REPORT ON LEGISLATIVE ACTIVITIES
OF THE
COMMITTEE ON
HEALTH, EDUCATION, LABOR, AND
PENSIONS
UNITED STATES SENATE
DURING THE
115TH CONGRESS
2017–2018
PURSUANT TO
SECTION 136 OF THE LEGISLATIVE REORGANIZATION ACT OF 1946, AS AMENDED BY THE LEGISLATIVE REORGANIZATION ACT OF 1970

APRIL 1, 2019.—Ordered to be printed
FOREWORD

This report on the legislative activities of the Committee on Health, Education, Labor, and Pensions during the 115th Congress is submitted pursuant to section 136 of the Legislative Reorganization Act of 1946 (2 U.S.C. 190d), as amended by Public Laws 91–050, 92–136, and 93–334. The Legislative Reorganization Act requires standing committees of the U.S. Senate to “review and study, on a continuing basis, the application, administration, and execution” of laws within their jurisdiction and to submit biennial reports to the Congress. The full text of section 136 is as follows:

Sec. 136. (a) In order to assist the Congress—
(1) its analysis, appraisal, and evaluation of the application, administration, and execution of the laws enacted by Congress, and
(2) its formulation, consideration and enactment of such modifications of or changes in those laws, and of such additional legislation, as may be necessary or appropriate, each standing committee of the Senate and the House of Representatives shall review and study, on a continuing basis, the application, administration, and execution of those laws, or parts of laws, the subject matter of which is within the jurisdiction of that committee. Such committees may carry out the required analysis, appraisal, and evaluation themselves, or by contract, or may require a government agency to do so and furnish a report thereon to the Congress. Such committees may rely on such techniques as pilot testing, analysis of costs in comparison with benefits, or provision for evaluation after a defined period of time.

(b) In each odd-numbered year beginning on or after January 1, 1973, each standing committee of the Senate shall submit, not later than March 31, to the Senate . . . a report on the activities of that committee under this section during the Congress ending at noon on January 3 of such year.

(c) The preceding provisions of this section do not apply to the Committees on Appropriations, the Budget, House Administration, Rules, and Standards of Official Conduct of the House.

LAMAR ALEXANDER, Chairman.
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Mr. ALEXANDER, from the Committee on Health, Education, Labor, and Pensions, submitted the following

REPORT

[Pursuant to section 136 of the Legislative Reorganization Act of 1946, as amended by the Legislative Reorganization Act of 1970, as amended]

COMMITTEE JURISDICTION

The jurisdiction of the Health, Education, Labor, and Pensions Committee in the 115th Congress was set forth in paragraph 1.(1) of Rule XXV of the Standing Rules of the Senate as follows:

(m)(1) Committee on Labor and Human Resources, to which committee shall be referred all proposed legislation, messages, petitions, memorials, and other matters relating to the following subjects:

1. Measures relating to education, labor, health, and public welfare.
2. Aging.
3. Agricultural colleges.
4. Arts and humanities.
5. Biomedical research and development.
7. Convict labor and the entry of goods made by convicts into interstate commerce.
11. Handicapped individuals.
12. Labor standards and labor statistics.
14. Occupational safety and health, including the welfare
of miners.
15. Private pension plans.
17. Railway labor and retirement.
18. Regulation of foreign laborers.
19. Student loans.
20. Wages and hours of labor.

(2) Such committee shall also study and review, on a com-
prehensive basis, matters relating to health, education and
training, and public welfare, and report thereon from time to
time.

COMMITTEE ORGANIZATION*

During the 115th Congress, the committee was organized into
the following subcommittees:

CHILDREN AND FAMILIES

Mr. Paul, Chairman

Ms. Murkowski Mr. Casey
Mr. Burr Mr. Sanders (I)
Dr. Cassidy Mr. Bennet
Mr. Young Mr. Kaine
Mr. Hatch Ms. Hassan
Mr. Roberts Ms. Smith

EMPLOYMENT AND WORKPLACE SAFETY

Mr. Isakson, Chairman

Mr. Roberts Ms. Baldwin
Mr. Scott Mr. Casey
Mr. Burr Mr. Murphy
Mr. Paul Ms. Warren
Dr. Cassidy Ms. Smith
Mr. Young Mr. Jones

PRIMARY HEALTH AND RