congress on its activities to increase federal collaboration and coordination, develop a long-term plan to support state, Tribal, and local efforts to operate recovery housing consistent with best practices, and coordinate fair housing practices and data collection on the quality of recovery housing.

Section 1234. National Academies of Sciences, Engineering, and Medicine study and report.

Section 1234 requires a National Academies of Sciences, Engineering, and Medicine study on the quality and effectiveness of recovery housing, including recommendations to promote the availability of recovery housing.

Section 1235. Grants for states to promote the availability of recovery housing and services.

Section 1235 permits SAMHSA to provide grants to states, Tribes, and territories for technical assistance to promote and maintain recovery housing according to best practices and to develop related state promotion plans.

Section 1236. Funding.

Section 1236 authorizes $5 million for recovery housing activities for the period of FY 2023 through FY 2027.

Section 1237. Technical correction.

Section 1237 makes technical conforming corrections to the Public Health Services Act.

Chapter 4 – Substance Use Prevention, Treatment, and Recovery Services Block Grant

Section 1241. Eliminating stigmatizing language relating to substance use.

Section 1241 replaces "substance abuse" with "substance use," including renaming SAMHSA's Substance Abuse Prevention and Treatment Block Grant as the "Substance Use Prevention, Treatment, and Recovery Services Block Grant."

Section 1242. Authorized activities.

Section 1242 adds "provide recovery support services" as an authorized activity.

Section 1243. State plan requirements.

Section 1243 requires that states' plans describe the recovery support service activities supported by block grant funds, including number of individuals served, target populations, workforce capacity (including with respect to prevention, treatment, and recovery), priority needs, and the amount of funds allocated to recovery support services disaggregated by type of activity.

Section 1244. Updating certain language relating to Tribes.

Section 1244 updates the statutory language with regard to Tribes and Tribal organizations.

Section 1245. Block grants for substance use prevention, treatment, and recovery services.

Section 1245 reauthorizes the Substance Use Prevention, Treatment, and Recovery Services Block Grant to provide states and Tribes with funding to plan, carry out, and evaluate substance use disorder prevention, treatment, and recovery support services for individuals, families, and communities impacted by substance use disorders.

Section 1246. Requirement of reports and audits by states.

Section 1246 requires states' reports to include the amount of funds provided to each grant recipient from the previous fiscal year.

Section 1247. Study on assessment for use of state resources.

Section 1247 requires the Secretary to conduct a study on strategies to assess community needs with respect to prevention, treatment, or recovery support services, which shall, where feasible and appropriate, include estimates for resources to provide such services.

Chapter 5 – Timely Treatment for Opioid Use Disorder

Section 1251. Study on exemptions for treatment of opioid use disorder through opioid treatment programs during the COVID–19 public health emergency.

Section 1251 requires the Assistant Secretary for Mental Health and Substance Use to conduct a study and report within 180 days on the impacts of treatment flexibilities allowed during the pandemic.

Section 1252. Changes to federal opioid treatment standards.

Section 1252 allows certain Drug Enforcement Administration (DEA) registrants to operate one or more mobile units to dispense medications for opioid use disorder without separate registrations for each mobile unit. It also requires HHS to issue regulations eliminating the requirement that an individual have an opioid use disorder for at least one year before being admitted for treatment by an opioid treatment program.

Chapter 6 – Additional Provisions Relating to Addiction Treatment

Section 1261. Prohibition.

Section 1261 prohibits funds authorized or amended by this title from being used to purchase, procure, or distribute pipes or cylindrical objects intended to be used to smoke or inhale illegal scheduled substances.

Section 1262. Eliminating additional requirements for dispensing narcotic drugs in schedule III, IV, and V for maintenance or detoxification treatment.

Section 1262 eliminates a requirement for health care practitioners registered to dispense controlled substances to apply for a separate waiver through the DEA to dispense buprenorphine for opioid use disorder maintenance or detoxification treatment, known as the X Waiver

Section 1263. Requiring prescribers of controlled substances to complete training.

Section 1263 requires health care providers, as a condition of receiving or renewing a DEA registration to prescribe controlled substances, to meet a one-time eight-hour training requirement on identifying and treating patients with substance use disorders.

Section 1264. Increase in number of days before which certain controlled substances must be administered.

Section 1264 increases the time limit for health care providers to hold long-acting injectable (LAI) buprenorphine before administration to a patient, if received through a specialty pharmacy, from 14 to 45 days.

Chapter 7 – Opioid Crisis Response

Section 1271. Opioid prescription verification.

Section 1271 requires the development and dissemination of training materials for pharmacists who may decline to fill a prescription, under certain circumstances. It allows the CDC to prioritize jurisdictions with a high burden of drug overdoses or drug overdose deaths when awarding grants to prevent overdoses of controlled substances.

Section 1272. Synthetic opioid and emerging drug misuse danger awareness.

Section 1272 requires HHS to conduct a public education campaign on synthetic opioids (including fentanyl and its analogues) and other emerging drug misuse issues, disseminate information about synthetic opioids to health care providers, and develop a training guide and webinar for first responders and other individuals at high risk of exposure to synthetic opioids that details measures to prevent exposure.

Section 1273. Grant program for State and Tribal response to opioid use disorders.

Section 1273 authorizes the State Opioid Response (SOR) Grants and Tribal Opioid Response (TOR) Grants.

Subtitle C – Access to Mental Health Care and Coverage

Chapter 1 – Improving Uptake and Patient Access to Integrated Care Services

Section 1301. Improving uptake and patient access to integrated care services.

Section 1301 reauthorizes a SAMHSA program to increase uptake and access to integrated care services. States receiving funds through the program that partner with primary care practices may use funds to implement evidence-based or evidence-informed integrated models of care, including the psychiatric collaborative care model (CoCM). Depending on the availability of appropriations, allocates ten percent of such funds to support primary care practices implementing CoCM.

Chapter 2 – Helping Enable Access to Lifesaving Services

Section 1311. Reauthorization and provision of certain programs to strengthen the health care workforce.

Section 1311 reauthorizes the Behavioral Health Workforce Education and Training (BHWET) Program, which updates advanced degree references for occupational therapists, and emphasizes support for children and adolescents that have experienced trauma. This section also reauthorizes HRSA's Training Demonstration Program related to graduate fellowship training opportunities, updates eligibility to include nurses and counselors, and places emphasis on trauma-informed care and pediatric populations.

Section 1312. Reauthorization of minority fellowship program.

Section 1312 reauthorizes SAMHSA's Minority Fellowship Program supporting individuals pursuing masters or doctoral degrees in various fields of mental health and substance use disorder counseling.

Chapter 3 – Eliminating the Opt-Out for Nonfederal Governmental Health Plans

Section 1321. Eliminating the opt-out for nonfederal governmental health plans.

Section 1321 requires self-funded, non-federal governmental health plans to comply with mental health parity requirements beginning six months after the date of enactment or longer contingent on the terms of the plan agreement.

Chapter 4 – Mental Health and Substance Use Disorder Parity Implementation

Section 1331. Grants to support mental health and substance use disorder parity

implementation.

Section 1331 authorizes grants to states to enforce and ensure compliance with mental health parity requirements.

Subtitle D – Children and Youth

Chapter 1 – Supporting Children's Mental Health Care Access

Section 1401. Technical assistance for school-based health centers.

Section 1401 requires the Secretary of HHS to provide technical assistance to school-based health centers (SBHC) through private, nonprofit entities with demonstrated expertise related to SBHCs. This technical assistance shall support SBHCs in providing services to improve physical and mental health.

Section 1402. Infant and early childhood mental health promotion, intervention, and treatment.

Section 1402 reauthorizes SAMHSA's Infant and Early Childhood Mental Health Grant program and allows the Secretary of HHS to provide technical assistance for grantees.

Section 1403. Co-occurring chronic conditions and mental health in youth study.

Section 1403 requires HHS to study rates of suicidal behaviors among children and adolescents with chronic illnesses, including substance use disorders, autoimmune disorders, and heritable blood disorders. It also requires HHS to submit a report to Congress on findings and recommendations, including addressing related demographic disparities.

Section 1404. Best practices for behavioral and mental health intervention teams.

Section 1404 requires HHS to develop and submit a report to congressional committees of jurisdiction that identifies best practices related to using behavioral and mental health intervention teams in educational settings.

Chapter 2 – Continuing Systems of Care for Children

Section 1411. Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances.

Section 1411 reauthorizes the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances Grants.

Section 1412. Substance Use Disorder Treatment and Early Intervention Services for Children and Adolescents.

Section 1412 reauthorizes the Enhancement and Expansion of Treatment and Recovery Services for Adolescents, Transitional Aged Youth, and their Families (Youth and Family TREE) Grants.

Chapter 3 – Garrett Lee Smith Memorial Reauthorization

Section 1421. Suicide prevention technical assistance center.

Section 1421 reauthorizes the Suicide Prevention Resource Center.

Section 1422. Youth suicide early intervention and prevention strategies.

Section 1422 reauthorizes the State and Tribal Youth Suicide Prevention and Early Intervention Grants Program.

Section 1423. Mental health and substance use disorder services for students in higher education.

Section 1423 reauthorizes the Mental Health Youth Suicide Prevention Campus Grants.

Section 1424. Mental and behavioral health outreach and education at institutions of higher education.

Section 1424 reauthorizes and renames the Mental and Behavioral Health Public Outreach and Education at Institutions of Higher Education program and specifies that representatives from minority-serving institutions and community colleges be included within the program's working group.

Chapter 4 – Media and Mental Health

Section 1431. Study on the effects of smartphone and social media use on adolescents.

Section 1431 directs the Secretary of HHS to, as appropriate, conduct or support research on smartphone and social media use by adolescents and the effects of such use on their health and development, including any disparities in mental health outcomes of rural, minority, or other underserved populations.

Section 1432. Research on the health and development effects of media and related technology on infants, children, and adolescents.

Section 1432 requires the National Institutes of Health (NIH) to fund conduct or support research regarding the effects of media on infants, children, and adolescents. Such research must, as appropriate, examine the impacts of multimedia (e.g., social media, television, video games) on cognitive, physical, and social development.

Subtitle E – Miscellaneous Provisions

Section 1501. Limitations on authority.

Section 1501 limits the authority of the Secretary of HHS, in carrying out any SAMHSA program authorized or amended by this title from allocating funding, or requiring award recipients to prioritize, dedicate, or allocate funding, without consideration of the incidence, prevalence, or determinations of mental health or substance use issues, unless such allocation or requirement is consistent with statute, regulation, or other federal law.

TITLE II – PREPARING FOR AND RESPONDING TO EXISTING VIRUSES, EMERGING NEW THREATS, AND PANDEMICS

Subtitle A – Strengthening Federal and State Preparedness

Chapter 1 – Federal Leadership and Accountability

Section 2101. Appointment and authority of the Director of the Centers for Disease Control and Prevention.

Section 2101 requires Senate confirmation of the Director of the CDC beginning on January 20, 2025, and establishes specific functions of the Director. It also requires an agency-wide strategic plan to be developed every four years that describes CDC's priorities and objectives, the capabilities that need to be developed to achieve these objectives, and how CDC will leverage strategic communications, external partnerships, and coordination with other agencies.

Section 2102. Advisory Committee to the Director of the Centers for Disease Control and Prevention.

Section 2102 requires the CDC Director to establish or maintain an advisory committee within the CDC to advise the Director on policy and strategies that enable the agency to fulfill its mission, which may include informing strategic planning and advising on prioritization and performance metrics. The advisory committee shall consist of up to 15 non-federal members in relevant fields of expertise, of which 12 shall be appointed by the Director from relevant health disciplines and three shall be appointed by the Secretary from the general public, such as individuals with expertise in public policy, public relations, or economics.

Section 2103. Public health and medical preparedness and response coordination.

Section 2103 provides additional authority for the Secretary of HHS to coordinate with, and request support from, other departments and agencies in leading the federal public health and medical response to a public health emergency and includes a GAO study on the use of existing authorities for related interagency agreements. It also clarifies the role and responsibilities of the Assistant Secretary for Preparedness and Response in public health and medical preparedness and response activities. The section requires national- and state-level full-scale exercises every five years to identify and address gaps in preparedness and response, including the ability of the Strategic National Stockpile (SNS) to appropriately support the response to a large-scale, long-term public health emergency. Finally, the section requires HHS to submit an annual report to Congress on the state of public health preparedness

Section 2104. Office of Pandemic Preparedness and Response Policy.

Section 2104 establishes an Office of Pandemic Preparedness and Response Policy within the Executive Office of the President, led by a Director appointed by the President, to advise on pandemic preparedness and response policy and to support coordination and communication within the federal government related to preparedness and response. It also establishes an Industry Liaison within the Office to work with affected industries during responses. The section requires the Director to develop a Preparedness Outlook Report every five years on situations and conditions that warrant significant attention related to preparedness and response including opportunities and challenges related to medical countermeasures. It also requires the Director to conduct a review of existing federal policies to identify gaps and inefficiencies related to preparedness and response and submit to Congress a report, which shall be updated every two years, describing the findings of the review, current and emerging threats, federal roles and responsibilities, and any plans and associated barriers to address such findings.

Chapter 2 – State and Local Readiness

Section 2111. Improving State and local public health security.

Section 2111 updates the Public Health Emergency Preparedness (PHEP) cooperative agreements to ensure coordination between health departments and other state agencies to improve preparedness and response planning. It also requires PHEP recipients to provide

technical assistance to agencies and other entities in which there is an increased risk of infectious disease outbreaks, such as residential care facilities and group homes, in order to improve preparedness and response.

Section 2112. Supporting access to mental health and substance use disorder services during public health emergencies.

Section 2112 directs SAMHSA to support continued access to mental health and substance use disorder services during public health emergencies. It requires SAMHSA's Strategic Plan and Biennial Report to Congress to include the agency's activities to support continued access to mental health and substance use disorder services during public health emergencies, including for at-risk individuals. It also requires the Assistant Secretary to submit a report to Congress, based on feedback from SAMHSA's advisory councils, describing steps SAMHSA can take to (1) improve the provision of mental health and substance use disorder services as part of the medical response to a public health emergency and (2) improve the provision of such services during public health emergencies. The section also requires GAO to report on SAMHSA's work during the COVID-19 pandemic.

Section 2113. Trauma care reauthorization.

Section 2113 reauthorizes programs to improve the provision of trauma care, including in rural areas, by increasing coordination and situational awareness within emergency medical and trauma systems and identifying and disseminating best practices. It directs the Administration for Strategic Preparedness and Response (ASPR) to support the improvement and coordination of emergency medical services and trauma care during a public health emergency, which may include issuing guidance to support patient movement and triage and disseminating best practices and related information.

Section 2114. Assessment of containment and mitigation of infectious diseases.

Section 2114 requires a GAO report on state and territorial preparedness and response plans to mitigate the spread of COVID-19 and technical assistance provided by the federal government to support such mitigation efforts over the course of the pandemic.

Section 2115. Consideration of unique challenges in noncontiguous states and territories.

Section 2115 requires the Secretary of HHS to conduct quarterly meetings, as applicable, with noncontiguous states and territories during public health emergencies impacting such jurisdictions to help address any associated unique public health challenges.

Subtitle B – Improving Public Health Preparedness and Response Capacity

Chapter 1 –Improving Public Health Emergency Responses

Section 2201. Addressing factors related to improving health outcomes.

Section 2201 authorizes a grant program to support evidence-based or evidence-informed projects to improve health outcomes by improving the capacity of grant recipients to address factors that contribute to negative health outcomes in communities. It requires the Secretary to submit a report to Congress on activities funded, and requires a GAO study on the outcomes and effectiveness of this program and coordination with related HHS programs

Chapter 2 – Improving State, Local, and Tribal Public Health Data

Section 2211. Modernizing State, local, and Tribal biosurveillance capabilities and infectious disease data.

Section 2211 improves collaboration among federal departments, implements lessons learned from previous public health emergencies, and identifies steps the Secretary will take to further develop and integrate infectious disease detection, support rapid, accurate, and secure sharing of laboratory test results during a public health emergency, and improve coordination with public health officials, clinical laboratories, and other entities with expertise in public health surveillance.

Section 2212. Genomic sequencing, analytics, and public health surveillance of pathogens.

Section 2212 requires the Secretary to issue guidance to support collaboration related to genomic sequencing of pathogens. It directs the CDC Director, in consultation with the Director of NIH and heads of other departments and agencies, to strengthen and expand activities related to advanced molecular detection and genomic sequencing of pathogens, including the use of genomic sequencing technologies to better anticipate and prepare for pathogen mutations, enhancing the sequencing and analytics capabilities of the public health workforce, and continuing partnerships with public and private entities for these activities. It also codifies Centers of Excellence to support innovation in pathogen genomics and molecular epidemiology.

Section 2213. Supporting State, local, and Tribal public health data.

Section 2213 directs the Secretary to help states, localities, territories, and Tribes better leverage public health data that is deidentified as applicable to support public health responses, such as by improving data use agreements between relevant federal agencies and other public and private entities. It also authorizes a program to develop best practices to improve the quality and completeness of demographic data to support public health responses.

Section 2214. Epidemic forecasting and outbreak analytics.

Section 2214 authorizes the CDC Director to continue activities related to the development of capabilities for the analysis, modeling, and forecasting of public health emergencies and infectious disease outbreaks, including by leveraging the capabilities of public and private entities. It also requires the Secretary to issue an annual report on these activities for the next five years

Section 2215. Public health data transparency.

Section 2215 directs HHS to issue a report within one year on current practices and objectives, and associated progress and challenges, related to CDC collection and dissemination of public health data during public health emergencies.

Section 2216. GAO report on public health preparedness, response, and recovery data capabilities.

Section 2216 requires a GAO report within 18 months of enactment on the efforts of HHS to ensure that public health data capabilities are not unnecessarily duplicative, overlapping, or fragmented and protect individual privacy.

Chapter 3 – Revitalizing the Public Health Workforce

Section 2221. Improving recruitment and retention of the frontline public health workforce.

Section 2221 reauthorizes the Public Health Workforce Loan Repayment Program to provide loan repayment to individuals in exchange for working in a state, Territorial, Tribal, or local public health department. It establishes a Bio-Preparedness Workforce Pilot Program to provide for loan repayment for health professionals with expertise in infectious diseases and emergency preparedness and response activities to ensure an adequate supply of such professionals. It also requires GAO to conduct an evaluation of the public health workforce in the U.S. during the COVID-19 pandemic.

Section 2222. Awards to support community health workers and community health.

Section 2222 reauthorizes a community health worker program to promote healthy behaviors and outcomes in medically underserved communities through the use of community health workers. It directs funds to be used to recruit, hire, train, and retain community health workers; support community health workers in providing education and outreach in their communities; and to educate community members. It also requires GAO to submit a report to Congress on the outcomes and effectiveness of the program, as well as coordination with programs operated by HRSA.

Section 2223. Improving public health emergency response capacity.

Section 2223 improves HHS' ability to quickly mount an initial response to a public health emergency by allowing the Secretary to directly appoint up to 500 individuals to preparedness and response positions within HHS. It also requires an annual report to Congress and a GAO study on the use of this authority.

Section 2224. Increasing educational opportunities for allied health professions.

Section 2224 provides authority to the HRSA to increase educational opportunities in physical therapy, occupational therapy, respiratory therapy, audiology, and speech-language pathology professions, for individuals from disadvantaged backgrounds or individuals who are underrepresented in such professions.

Section 2225. Public Health Service Corps annual and sick leave.

Section 2225 allows for regulations to be updated to authorize accumulated annual leave up to 120 days for any commissioned officer of the Regular Corps or officer of the Ready Reserve Corps on active duty, consistent with the other uniformed services.

Section 2226. Leadership exchange pilot for public health and medical preparedness and response positions at the Department of Health and Human Services.

Section 2226 allows the Secretary to establish a voluntary program for mid-level and senior employees that have public health preparedness and response duties to participate in fellowships, interagency details, or placements in federal agencies or health departments for up to two years to support professional development. It requires a report to Congress on the number of individuals who participated, the types of placements in which they participated, an assessment of outcomes, and recommendations related to the continuation of the program.

Section 2227. Continuing educational support for health professionals serving in rural and underserved communities.

Section 2227 reauthorizes awards to community health centers and rural health clinics for accredited continuing medical education for their primary care providers. It supports access to

specialty care through existing service delivery locations and allows for clinical training components between primary care providers and clinical specialists.

Chapter 4 – Enhancing Public Health Preparedness and Response

Section 2231. Centers for public health preparedness and response.

Section 2231 reauthorizes a network of Centers for Public Health Preparedness and Response to: (1) translate research findings or strategies into evidence-based practices to inform preparedness and response to public health emergencies; (2) improve awareness of these practices and other relevant scientific or public health information among health care and public health professionals and the public; (3) expand activities, such as through partnerships, to improve public health preparedness and response; and (4) provide technical assistance and expertise to health departments, as appropriate.

Section 2232. Vaccine distribution plans.

Section 2232 clarifies that existing authorities of the Secretary to track the initial distribution of federally purchased vaccines to inform decision-makers during an influenza pandemic also apply to other pandemics.

Section 2233. Coordination and collaboration regarding blood supply.

Section 2233 directs the Secretary of HHS to ensure coordination and collaboration between relevant federal departments and agencies related to the safety and availability of the blood supply.

Section 2234. Supporting laboratory capacity and international collaboration to address antimicrobial resistance.

Section 2234 directs the CDC Director to leverage existing CDC-supported laboratory capacity to support the detection of antibiotic resistance and other laboratory activities, including identifying and monitoring the emergence of antimicrobial-resistant pathogens, providing technical assistance to other laboratories when requested, and supporting the diagnosis of pathogens and determining susceptibility of pathogens to treatments. It requires the Secretary to support activities to address antimicrobial resistance internationally, including by supporting research and providing technical assistance related to antimicrobial resistant infection and control activities.

Section 2235. One Health framework.

Section 2235 requires the CDC Director, in coordination with other federal departments and agencies, to develop or update a One Health framework to address zoonotic diseases and advance public health preparedness. It requires the CDC Director to coordinate with the Secretaries of Agriculture and Interior to strengthen collaboration regarding One Health activities.

Section 2236. Supporting children during public health emergencies.

Section 2236 requires the National Advisory Committee on Children and Disasters to provide advice and consultation on the continuity of care and education for all children, and supporting parents and caregivers, during all-hazards emergencies. It amends the composition of the

Advisory Committee to include at least four non-Federal members representing childcare settings, state or local educational agencies, individuals with expertise in children with disabilities, and parents.

Subtitle C – Accelerating Research and Countermeasure Discovery

Chapter 1 – Fostering Research and Development and Improving Coordination

Section 2301. Research centers for pathogens of pandemic concern.

Section 2301 requires the National Institute of Allergy and Infectious Diseases (NIAID), in collaboration with ASPR and Biodefense Advanced Research and Development Authority (BARDA), to establish or continue a multidisciplinary research program with research centers to advance the discovery and preclinical development of antivirals and other medical products to combat priority virus families and other viral pathogens with the significant potential to cause a pandemic.

Section 2302. Improving medical countermeasure research coordination.

Section 2302 requires the NIH Director to consult with ASPR, BARDA, CDC, and the heads of other federal agencies and offices regarding research needs to advance medical countermeasures for any agent or toxin that may cause a public health emergency, or other research needs related to emerging public health threats.

Section 2303. Accessing specimen samples and diagnostic tests.

Section 2303 requires HHS to make public policies and procedures related to public and private entities accessing specimens of pathogens to support research and development of medical countermeasures, such as tests. It requires the Secretary to issue guidance on methods for requesting samples and additional considerations for sample access and availability. The section also allows HHS to contract with public and private entities to improve the rapid development and availability of diagnostic tests to support immediate public health response activities to more quickly address emerging infectious diseases.

Section 2304. National Academies of Sciences, Engineering, and Medicine study on natural immunity in relation to the COVID–19 pandemic.

Section 2304 requires a National Academies study on the current scientific evidence on the durability of immunity to COVID-19, including an assessment of the durability of immunity resulting from SARS–CoV–2 infection, COVID–19 vaccination, or both, as well as a summary of international studies on the subject.

Chapter 2 – Improving Biosafety and Biosecurity

Section 2311. Improving control and oversight of select biological agents and toxins.

Section 2311 reauthorizes the HHS provisions of the Federal Select Agents Program to ensure appropriate training of personnel working with or around select agents and those with administrative or oversight responsibilities related to Select Agent Program-registered facilities. It also enhances reporting requirements to Congress regarding releases, losses, and thefts of select agents from federal laboratories.

Section 2312. Strategy for Federal high-containment laboratories.

Section 2312 requires the Director of the Office of Science and Technology Policy (OSTP) to establish a strategy for the maintenance and coordination of Biosafety Level 3 and 4 laboratories that are owned by the federal government or were established through federal funds.

Section 2313. National Science Advisory Board for Biosecurity.

Section 2313 codifies the National Science Advisory Board for Biosecurity (NSABB), including ex officio members from other departments, and tasks the NSABB with providing departments and agencies with technical advice, guidance, and recommendations related to biosafety and biosecurity oversight of biomedical research. It allows the NSABB to consider strategies to improve the safety and security of research, including through leveraging new technologies and supporting education and outreach to individuals with respect to safety and security risks associated with such research. It also clarifies that changes made under this section shall not apply until work of the NSABB that is ongoing on the date of enactment is completed to ensure that these changes do not disrupt ongoing activities.

Section 2314. Research to improve biosafety.

Section 2314 directs HHS to conduct or support research to improve the safe conduct of biomedical research involving pathogens of pandemic potential or select agents. It requires HHS to submit a report to Congress on any research conducted or supported under this section, any relevant findings, and any steps HHS is taking to disseminate such findings to support the reduction of risks associated with such research.

Section 2315. Federally-funded research with enhanced pathogens of pandemic potential.

Section 2315 directs OSTP to review existing federal policies on research proposed for federal funding that may be reasonably anticipated to involve the creation, transfer, or use of pathogens of pandemic potential, establish or update a federal policy for the consistent review and oversight of such research, and update such policy every four years. It also prohibits HHS funding of certain types of research conducted by foreign entities at facilities in countries of concern until the policy review required by this section is complete.

Chapter 3 – Preventing Undue Foreign Influence in Biomedical Research

Section 2321. Foreign talent recruitment programs.

Section 2321 requires NIH extramural researchers to disclose participation in foreign talent programs, which includes providing to NIH copies of all grants, contracts, or other agreements related to their participation in such programs, consistent with the CHIPS and Science Act of 2022.

Section 2322. Securing identifiable, sensitive information and addressing other national security risks related to research.

Section 2322 requires the HHS Secretary to consult with national security experts to ensure that HHS biomedical research involving human genomic information appropriately considers national security risks. It requires the Secretary to develop a risk framework for assessing and managing such national security risks and develop and implement controls related to the risk framework to ensure appropriate data access and involve individuals with national security expertise in the evaluation of certain data access requests. It also directs the Secretary to update

human genomic data access and sharing policies related to human genomic data based on emerging national security threats and requires a briefing to appropriate congressional committees on the activities carried out under this section.

Section 2323. Duties of the Director.

Section 2323 requires the NIH Director to consult with HHS Office of National Security, the HHS Assistant Secretary for Preparedness and Response, and other relevant agencies regarding HHS biomedical research that may be relevant to national security matters. It requires the NIH Director to ensure that recipients of NIH awards and related entities adhere to appropriate technology practices to secure identifiable, sensitive information. It also requires the NIH Director to ensure that recipients of NIH awards are in compliance with the terms and conditions of such award, which may include activities to support awareness of, and compliance with, such terms and conditions by any subrecipients of the award.

Section 2324. Protecting America's biomedical research enterprise.

Section 2324 requires the HHS Secretary to consult with the National Security Advisor, the Director of National Intelligence, the Director of the FBI, and the heads of other relevant agencies, research institutions and advocacy groups, to (1) identify ways to improve the protection of intellectual property and other types of sensitive information in biomedical research, (2) develop strategies to address national security threats in biomedical research, including through foreign talent programs, (3) make recommendations to protect proprietary information from potential misuse that may pose national security risks, and (4) develop a framework to identify areas of federally supported biomedical research that are emerging areas of interest for adversaries and may pose national security risks, if subjected to foreign influence. It requires the HHS Secretary to regularly review policies made under this section and provide updates as appropriate, as well as submit a report to the President and relevant congressional committees that addresses the findings and recommendations of this section.

Section 2325. GAO Study.

Section 2325 authorizes GAO to assess the extent to which HHS funds are used for human genomic sequencing services or genetic services provided by entities, or subsidiaries of such entities, organized under the laws of a country or countries of concern, as determined by the Director of National Intelligence or the head of another federal departments and agencies. It requires GAO to make recommendations to address any vulnerabilities identified and submit a report to Congress no later than two years after enactment.

Section 2326. Report on progress to address undue foreign influence.

Section 2326 requires the HHS Secretary to submit an annual report to Congress on actions taken to address cases of research misconduct related to foreign influence; document the number of potential cases reported to NIH, cases referred to law enforcement agencies, and enforcement actions taken; and prevent, address, and mitigate research misconduct related to foreign influence.

Chapter 4 – Advanced Research Projects Authority for Health

Section 2331. Advanced Research Projects Agency–Health.

Section 2331 establishes the Advanced Research Projects Agency for Health (ARPA–H) within NIH to accelerate innovation in health and medicine by investing in novel, broadly applicable,

high-risk, high-reward research projects. This section requires the President to appoint the Director of ARPA–H, who shall report to the Secretary of HHS. The provision provides a number of authorities and flexibilities related to personnel, hiring, funding mechanisms, facilities, peer review, annual reporting, and evaluations, among other components.

Subtitle D—Modernizing and Strengthening the Supply Chain for Vital Medical Products

Section 2401. Warm base manufacturing capacity for medical countermeasures.

Section 2401 directs BARDA to support the establishment and maintenance of warm-base domestic manufacturing surge capacity and capabilities so that medical countermeasures can be rapidly manufactured when needed to respond to public health emergencies. It improves coordination and communication between private sector partners, BARDA, and the Food and Drug Administration (FDA) to ensure that this manufacturing capacity and capabilities are appropriately maintained, follow good manufacturing practices, and any related challenges are identified and addressed. It amends a previously required GAO report to also consider plans for the sustainment of this manufacturing capacity and how BARDA is assessing the ability of its award recipients to rapidly manufacture medical countermeasures.

Section 2402. Supply chain considerations for the Strategic National Stockpile.

Section 2402 amends the Strategic National Stockpile (SNS) Annual Threat-Based Review to include an assessment of the supply chains and any vulnerabilities for products that SNS plans to purchase during the period covered by the Review.

Section 2403. Strategic National Stockpile equipment maintenance.

Section 2403 clarifies that, as part of the procedures of the SNS, the Secretary should ensure that items in the stockpile are in working condition so they can be readily deployed when needed.

Section 2404. Improving transparency and predictability of processes of the Strategic National Stockpile.

Section n2404 requires the Secretary to issue guidance on how states, territories, and Tribes can access the SNS and other countermeasures, and factors the Secretary considers when making decisions related to product distribution. It requires the Secretary to convene annual meetings with public health officials, the private sector, and other stakeholders to share information around the maintenance and use of the SNS and future procurement plans.

Section 2405. Improving supply chain flexibility for the Strategic National Stockpile.

Section 2405 authorizes the Secretary to enter into contracts to enhance surge capacity and supply chain flexibility for supplies intended for the SNS through vendor-managed inventory and warm-base domestic manufacturing capacity arrangements. It requires a report to Congress on the use of these authorities.

Section 2406. Reimbursement for certain supplies.

Section 2406 authorizes the Secretary to sell excess products from the SNS to other entities when the cost of maintaining these products in the SNS is not appropriate to meet the needs of the SNS and the transfer of these products does not compromise national security. It requires a report to Congress after two years on the use of this authority.

Section 2407. Action reporting on stockpile depletion.

Section 2407 requires the Secretary to report regularly to Congress on SNS content deployment and replenishment plans during a public health emergency.

Section 2408. Provision of medical countermeasures to Indian programs and facilities.

Section 2408 clarifies that when HHS deploys products to states to respond to a public health emergency, the Secretary should also make these products directly available to Tribes that are affected by the public health emergency.

Section 2409. Grants for State strategic stockpiles.

Section 2409 authorizes a pilot program to support states in establishing, expanding, or maintaining stockpiles of medical supplies needed to respond to a public health emergency or disaster. It requires HHS to issue guidance to all states within 180 days on best practices and strategies for maintaining stockpiles, such as the types of products that may be appropriate to maintain in a stockpile, use of vendor-managed inventory arrangements, and purchasing products made in America. It also requires a report to Congress and GAO report assessing the impacts of the pilot program and technical assistance provided by HHS to states on stockpiling

Section 2410. Study on incentives for domestic production of generic medicines.

Section 2410 directs the HHS Assistant Secretary for Planning and Evaluation to conduct a study on the feasibility and utility of providing incentives for increased domestic production and capacity of specified generic medicines and their active pharmaceutical ingredients, which may include through applicable nonprofit or for-profit entities.

Section 2411. Increased manufacturing capacity for certain critical antibiotic drugs.

Section 2411 allows the Secretary of HHS to award new contracts for up to three years after the date of enactment to eligible entities to increase the domestic manufacturing capacity of certain antibiotic drugs with identified supply vulnerabilities, or the active pharmaceutical ingredient or key starting material of such antibiotic drugs. It requires the Secretary to report to Congress no later than two years after enactment on activities supported through this program.

Subtitle E – Enhancing Development and Combating Shortages of Medical Products

Chapter 1 – Development and Review

Section 2501. Accelerating countermeasure development and review.

Section 2501 codifies FDA's successful Coronavirus Treatment Acceleration Program to ensure expedited action for the development and review of countermeasures during future public health emergencies.

Section 2502. Third party test evaluation during emergencies.

Section 2502 clarifies FDA's authority to consult with third parties to evaluate and make recommendations with respect to in vitro diagnostic tests offered for use during a public health emergency, which will enable FDA to prioritize its response efforts and surge where needed during future emergencies. It also requires FDA to issue guidance to facilitate such consultations with third parties.

Section 2503. Platform technologies.

Section 2503 creates a platform technology designation program to support the development and review of new treatments and countermeasures that use cutting-edge, adaptable platform technologies that can be incorporated or used in more than one drug or biological product. It requires FDA to issue guidance on the implementation of the new designation.

Section 2504. Increasing EUA decision transparency.

Section 2504 provides FDA with authority to share more safety and effectiveness information with the public about products authorized for emergency use.

Section 2505. Improving FDA guidance and communication.

Section 2505 requires publication of a report identifying best practices across FDA and other applicable agencies for the development, issuance, and use of guidance documents and for communications with product sponsors and other stakeholders, and a plan for implementing such best practices. It requires FDA to publish a report on the agency's best practices for communicating with medical product sponsors and other stakeholders, and a plan for implementing such best practices.

Chapter 2 – Mitigating Shortages

Section 2511. Ensuring registration of foreign drug and device manufacturers.

Section 2511 clarifies that all foreign drug and medical device establishments that manufacture or process drugs or medical devices intended to be marketed in the United States must register with FDA, including products manufactured at an establishment that are not directly imported into the United States.

Section 2512. Extending expiration dates for certain drugs.

Section 2512 requires FDA to issue or revise guidance to address recommendations for drug sponsors regarding the submission of stability data in applications and establishing the longest feasible expiration dates scientifically supported by such data, in order to help mitigate or prevent potential drug shortages. It requires FDA to issue a report on the number and type of drugs for which the Secretary has requested a labeling change to extend the expiration date and information related to the circumstances of such requests.

Section 2513. Combating counterfeit devices.

Section 2513 strengthens FDA enforcement authority against, and increases the penalties for, selling counterfeit medical devices, including personal protective equipment, in the United States.

Section 2514. Preventing medical device shortages.

Section 2514 clarifies that FDA may receive voluntary notifications of supply disruptions of certain critical medical devices, and requires FDA to issue guidance to facilitate such voluntary notifications.

Section 2515. Technical corrections.

Section 2515 includes technical corrections to the CARES Act, and to the Food, Drug, and Cosmetic Act related to the CARES Act.

TITLE III – FOOD AND DRUG ADMINISTRATION

Subtitle A – Reauthorizations

Section 3101. Reauthorization of the critical path public-private partnership.

Section 3101 reauthorizes the Critical Path Public-Private Partnership.

Section 3102. Reauthorization of the best pharmaceuticals for children program.

Section 3102 reauthorizes programs that require the NIH to identify the drugs of highest priority for study in pediatric populations, publish a list of drugs/needs in pediatric therapeutics, and fund studies in the prioritized areas.

Section 3103. Reauthorization of the humanitarian device exemption incentive.

Section 3103 reauthorizes the Humanitarian Device Exemption incentive, which exempts the effectiveness requirement for medical devices intended to benefit patients in the treatment or diagnosis of rare diseases through October 1, 2027.

Section 3104. Reauthorization of the pediatric device consortia program.

Section 3104 reauthorizes the Pediatric Device Consortia Program, which supports the continued development of medical devices intended specifically for children.

Section 3105. Reauthorization of provision pertaining to drugs containing single enantiomers.

Section 3105 reauthorizes the provision that allows drugs containing single enantiomers to be marketed under a different name than the racemic mixture through October 1, 2027, and makes a technical correction.

Section 3106. Reauthorization of certain device inspections.

Section 3106 reauthorizes a third-party accreditation program for certain medical device inspections through October 1, 2027.

Section 3107. Reauthorization of orphan drug grants.

Section 3107 reauthorizes grants for the development of drugs for rare diseases or conditions. It also allows grants to be used for the development of regulatory science pertaining to chemistry, manufacturing, and controls of individualized medical products to treat rare diseases or conditions.

Section 3108. Reauthorization of reporting requirements related to pending generic drug applications and priority review applications.

Section 3108 reauthorizes reporting requirements related to pending generic drug applications and priority review applications through October 1, 2027.

Section 3109. Reauthorization of third-party review program.

Section 3109 reauthorizes a third-party accreditation program for the review and classification of certain medical devices through October 1, 2027.

Subtitle B – Drugs and Biologics

Chapter 1 – Research, Development, and Competition Improvements

Section 3201. Prompt reports of marketing status by holders of approved applications for biological products.

Section 3201 aligns certain reporting requirements for biologics with the reporting requirements for drugs by requiring holders of approved biologics license applications to report to FDA when withdrawing a product from the market and requiring holders of approved biologics license applications to submit a one-time report to confirm that their products listed in the Purple Book are still available for sale. It also requires FDA to update the Purple Book for changes related to the status of biologics.

Section 3202. Improving the treatment of rare diseases and conditions.

Section 3202 requires FDA to submit a report summarizing its activities relating to designating, approving, and licensing drugs used to treat rare diseases no later than September 30, 2026. It requires FDA to finalize the draft guidance document entitled "Rare Diseases: Common Issues in Drug Development." It also requires the Secretary to enter into a contract with the National Academies of Sciences, Engineering, and Medicine to study processes for evaluating the safety and efficacy of drugs for rare diseases in the United States and the European Union. The section also requires FDA to convene one or more public meetings to solicit input from stakeholders regarding approaches to improving engagement with rare disease condition patients, patient groups, and experts. It also adds the science of small population studies as a topic for consultation with external experts on issues related to the review of drugs for rare diseases. Finally, it requires the GAO to conduct a study on FDA's activities regarding the review of drugs for rare diseases.

Section 3203. Emerging technology program.

Section 3203 authorizes the Emerging Technology Program at FDA, a collaborative program wherein industry representatives, academics, and others can meet with FDA officials to support the adoption and improve the development of innovative approaches to drug design and manufacturing. It requires FDA to issue guidance regarding requirements related to such approaches and report to Congress regarding allocation of funds and staff utilization in this program.

Section 3204. National Centers of Excellence in Advanced and Continuous Pharmaceutical Manufacturing.

Section 3204 authorizes FDA to award grants to institutions of higher education designated as a National Center of Excellence in Advanced and Continuous Pharmaceutical Manufacturing to support the advancement and development of continuous and advanced pharmaceutical manufacturing technologies and practices.

Section 3205. Public workshop on cell therapies.

Section 3205 requires FDA to convene a public workshop on best practices on generating scientific data necessary to further facilitate development of certain human cell-, tissue-, and cellular-based medical products, and the latest scientific information about such products.

Section 3206. Clarifications to exclusivity provisions for first interchangeable biosimilar biological products.

Section 3206 clarifies FDA's authority to tentatively approve a subsequent interchangeable biosimilar biological product while a first interchangeable product's period of exclusivity is pending. It clarifies that multiple interchangeable biosimilar biological products can share a period of first interchangeable exclusivity if they are approved on the same day and otherwise qualify for exclusivity.

Section 3207. GAO report on nonprofit pharmaceutical organizations.

Section 3207 requires GAO, not later than two years after the enactment, to submit a report on what is known about nonprofit pharmaceutical organizations, including the impact of such organizations on the development, availability, and cost of prescription drugs, and any challenges to manufacturing or other operations.

Section 3208. Rare disease endpoint advancement pilot program.

Section 3208 establishes a rare disease endpoint advancement pilot program to implement procedures to provide increased interaction with sponsors of rare disease drug development programs for purposes of advancing the development of efficacy endpoints for drugs intended to treat rare diseases. It requires FDA to hold public workshops and report to Congress regarding this pilot, which sunsets on October 1, 2027.

Section 3209. Animal testing alternatives.

Section 3209 clarifies that drug application sponsors can use alternative testing methods to animal testing in evaluating the safety and effectiveness of human drugs. It clarifies that sponsors of biosimilar applications can demonstrate biosimilarity to a reference product using alternative testing methods to animal studies.

Section 3210. Modernizing accelerated approval.

Section 3210 requires FDA to specify conditions for required postapproval studies for drugs approved under accelerated approval, which may include enrollment targets and milestones, including the target date for study completion, by the time the drug is approved. It authorizes FDA to require postapproval studies to be underway at the time of approval or within a specified time period following approval for such drugs, and requires FDA to explain any instances where it does not require such studies. The section clarifies that existing authority to withdraw approvals where sponsors fail to conduct studies with due diligence applies with respect to the approval conditions and streamlines the procedures for withdrawal of approval. To withdraw an accelerated approval, it requires FDA to provide an explanation for the withdrawal, an opportunity for written appeal, a meeting with the Commissioner or their designee, responses to public comment, and, upon request, an advisory committee meeting if there was not previously one on the withdrawal. It also requires more frequent reports on postapproval study progress and lists failure to file reports and conduct accelerated approval postapproval studies with due diligence as a prohibited act. The section also requires FDA to report to Congress on the use of real world evidence to support postapproval studies and issue guidance on novel surrogate endpoints and clinical trial designs. Finally, it requires the Secretary to establish an intra-agency coordinating council within FDA to ensure the consistent and appropriate use of the accelerated approval pathway.

Section 3211. Antifungal research and development.

Section 3211 requires the Secretary to issue guidance for industry to assist entities seeking approval or licensure for antifungal therapies intended to treat coccidioidomycosis, commonly known as Valley Fever. It requires FDA to finalize guidance not later than 18 months after the close of the public comment period on the draft guidance and to hold a public workshop to assist entities developing preventative vaccines for fungal infections and Valley Fever.

Section 3212. Advancing qualified infectious disease product innovation.

Section 3212 allows a biological product to qualify as a Qualified Infectious Disease Product (QIDP) under Section 505E of the Federal Food, Drug, and Cosmetic Act (FFDCA), which renders it eligible for fast-track designation, and provides for priority review for the first application for an innovative biological antifungal or antibiotic QIDP that requires clinical data to demonstrate safety or effectiveness. This section does not extend QIDP exclusivity to biological products.

Section 3213. Advanced manufacturing technologies designation program.

Section 3213 requires FDA to initiate a program for designating methods of manufacturing as advanced manufacturing technologies. A method of manufacturing is eligible for designation if such method both: incorporates a novel technology or uses an established technology in a novel way and will substantially improve the manufacturing process and maintain equivalent or superior drug quality. Designated technologies qualify for expedited application development and review and allow the holder of such designation, or a person authorized by the designation holder, to reference or rely upon, in a drug or biologic application, data and information about the designated technology for use in manufacturing drugs in the same context of use for which FDA granted the designation. It requires FDA to hold a public meeting, issue guidance, and report to Congress regarding this program, which sunsets on October 1, 2032.

Chapter 2 – Transparency, Program Integrity, and Regulatory Improvements

Section 3221. Safer disposal of opioids.

Section 3221 facilitates the disposal of opioids and other drugs with serious risks by allowing FDA to require these drugs be dispensed to patients with safe, in-home disposal systems. It also clarifies that in-home disposal systems are eligible to be dispensed to patients.

Section 3222. Therapeutic equivalence evaluations.

Section 3222 requires FDA to make timely therapeutic equivalence evaluations for follow-on drugs approved through the 505(b)(2) pathway that have similar formulations as other approved products. It also facilitates the availability of lower-cost drugs available for automatic substitution at the pharmacy.

Section 3223. Public docket on proposed changes to third-party vendors.

Section 3223 requires FDA to provide a public comment period regarding patient access and provider administration when a proposed modification to an approved risk evaluation and mitigation strategy (REMS) related to a change in third-party vendor is reviewed under section 505-1(h) of the FFDCA. This section makes clear that it shall not delay any agency action on any modification to a REMS.

Section 3224. Enhancing access to affordable medicines.

Section 3224 provides that a generic drug is eligible for approval notwithstanding differences between its proposed labeling and that of the listed drug due to revisions made to the labeling of the listed drug approved by FDA within 90 days of when the generic application is otherwise eligible for approval. It preserves the provisions requiring that the revisions not be to the "Warnings" section of the labeling. The generic sponsor must submit revised labeling within 60 days of approval, and otherwise meet applicable requirements for approval.

Subtitle C – Medical Devices

Section 3301. Dual submission for certain devices.

Section 3301 provides that sponsors of diagnostic tests that have been deemed to be Clinical Laboratory Improvement Amendments (CLIA)-waived under section 564(m) of the FFDCA as part of a COVID-19 emergency use authorization that submit requests for de novo classification of their test under section 513(f)(2) of the FFDCA may submit such request together with sufficient information to enable FDA to determine whether the test satisfies the criteria for CLIA categorization under section 353(d)(3) of the Public Health Service Act in a single submission.

Section 3302. Medical Devices Advisory Committee meetings.

Section 3302 requires the Medical Devices Advisory Committee to meet at least once a year through 2027 to provide FDA advice on topics related to medical devices in pandemic preparedness and response, including issues related to in vitro diagnostics.

Section 3303. GAO report on third-party review.

Section 3303 requires GAO to report on the program for accredited third-party review of 510(k) premarket notifications for medical devices.

Section 3304. Certificates to foreign governments.

Section 3304 clarifies that FDA can issue Certificates to Foreign Governments for medical devices that are manufactured by a device establishment located outside of the United States, if the establishment is registered, the medical device is listed, the device is lawfully marketed and imported or offered for import into the United States.

Section 3305. Ensuring cybersecurity of medical devices.

Section 3305 requires manufacturers of cyber devices to develop processes to ensure their devices are secure, have plans to identify and address cybersecurity vulnerabilities, provide a software bill of materials in their labeling, and submit this information to FDA in any premarket submissions. It defines cyber devices as devices that have software, connect to the internet, and could be vulnerable to cybersecurity threats. The section authorizes FDA to deny 510(k) clearance if cyber security information is inadequate and to exempt types of devices from these requirements. It makes failure to comply with these requirements a prohibited act.

Section 3306. Bans of devices for one or more intended uses.

Section 3306 a]mends section 516 of the FFDCA to make clear that FDA is authorized to ban a medical device intended for a particular use. A ban may apply to devices intended for more than one use, but in a situation where there are devices with the same or similar technological characteristics and different intended uses, FDA may ban one use and not the other.

Section 3307. Third party data transparency.

Section 3307 requires FDA to make reasonable efforts to evaluate third-party research on medical devices that is used for regulatory decision-making; and to the extent practicable, provide the manufacturer(s) a summary of such information.

Section 3308. Predetermined change control plans for devices.

Section 3308 allows the Secretary to approve a predetermined change control plan submitted in an application or supplement that describes planned changes that may be made to the device if the device remains safe and effective. Allows cleared devices to submit a predetermined change control plan in a notification.

Section 3309. Small business fee waiver.

Section 3309 allows certain small businesses, defined as those that reported $1 million or less of gross receipts in its most recent federal income tax return for a taxable year, to qualify for a waiver of the Medical Device User Fee Amendments (MDUFA) annual establishment registration fees, if the Secretary finds that paying such fee represents a financial hardship.

Section 3401. Protecting infants and improving formula supply.

Section 3401 provides flexibility to FDA to waive the 90-day premarket submission requirement for infant formula when there is a supply disruption and apply a 30-day premarket submission requirement, which will remain in effect for 90 days beginning on the date that FDA distributes manufacturer notifications of infant formula shortages. Not later than one year after enactment, the section requires FDA to submit a report to Congress on the timelines related to FDA's review of premarket submissions for infant formula. It requires FDA to publish a list on the FDA website detailing which infant formula products may be appropriate substitutes for infant formula products in shortage that are relied on by individuals with amino-acid and metabolic conditions. It also requires FDA to participate in meetings with representatives from other countries to discuss harmonizing regulatory requirements for infant formula. The section also requires a study by the National Academies of Sciences, Engineering, and Medicine to report on challenges in supply, market competition, and regulation of infant formula in the United States, and any differences from infant formula marketed in the European Union. The section requires FDA to submit an annual report to Congress on infant formula submissions and inspections, to respond to a new submission for infant formula not later than 45 days after receiving such submission, and to review the required nutrients in infant formula every four years. It also requires infant formula manufacturers to submit a report to FDA promptly after the initiation of a recall, including a plan of actions the manufacturer will take to address the recall. It then requires FDA to submit the manufacturer's report to Congress, along with information concerning the current domestic supply of infant formula and, if the recall impacts over 10 percent of the domestic production of infant formula intended for sale in the United States, actions that FDA will take to work with the manufacturer or other manufacturers to increase production. The section requires FDA to ensure timely communication with manufacturers following an inspection and to reinspect facilities in a timely manner. It also requires FDA to conduct annual inspections of each manufacturer of infant formula in accordance with a risk-based approach and ensure coordination among the investigators and Center for Food Safety and Applied Nutrition. It also requires FDA, in consultation with the Secretary of Agriculture, to develop and issue within 90 days of enactment a national strategy on infant formula to increase the resiliency of the infant formula supply chain, protect against future contamination and other potential causes of shortages, and ensure parents and caregivers have access to formula and information they need.

The section requires manufacturers of critical foods to notify FDA of a permanent discontinuance in the manufacture or an interruption of the manufacture of such food that is likely to lead to a meaningful disruption in the supply of such food in the United States, and the reason for such discontinuance or interruption, as soon as practicable, but no later than five business days after such discontinuance or such interruption. It requires FDA to distribute information on such meaningful disruption to the Secretary of Agriculture and other appropriate entities. It also requires critical food manufacturers to develop, maintain, and implement, as appropriate, a redundancy risk management plan that identifies and evaluates risks to the supply of critical food for each establishment in which such food is manufactured. The section provides that if a person fails to submit a notification, FDA shall issue a letter to such person informing them of the failure, and then no later than 45 days after issuance of the letter, FDA may post the letter (and, at the request of such person, any response to the letter) on the FDA website.

Subtitle E – Cosmetics

Section 3501. Short title.

Section 3501 establishes the short title for Subtitle E as the "Modernization of Cosmetics Regulation Act of 2022."

Section 3502. Amendments to cosmetic requirements.

Section 3502 amends Chapter VI of the Federal Food, Drug, and Cosmetic Act to include new provisions for cosmetic products:

- Sec. 604. Definitions. Provides definitions for the terms adverse event, cosmetic product, facility, responsible person, and serious adverse event.

- Sec. 605. Adverse events. Requires responsible persons to submit reports of serious adverse events to FDA no later than 15 days after receiving the report. Requires responsible persons to maintain records related to each report of an adverse event for a period of six years (three years for small businesses), and authorizes FDA to have access to such records during an inspection. Provides that FDA may request a list of ingredients in specific fragrances or flavors in a cosmetic product, if FDA has reasonable grounds to believe that an ingredient or combination of ingredients has caused a serious adverse event.

- Sec. 606. Good manufacturing practice. Requires FDA to establish good manufacturing practice regulations. Such regulations shall be, to the extent practicable and appropriate, consistent with national and international standards, and may allow FDA to inspect records necessary to demonstrate compliance with good manufacturing practice regulations during an inspection. Requires FDA, in establishing good manufacturing practice regulations, to take into account the size and scope of businesses engaged in the manufacture of cosmetics, the public health risks of such cosmetics, and provide sufficient flexibility to be practicable for all sizes and types of manufacturing facilities subject to the regulations. Requires FDA to issue proposed regulations on good manufacturing practices no later than two years after enactment and issue final regulations no later than three years after enactment.

- Sec. 607. Registration and product listing. Requires persons that own or operate a manufacturing facility for cosmetic products to register each facility. Requires registrants to renew registrations biennially, and otherwise notify FDA within 60 days of any changes to

information registrants are required to submit as part of registration. Requires FDA to provide for an abbreviated registration renewal process for persons that own or operate facilities that have not been required to submit any changes since the time of last registration. Imposes requirements for the format and contents of registration. Requires responsible persons to submit a product listing for each cosmetic product. Requires responsible persons to submit product listings not later than one year after the date of enactment or, for a product first marketed after the date of enactment, within 120 days of marketing the product. Provides for an abbreviated renewal process for product listings for which there have been no change since the previous listing. Imposes requirements for the contents of listing, including the manufacturing facility registration number, a list of ingredients in the cosmetic product, and the product listing number. Provides that a single listing submission for a cosmetic product may include multiple cosmetic products with identical formulations or formulations that differ only with respect to colors, fragrances, flavors, or quantity of contents. Requires responsible persons to submit any updates to a product listing annually. Requires FDA to issue facility registration and product listing numbers at the time of initial registration or listing and clarifies that facility registration numbers shall be considered confidential commercial information. Provides that FDA may suspend the registration of a facility if FDA determines that a cosmetic product manufactured by a registered facility has a reasonable probability of causing serious adverse health consequences or death to humans and FDA has a reasonable belief that other products manufactured by the facility may be similarly affected. The suspension of cosmetics facilities is similar to the current process for food facilities and contains certain guardrails and limitations.

- Sec. 608. Safety substantiation. Requires responsible persons to ensure, and maintain records supporting, that there is adequate substantiation of safety for cosmetic products. Provides that, for purposes of determining whether a product is safe, FDA may consider, as appropriate and available, the cumulative or other relevant exposure to the cosmetic product or any ingredient in the product. Exempts coal-tar hair dye from the safety substantiation requirements, and instead relies on the current provisions in Section 601 of the Federal Food, Drug, and Cosmetic Act for such products. Responsible persons for coal-tar hair dyes must maintain records related to the safety of such products.

- Sec. 609. Labeling. Requires cosmetic product labels to include contact information through which the responsible person can receive adverse event reports. Requires responsible persons to identify on the label of a cosmetic product each fragrance allergen in such product. Requires FDA to determine by regulation the substances that are fragrance allergens, with a proposed regulation to be issued not later than one year after enactment, and a final rule issued not later than 180 days after the close of the public comment period for the proposed regulation, that takes into consideration international, state, and local requirements for allergen disclosure, including requirements in the European Union. Requires certain labeling for cosmetic products that are intended to be used only by licensed professionals to bear a label that the product shall be administered or used only by licensed professionals and includes the same information on its label that is required of cosmetics products intended for consumers.

- Sec. 610. Records. Authorizes FDA to access and copy certain records related to a cosmetic product, including safety substantiation records, if FDA has a reasonable belief that a cosmetic product, including an ingredient in such cosmetic product, is likely to be adulterated such that the use or exposure to the product presents a threat of serious adverse health consequences or death to humans. Provides appropriate protections for trade secret or confidential information as part of the access to such records.

- Sec. 611. Mandatory recall. Provides FDA the authority to order a recall of a cosmetic product if FDA determines that there is a reasonable probability that a cosmetic is adulterated or misbranded and the use or exposure to the cosmetic will cause serious adverse health consequences or death.

- Sec. 612. Small businesses. Provides certain exemptions for small businesses with average gross annual sales for the previous three-year period of less than $1 million.

- Sec. 613. Exemptions for certain products and facilities. Exempts products and facilities that are also subject to the drug and device chapters of the Federal Food, Drug, and Cosmetic Act, such as over-the-counter drugs and devices, from requirements under the Modernization of Cosmetics Regulation Act of 2022, except for certain labeling requirements.

- Sec. 614. Preemption. Provides that no state or political subdivision of a state may establish or continue in effect any requirement for cosmetics that is different from or in addition to any requirement in Chapter VI of the Federal Food, Drug, and Cosmetic Act with respect to registration and product listing, good manufacturing practice, records, recalls, adverse event report, or safety substantiation. Clarifies that the Modernization of Cosmetics Regulation Act of 2022 does not preempt any state laws other than those laws that are expressly preempted. Clarifies that the language in the Modernization of Cosmetics Regulation Act of 2022 does not preempt any state from prohibiting the use or limiting the amount of an ingredient in a cosmetic product and does not preempt any current state laws or requirements for reporting certain cosmetic ingredients to states. Provides that nothing in the Modernization of Cosmetics Regulation Act of 2022, nor any standard, rule, requirement, or adverse event report, shall be construed to modify, preempt, or displace any actions for damages or the liability of any person under the law of any state, whether statutory or based in common law. Clarifies that the preemption and savings language in the Modernization of Cosmetics Regulation Act of 2022 do not affect the provisions under section 752 of the Federal Food, Drug, and Cosmetic Act (preemption for labeling or packaging of cosmetics), including any exemptions from labeling preemption.

Section 3503. Enforcement and conforming amendments.

Section 3503 states that new enforcement provisions become effective one year after enactment of the Modernization of Cosmetics Regulation Act of 2022. The section provides that failure to register or submit listing information, refusal or failure to follow a recall order, and failure to comply with adverse event reporting requirements are prohibited acts under the Federal Food, Drug, and Cosmetic Act. It provides that cosmetic products are adulterated if they are manufactured under conditions that do not meet good manufacturing practice requirements or do

not have adequate substantiation for safety, and are misbranded if they are not in compliance with labeling requirements contained in the Modernization of Cosmetics Regulation Act of 2022.

Section 3504. Records inspection.

Section 3504 makes conforming edits to Section 704 of the Federal Food, Drug, and Cosmetic Act to provide that FDA inspections shall extend to records and information, such as safety substantiation information, when the applicable standard is met.

Section 3505. Talc-containing cosmetics.

Section 3505 requires FDA to promulgate proposed regulations to establish testing methods for detecting and identifying asbestos in talc-containing cosmetic products not later than one year after the date of enactment of the Modernization of Cosmetics Regulation Act of 2022, and to issue final regulations not later than 180 days after the date on which the public comment period on the proposed regulations closes.

Section 3506. PFAS in cosmetics.

Section 3506 requires FDA to assess the use of perfluoroalkyl and polyfluoroalkyl substances (PFAS) in cosmetic products and the scientific evidence regarding the safety of their use in cosmetics products, including any risks associated with their use. The section provides that FDA can, as appropriate, consult with the National Center for Toxicological Research, in conducting the assessment. It also requires FDA to publish on its website a report summarizing the assessment not later than two years after enactment of the Food and Drug Omnibus Reform Act.

Section 3507. Sense of the Congress on animal testing.

Section 3507 provides a sense of the Congress that animal testing should not be used for the purposes of safety testing on cosmetic products and should be phased out with the exception of appropriate allowances.

Section 3508. Funding.

Section 3508 provides for an authorization of appropriations for purposes of conducting the activities under this section and hiring personnel required to carry out this section.

Subtitle F – Cross-Cutting Provisions

Chapter 1 – Clinical Trial Diversity and Modernization

Section 3601. Diversity action plans for clinical studies.

Section 3601 requires sponsors of phase 3 and other pivotal studies of new drugs and sponsors of studies of devices to develop and implement a diversity action plan, subject to certain exceptions. Such plan must include the sponsor's goals for enrollment in the clinical studies, the sponsor's rationale for such goals, and an explanation for how the sponsor intends to meet such goals.

Section 3602. Guidance on diversity action plans for clinical studies.

Section 3602 requires FDA to issue new guidance or update existing guidance specifying the form and content of diversity action plans regarding the sponsor's goals for enrollment, disaggregated into certain demographic categories, including regarding the rationale for such goals, and how they will be met.

Section 3603. Public workshops to enhance clinical study diversity.

Section 3603 requires FDA, in consultation with drug sponsors, medical device manufacturers, patients, and other stakeholders, not later than one year after enactment, to convene one or more public workshops to solicit input from stakeholders on increasing the enrollment of historically underrepresented populations in clinical studies.

Section 3604. Annual summary report on progress to increase diversity in clinical studies.

Section 3604 requires FDA, not later than two years after enactment, and annually thereafter, to submit to Congress, and publish on the public website of FDA, a report that summarizes information related to the diversity action plans received pursuant to Section 505(z) or 520(g)(9) of the Food, Drug, and Cosmetic Act. The section notes that nothing in this section shall be construed to authorize FDA to disclose any information that is a trade secret or confidential.

Section 3605. Public meeting on clinical study flexibilities initiated in response to COVID–19 pandemic.

Section 3605 requires FDA, not later than 180 days after the date on which the COVID-19 public health emergency period ends, to convene a public meeting to discuss recommendations provided during the COVID-19 public health emergency to mitigate disruption of clinical studies. Such meeting shall discuss incorporating certain clinical study disruption mitigation recommendations into current or additional guidance to improve clinical study access and enrollment of diverse patient populations.

Section 3606. Decentralized clinical studies.

Section 3606 requires FDA, not later than one year after enactment, to issue draft guidance that addresses considerations for decentralized clinical studies, including regarding the engagement, enrollment, and retention of a meaningfully diverse clinical population with respect to race, ethnicity, age, sex, and geographic location, when appropriate. FDA is required to finalize this guidance no later than one year after the public comment for the draft guidance ends.

Section 3607. Modernizing clinical trials.

Section 3607 requires FDA to issue three guidances to modernize and improve clinical trials, including on the use of: (1) Digital health technologies in clinical trials to help improve recruitment, participation, and data collection; (2) Decentralized clinical trials to improve trial participant engagement and advance the use of flexible and novel clinical trial designs; and (3) Seamless, concurrent, and other innovative clinical trial designs to support the expedited development and review of drugs and biological products. It requires FDA to work with foreign regulators with respect to the use of digital health technologies in clinical trials, decentralized clinical trials, seamless, concurrent, and other innovative clinical trial designs.

Chapter 2 – Inspections

Section 3611. Device inspections.

Section 3611 clarifies that the scope of FDA inspectional authority extending to all things in a factory, warehouse, establishment, or consulting laboratory applies to such places that manufacture, process, pack, or hold non-restricted devices as well as ones that do so with respect to restricted devices. It extends the requirement for the provision, to FDA, of records requested in advance or in lieu of an inspection to persons that own or operate establishments engaged in the manufacture, preparation, propagation, compounding, or processing of devices. FDA will

have to provide a rationale for requesting such records and issue guidance regarding such requests.

Section 3612. Bioresearch monitoring inspections.

Section 3612 codifies and clarifies FDA authority to inspect clinical study sites, also known as bioresearch monitoring inspections. It requires FDA to review its processes and practices applicable to such inspections in the United States and in foreign countries, evaluate whether updates are needed to facilitate consistency, and issue guidance describing the conduct of such inspections.

Section 3613. Improving Food and Drug Administration inspections.

Section 3613 provides for FDA consideration of the compliance history of other FDA-regulated establishments in the country or region in which an establishment is located as a factor in establishing a schedule for risk-based inspections. It clarifies that FDA may rely on any records or other information inspected to satisfy requirements that may pertain to a preapproval or risk-based surveillance inspection, or to resolve deficiencies found in such inspections, if applicable and appropriate. It also provides that FDA may enter into agreements with foreign governments to recognize inspections of foreign establishments to facilitate preapproval inspections and requires a periodic assessment of whether additional arrangements with foreign governments are appropriate.

Section 3614. GAO report on inspections of foreign establishments manufacturing drugs.

Section 3614 requires GAO to report on inspections conducted by FDA and recognized foreign governments on actions taken to improve inspections of foreign establishments manufacturing drugs.

Section 3615. Unannounced foreign facility inspections pilot program.

Section 3615 requires FDA to conduct a pilot program in which FDA increases the conduct of unannounced surveillance inspections of foreign drug establishments, evaluates the differences between such inspections of domestic and foreign establishments, including the impact of announcing inspections, and post a report of its findings and recommendations on the FDA website.

Section 3616. Enhancing coordination and transparency on inspections.

Section 3616 advances intra-agency coordination between field investigators and drug shortage staff at FDA. It requires FDA to include additional information in an annual report with respect to FDA domestic and foreign inspections and FDA recognition of foreign government inspections. It also requires FDA to include additional information in an annual report with respect to the timing of inspections and regulatory and enforcement actions. The section harmonizes the timing of the FDA annual reporting requirement on inspections under Section 902 of the Food and Drug Administration Reauthorization Act to align with reporting requirements related to the PDUFA user fee program.

Section 3617. Enhancing transparency of drug facility inspection timelines.

Section 3617 amends the information FDA must annually report regarding inspections on its website pursuant to section 902 of the FDA Reauthorization Act of 2017 (FDARA), including by adding to this information the time between a request from FDA and the beginning of an

inspection for certain generic drugs, drugs subject to discontinuance reporting, and drugs on the shortage list.

Chapter 3 – Miscellaneous

Section 3621. Regulation of certain products as drugs.

Section 3621 deems all contrast agents, radioactive drugs, and over-the-counter monograph drugs to be drugs and not medical devices. It waives application fees for products that are currently medical devices that would be deemed to be drugs.

Section 3622. Women's Health Research Roadmap.

Section 3622 requires the FDA Office of Women's Health, not later than two years after enactment, to update the Women's Health Research Roadmap.

Section 3623. Strategic workforce plan and report.

Section 3623 requires FDA to develop a strategic workforce plan at least every four years.

Section 3624. Enhancing Food and Drug Administration hiring authority for scientific, technical, and professional personnel.

Section 3624 enhances existing flexibilities and authorities for FDA to simplify and expedite the process for hiring individuals to scientific, technical, and professional positions, including personnel who work on the regulation of food and cosmetics, in addition to personnel who work on medical products, to enable the agency to recruit and retain outstanding, highly qualified individuals for these positions.

Section 3625. Facilities management.

Section 3625 preserves Section 905 of FDARA by clarifying that FDA use of budget authority for costs excluded under Section 905 (e.g., for furniture and fixtures) can count towards meeting the spending trigger amount for user fees for the Prescription Drug User Fee Amendments (PDUFA), Generic Drug User Fee Amendments (GDUFA), MDUFA, and Biosimilar User Fee Amendments (BsUFA) programs. This provision starts in FY 2024.

Section 3626. User fee program transparency and accountability.

Section 3626 strengthens the reporting requirements for the user fee programs to ensure greater accountability and transparency with respect to FDA's commitments. It requires FDA, with regulated industry, to provide regular updates to Congress regarding user fee negotiations, and to publish the minutes from user fee negotiations within 30 days.

Section 3627. Improving information technology systems of the Food and Drug Administration.

Section 3627 requires FDA to develop and submit to Congress and post on the FDA website a coordinated information technology strategic plan to modernize the information technology systems of the FDA. It also requires GAO to assess the implementation of such plan.

Section 3628. Reporting on mailroom and Office of the Executive Secretariat of the Food and Drug Administration.

Section 3628 requires FDA to submit a report to Congress on policies, procedures, and activities of the mailroom and the Office of the Executive Secretariat of the FDA, the development and implementation of new or revised policies and procedures to monitor and ensure the effective receipt, tracking, managing, and prioritization of complaints, and the effective receipt of common carrier packages to FDA. It requires annual reporting to Congress on information regarding FDA's handling of common carrier packages and correspondence.

It also requires GAO to conduct a report assessing the policies and practices of the Division of Executive Operations in the Office of the Secretariat with respect to the receipt, tracking, managing, and prioritization of correspondence.

Section 2629. Facilitating the use of real world evidence.

Section 2629 requires FDA to issue or revise guidance on the use of real-world data and real-world evidence to support regulatory decision making, including with respect to real-world data and real-world evidence from products authorized for emergency use.

Section 3630. Facilitating exchange of product information prior to approval.

Section 3630 provides that no drug or medical device shall be considered misbranded as a result of the provision of information regarding investigational drugs or medical devices or uses to payors, formulary committees, or other similar entities under specified conditions. It requires the information to include a clear statement that the drug or medical device has not been approved and that the safety and efficacy of the drug or medical device has not been established. Additional required disclosures include information about studies the drug or medical device is undergoing, how the studies relate to the overall plan for the development of the drug or medical device, whether an application for the drug or medical device has been submitted to FDA, and if not, when such submission is planned.

Section 3631. Streamlining blood donor input.

Section 3631 provides a Paperwork Reduction Act (PRA) exemption for voluntary information that is solicited from blood donors or potential blood donors to support the development of recommendations by the Secretary concerning blood donation.

TITLE IV — MEDICARE PROVISIONS

Section 4101. Extension of increased inpatient hospital payment adjustment for certain low-volume hospitals.

Section 4101 extends the Medicare low-volume hospital payment adjustment for two years through September 30, 2024.

Section 4102. Extension of Medicare-Dependent Hospital program.

Section 4102 extends the Medicare-Dependent Hospital (MDH) program for two years through September 30, 2024.

Section 4103. Extension of fee schedule for ambulance services.

Section 4103 extends a number of add-on payments for ground ambulance services under the Medicare fee schedule through December 31, 2024.

Subtitle B — Other Expiring Medicare Provisions

Section 4111. Extending incentive payments for participation in eligible alternative payment models.
Section 4111 extends incentive payments for participation in advanced alternative payment models (APMs) through 2025. Under the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), eligible clinicians who participate in advanced APMs and meet certain payment or patient count thresholds qualify for a 5 percent Medicare Part B incentive payment in payment years 2019 through 2024. This section extends incentive payments through 2025, with a 3.5 percent Medicare Part B incentive payment for services covered in 2025. This section also extends the current freeze on participation thresholds for qualification for the APM bonuses for an additional year.

Section 4112. Extension of support for physicians and other professionals in adjusting to Medicare payment changes.
Section 4112 provides additional support for physicians and other health care professionals in adjusting to Medicare payment changes. For services furnished in 2023, this section increases otherwise applicable Medicare Physician Fee Schedule payments by 2.5 percent. For services furnished in 2024, the section provides a 1.25 percent payment increase.

Section 4113. Advancing telehealth beyond COVID-19.
Section 4113 extends all of the Medicare telehealth flexibilities that were extended in the Consolidated Appropriations Act, 2022, through December 31, 2024.

Section 4114. Revised phase-in of Medicare clinical laboratory test payment changes.
Section 4114 delays by one year pending payment reductions and data reporting periods for the Clinical Laboratory Fee Schedule under the Protecting Access to Medicare Act.

Subtitle C — Medicare Mental Health Care Provisions

Section 4121. Coverage of marriage and family therapist services and mental health counselor services under part B of the Medicare program.
Section 4121 establishes Medicare coverage for services provided by marriage and family therapists and licensed professional counselors beginning on January 1, 2024.

Section 4122. Additional residency positions.
Section 4122 supports physician workforce development by providing for the distribution of 200 additional Medicare-funded graduate medical education (GME) residency positions. Specifically, this provision dedicates one-half of the total number of positions to psychiatry or psychiatry subspecialty residencies.

Section 4123. Improving mobile crisis care in Medicare.
Section 4123 establishes a 50 percent payment increase in Medicare Physician Fee Schedule payments rates for crisis psychotherapy services when furnished by a mobile unit, as well as additional settings other than a facility or physician office, beginning on January 1, 2024. The section also requires the Centers for Medicare and Medicaid Services (CMS) to conduct outreach

and education to providers on Medicare coverage and payment for crisis psychotherapy services, the ability of peer support specialists and other auxiliary personnel to participate in the furnishing of crisis psychotherapy services, and the ability of peer support specialists and other auxiliary personnel to participate in the furnishing of behavioral health integration services.

Section 4124. Ensuring adequate coverage of outpatient mental health services under the Medicare program.
Section 4124 revises Medicare's partial hospitalization benefit beginning on January 1, 2024 to provide coverage of intensive outpatient services.

Section 4125. Improvements to Medicare prospective payment system for psychiatric hospitals and psychiatric units.
Section 4125 directs HHS to begin collecting (no later than October 1, 2023) data and other information necessary to revise the existing Medicare prospective payment system (PPS) for inpatient psychiatric hospitals and psychiatric units (IPFs). The HHS Secretary is required to update the methodology for determining payment rates under the IPF PPS beginning in rate year 2025.

Section 4126. Exception for physician wellness programs.
Section 4126 adds a new exception to the Stark Law to allow for hospitals and other entities to provide evidence-based programs for physicians to improve their mental health, increase resiliency, and prevent suicide among physicians.

Section 4127. Consideration of safe harbor under the anti-kickback statute for certain contingency management interventions.
Section 4127 requires the HHS Inspector General to conduct a review and issue a report to Congress on whether to establish a safe harbor for evidence-based contingency management incentives, which can be used to treat substance use disorders.

Section 4128. Provider outreach and reporting on certain behavioral health integration services.
Section 4128 requires HHS to conduct outreach to physicians and other health care providers on the availability of behavioral health integration services as a covered benefit under the Medicare program. This education will inform practitioners on the requirements to determine eligibility and bill for behavioral health integration codes. This section also requires reports to Congress on the methods used for provider outreach and on the number of Medicare beneficiaries who were furnished behavioral health integration services.

Section 4129. Outreach and reporting on opioid use disorder treatment services furnished by opioid treatment programs.
Section 4129 requires HHS to conduct outreach to physicians and other health care providers on the inclusion of opioid use disorder treatment services furnished by an opioid treatment program as a covered benefit under the Medicare program. This education will inform practitioners of the requirements to determine eligibility and bill for opioid treatment services. This section also requires HHS to conduct outreach to Medicare beneficiaries on the availability of opioid use disorder treatment services furnished by an opioid treatment program. This section requires

reports to Congress on the methods used for provider outreach and on the number of Medicare beneficiaries who were furnished opioid use disorder treatment services.

Section 4130. GAO study and report comparing coverage of mental health and substance use disorder benefits and non-mental health and substance use disorder benefits.
Section 4130 directs the Comptroller of the United States to conduct a study to compare the mental health and substance use disorder benefits offered by Medicare Advantage plans to traditional Medicare and to other benefits offered by Medicare Advantage plans.

Subtitle D — Other Medicare Provisions

Section 4131. Temporary inclusion of authorized oral antiviral drugs as covered Part D drugs.
Section 4131 permits coverage of oral antiviral drugs with an emergency use authorization (EUA) from the Food and Drug Administration (FDA) under Medicare Part D through December 31, 2024.

Section 4132. Restoration of CBO access to certain part D payment data.
Section 4132 authorizes the Congressional Budget Office (CBO) to access prescription drug payment data, including rebate and direct and indirect remuneration (DIR) data, under Medicare Part D.

Section 4133. Medicare coverage of certain lymphedema compression treatment items.
Section 4133 provides Medicare Part B coverage for compression garments for the treatment of lymphedema, beginning on January 1, 2024.

Section 4134. Permanent in-home benefit for IVIG services.
Section 4134 provides permanent Medicare coverage for items and services related to the administration of intravenous immune globulin (IVIG), beginning on January 1, 2024.

Section 4135. Access to non-opioid treatments for pain relief.
Section 4135 provides a separate Medicare payment, from 2025 through 2027, for non-opioid treatments that are currently packaged into the payment for surgeries under Medicare's Outpatient Prospective Payment System (OPPS). The section also caps the separate payment at 18 percent of the estimated average OPPS payment amount for the surgeries and other services for which the non-opioid is used in conjunction with.

Section 4136. Technical amendments to Medicare separate payment for disposable negative pressure wound therapy devices.
Section 4136 adjusts payment for disposable negative pressure wound therapy devices by using the supply price to determine the relative value for the service.

Section 4137. Extension of certain home health rural add-on payments.
Section 4137 extends, for one year through December 31, 2023, the 1 percent add-on payment provided to certain home health agencies that furnish services in counties with a low population density.

Section 4138. Remedying election revocations relating to administration of COVID-19 vaccines.
Section 4138 revises Medicare coverage rules under the Religious Nonmedical Health Care Institution (RNHCI) benefit to ensure that beneficiaries who receive Medicare-covered vaccinations for COVID-19 do not have their RNHCI benefits temporarily revoked.

Section 4139. Payment rates for durable medical equipment under the Medicare program.
Section 4139 extends, through December 31, 2023, the temporary blended payment rates provided under the CARES Act for durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) in certain non-competitive bid areas.

Section 4140. Extending Acute Hospital Care at Home waivers and flexibilities.
Section 4140 extends the Acute Hospital Care at Home initiative, as currently authorized under CMS waivers and flexibilities, through December 31, 2024.

Section 4141. Extension of pass-through status under the Medicare program for certain devices impacted by COVID-19.
Section 4141 extends the pass-through payment for certain medical devices for which pass-through status would have otherwise expired on January 1, 2022, for one additional year through December 31, 2023.

Section 4142. Increasing transparency for home health payments under the Medicare program.
Section 4142 requires HHS to provide publicly available information on the simulation of 60-day episodes under the Medicare home health prospective payment system in effect prior to the Patient Driven Groupings Model. This section also requires HHS to use a public forum to engage with home health stakeholders on the Medicare home health payment rate development within 90 days of enactment.

Section 4143. Waiver of cap on annual payments for nursing and allied health education payments.
Section 4143 eliminates the annual cap on total payments and excludes any resulting increase from factoring into calculations for nursing and allied health education payments for such hospitals for 2010 through 2019.

Subtitle E — Health Care Tax Provisions

Section 4151. Extension of safe harbor for absence of deductible for telehealth.
Section 4151 extends through Calendar Year 2024 the flexibility to exempt telehealth services from the deductible in high-deductible health plans (HDHPs) that can be paired with a Health Savings Account (HSA).

Subtitle F — Offsets

Section 4161. Reduction of Medicare Improvement Fund.

Section 4161 reduces the amount in the Medicare Improvement Fund from $7,278,000,000 to $180,000,000.

Section 4162. Extension of adjustment to calculation of hospice cap amount under Medicare.
Section 4162 extends, by one year, the change to the annual updates to the hospice aggregate cap made in the Improving Medicare Post-Acute Care Transformation Act (IMPACT Act) of 2014 and applies the hospice payment update percentage rather than the Consumer Price Index for Urban Consumers (CPI–U) to the hospice aggregate cap for fiscal years 2026 through 2032.

Section 4163. Medicare direct spending reductions.
Section 4163 extends the mandatory Medicare payment reductions under sequestration for the first 6 months of fiscal year 2032, while revising Medicare sequestration percentages to 2 percent for fiscal year 2030 and fiscal year 2031.

TITLE V — MEDICAID AND CHIP PROVISIONS

Subtitle A — Territories

Section 5101. Medicaid adjustments for the territories.
Section 5101 extends Puerto Rico's higher federal Medicaid match of 76 percent through fiscal year 2027 and permanently extends a higher federal Medicaid match of 83 percent for American Samoa, the Commonwealth of the Northern Mariana Islands, Guam, and the U.S. Virgin Islands. In addition, this section establishes a new framework for Puerto Rico's Medicaid enhanced allotments for the next five fiscal years. The section also makes programmatic improvements to the territories' Medicaid programs, including requiring increased provider payment rates and improving contracting practices for Puerto Rico and providing funding for data system improvements for American Samoa, the Commonwealth of the Northern Mariana Islands, Guam, and the U.S. Virgin Islands.

Subtitle B — Medicaid and CHIP Coverage

Section 5111. Funding extension of the Children's Health Insurance Program and related provisions.
Section 5111 extends funding for the Children's Health Insurance Program (CHIP) for two years through fiscal year 2029.

Section 5112. Continuous eligibility for children under Medicaid and CHIP.
Section 5112 requires children to be provided with 12 months of continuous coverage in Medicaid and CHIP effective January 1, 2024.

Section 5113. Modifications to postpartum coverage under Medicaid and CHIP.
Section 5113 makes permanent a state option to allow states to continue to provide 12 months of continuous coverage during the postpartum period in Medicaid or CHIP.

Section 5114. Extension of Money Follows the Person Rebalancing demonstration.
Section 5114 extends funding for the Medicaid Money Follows the Person Rebalancing Demonstration program at $450 million per year through fiscal year 2027.

Section 5115. Extension of Medicaid protections against spousal impoverishment for recipients of home and community-based services.
Section 5115 extends protections against spousal impoverishment for Medicaid recipients of home and community-based services through fiscal year 2027.

Subtitle C — Medicaid and CHIP Mental Health Care

Section 5121. Medicaid and CHIP requirements for health screenings, referrals, and case management for eligible juveniles in public institutions.
Section 5121 requires states to provide justice-involved youth who are eligible for Medicaid or CHIP with screening, diagnostic, and case management services in the 30-day period prior to their release from incarceration in a post-adjudication setting. In addition, this section requires, for at least 30 days following release, such youth to be provided with targeted case management services, including referrals to appropriate care and services. This provision takes effect January 1, 2025.

Section 5122. Removal of limitations on Federal financial participation for inmates who are eligible juveniles pending disposition of charges.
Section 5122 allows states to receive federal matching funds through Medicaid and CHIP for health care services provided to justice-involved youth who are incarcerated in public institutions pending disposition of their charges. This provision takes effect January 1, 2025.

Section 5123. Requiring accurate, updated, and searchable provider directories.
Section 5123 codifies requirements that apply to Medicaid managed care organizations, prepaid inpatient health plans, and primary care case management entities regarding the publication of searchable and regularly updated directories of health care providers in their networks, including providers of mental health and substance use disorder services. These requirements would also apply to state Medicaid fee-for-service programs. This provision takes effect July 1, 2025.

Section 5124. Supporting access to a continuum of crisis response services under Medicaid and CHIP.
Section 5124 directs the Secretary of Health and Human Services to issue guidance providing recommendations and best practices to states regarding the development of an effective continuum of crisis care through Medicaid and CHIP. In addition, this section requires the Secretary to establish a technical assistance center to provide support for states in designing and implementing crisis response services.

Subtitle D — Transitioning From Medicaid FMAP Increase Requirements

Section 5131. Transitioning from Medicaid FMAP increase requirements.
Section 5131 provides funding and requirements for state Medicaid programs to support the transition from the enhanced Medicaid funding and continuous coverage requirements of the

Families First Coronavirus Response Act (FFCRA). This section would sunset FFCRA's continuous coverage requirement as of April 1, 2023 and allow for states to begin the process of initiating redeterminations of eligibility over a period of at least twelve months. States would be able to receive enhanced Medicaid funding from April 1 through December 31, 2023, subject to meeting certain conditions such as updating beneficiaries' contact information and using more than one modality to contact beneficiaries in the event of returned mail. The section also establishes public reporting requirements for all states during this temporary redetermination period and provides additional enforcement mechanisms for the Centers for Medicare & Medicaid Services during this period.

Subtitle E — Medicaid Improvement Fund

Section 5141. Medicaid improvement fund.
Section 5141 provides $7,000,000,000 in the Medicaid Improvement Fund.

TITLE VI — HUMAN SERVICES PROVISIONS

Section 6101. The Jackie Walorski Maternal and Child Home Visiting Reauthorization Act of 2022.
Section 6101 reauthorizes the Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program through September 30, 2027. It requires the Secretary of Health and Human Services to create an annually updated, publicly available website containing information on individual and family outcomes for states, territories and tribes. It authorizes five years of funding for the MIECHV Program, and describes how funding for both Federal base grants and Federal matching grants is allocated. It also reserves funds for purposes other than the state/territory grants, including a 6 percent set aside to provide and administer grants to Indian tribes.

The funding allocations for FY23-FY27 are as follows:

- FY 2023: $500,000,000 for base grants
- FY 2024: $500,000,000 for base grants, and $50,000,000 for matching grants
- FY 2025: $500,000,000 for base grants, and $100,000,000 for matching grants
- FY 2026: $500,000,000 for base grants, and $150,000,000 for matching grants
- FY 2027: $500,000,000 for base grants, and $300,000,000 for matching grants

This section also provides an option to provide virtual home visits if a state/ territory provides certain information to the Secretary demonstrating they have met specific conditions, including the requirement of one in-person visit per year.

Section 6102. Extension of Temporary Assistance for Needy Families program.
Section 6102 continues funding for the Temporary Assistance for Needy Families program (TANF) and associated programs through the end of fiscal year 2023 without policy changes.

Section 6103. One-year extension of child and family services program.
Section 6103 continues mandatory and discretionary child welfare programs authorized under Title IV-B of the Social Security Act through the end of fiscal year 2023 without policy changes.

DIVISION GG—MERGER FILING FEE MODERNIZATION

The bill updates the regime for merger filing fees to make it fairer and better targeted. Specifically, the bill reduces the size of the fees required for smaller transactions, while raising them for the largest mergers that often require the most extensive reviews.

Second, the bill requires disclosure of merger subsidies by foreign adversaries. Requiring disclosure of foreign subsidies in the premerger notification process would assist the DOJ and the FTC in preventing anticompetitive transactions through which adversaries could gain influence over important parts of the economy.

Third, the bill empowers state antitrust enforcement by allowing State Attorneys General litigating antitrust cases to remain in their selected courts. This will increase the efficiency and efficacy of antitrust enforcement.

DIVISION HH—AGRICULTURE

TITLE I – CONSERVATION

Sec. 201. Greenhouse Gas Technical Assistance Provider and Third-Party Verifier Program: This section would direct USDA to establish a program to register entities that provide technical assistance to and verify the practices of farmers, ranchers, and foresters who participate in voluntary carbon markets with the goal of providing information and confidence to producers. This section is an updated version of the Growing Climate Solutions Act, S. 1251, which passed the Senate by a vote of 92-8 on June 24, 2021.

Sec. 202. Acceptance and Use of Private Funds for Public-Private Partnerships: This section would modify existing authority for the Secretary of USDA to accept private donations to NRCS conservation programs by allowing the private donor the ability to direct how and where those funds would be used as well as give the Secretary of USDA the discretion on whether to match those funds with existing program funds. This section is an updated version of HR. 2606, the SUSTAINS Act, which was reported by the House Committee on Agriculture by voice vote on May 17, 2022.

TITLE II – COMMODITY FUTURES TRADING COMMISSION WHISTLEBLOWER PROGRAM

Sec. 301. CFTC Whistleblower Program: Extends the authority of an administrative subaccount within the Commodity Futures Trading Commission's Customer Protection Fund through October 1, 2024. It also authorizes the CFTC to transfer an additional $10 million from the Consumer Protection account to the subaccount. The subaccount allows for the continued payment of salaries, customer education initiatives and non-awards expenses, ensuring that the CFTC's whistleblower program can continue to function even when awards obligated to whistleblowers exceed the program fund's balance at the time of distribution. This temporary

authority was originally signed into law after passage of S.409 in July 2021 and has been extended in recent short-term continuing resolutions.

TITLE III – FORESTRY

Sect. 401. Modification or Termination of Easements Under the Healthy Forests Reserve Program: This section would allow for a modification of an easement held under the Healthy Forest Reserve Program (HFRP). The Agricultural Conservation Easement Program (ACEP) and the Emergency Watershed Program (EWP) currently allow for the modification of easements signed under each program and this section would extend the authority for modifications to HFRP easements as well.

TITLE IV – NUTRITION

Sec. 501. EBT Benefit Fraud Prevention: States have reported SNAP benefits are being stolen through card skimming, cloning, and other similar fraudulent methods. This provision requires the Secretary to coordinate with relevant agencies and stakeholders to investigate the extent of the problem, develop methods to prevent fraud and improve security measures through guidance and regulatory action, and provide replacement of benefits stolen through these fraudulent methods through FY2024. This program is newly established in the FY2023 Consolidated Appropriations Act. No Congressional action aside from this provision has been conducted to address this emerging problem. This provision will enable the Agriculture Committees to better understand and, where appropriate, further investigate and respond to the problem in the upcoming 2023 Farm Bill.

Sect. 502. Increasing Access to Summer Meals for Children Through EBT and Alternative Delivery Options: Updates the summer food service program to permanently allow states to provide non-congregate meals and summer EBT benefits nationwide to eligible children as other options in addition to meals provided at congregate feeding sites. Non-congregate meals, such as grab-and-go or home delivery, would be provided in rural areas to eligible children, and summer EBT benefits would be capped at $40 per child per month. This provision is fully offset.

TITLE V – OTHER MATTERS

Sec. 601. Support for Cotton Merchandisers: Provides $100 million for USDA to make payments to merchandisers of cotton who purchased cotton from U.S. producers or marketed cotton on their behalf for economic losses experienced during the COVID-19 pandemic and as a result of other supply chain disruptions.

Sec. 602. Assistance for Rice Producers: Provides $250 million for USDA to make a one-time payment to U.S. rice producers. Payments to producers will be calculated based on a payment rate determined by the Secretary, yield history, and the number of certified planted acres and certified acres prevented from planting for the 2022 crop year.

Sec. 603. Enactment of Chronic Wasting Disease Research and Management Act: Enacts H.R. 5608, the Chronic Wasting Disease Research and Management Act (companion bill to S.4111). Authorizes $70 million in annual appropriations for Chronic Wasting Disease (CWD)

research and management activities administered by USDA's Animal and Plant Health Inspection Service (APHIS). APHIS is authorized to enter into cooperative agreements with state and Tribal wildlife agencies and agriculture departments to implement research and management activities in order to develop new testing methods, better understand the spread of CWD, develop methods to control and manage CWD in cervid populations, and other uses. Funding is required to be split between research and management activities. USDA is also directed to conduct a review of the Herd Certification program standards.

TITLE VI – PESTICIDES

Subtitle A—Pesticide Registration Improvement Act of 2022

The omnibus includes the Pesticide Registration Improvement Act of 2022 (PRIA V), a reauthorization of the user-fee programs that fund the United States Environmental Protection Agency (EPA)'s pesticide registration and review processes. PRIA V includes an increase in registration and maintenance fees that will support a more predictable regulatory process and provide important resources for farm worker safety and health care provider training, in addition to other services that advance the safe and effective use of pesticides. PRIA V requires EPA to comply with numerous registration process improvements in order to access additional funding levels and requires manufacturers to phase-in bilingual labels on pesticides products over the next 8 years. PRIA V is supported by a diverse coalition of environmental nonprofit organizations, pesticide manufacturers and users, federal and state regulators, and farmworker advocates.

Subtitle B—Other Matters Relating to Pesticides: Registration Review Deadline Extension

Congress amended the Pesticide Registration Improvement Act of 2007 ("PRIA 2") and established a deadline (October 1, 2022) for EPA to complete Registration Review decisions for all pesticide products registered as of October 1, 2007. As of September 2022, EPA reported approximately 726 "cases," which include over 1,000 unique active ingredients (AI), currently pending Registration Review, which raises potential implications for continued access to those crop protection tools. This language provides EPA with two legal authorities it does not have now: (1) a four-year extension of the deadline to complete the review of certain pesticides registrations, and (2) flexibility for EPA to move forward with interim decisions ("IDs") on registration review between now and October 1, 2026. The language also requires that, where applicable, EPA include mitigations to reduce the effects of pesticides receiving an interim decision on endangered species or any critical habitats taking into account input from the Secretary of Agriculture and other members of the 2018 Farm Bill ESA Interagency Working Group.

DIVISION JJ—NORTH ATLANTIC RIGHT WHALES

This provison would provide a 6 year window to allow state and federal Amerian lobster and Jonah crab fisheries to come into compliance with the regulations implementing the Atlantic Large Whale Take Reduction Plan (86 Fed. Reg. 51970). This pause would not apply to existing

emergency rules and related agency actions. The provision would also establish a $50 million competitive grant program at the National Oceanic and Atmospheric Administration for fisheries participants, nonprofits, states, Tribes, and other related stakeholders to facilitate a transition to sustainable fishing gear, monitoring, and other needs to reduce the impact of such activiites on North Atlantic right whales. Lastly, this provision would require the Department of Commerce conduct a continuous plankton recorder survey to improve scientific understanding of North Atlantic right whale behavior, migration routes, and improve conservation efforts.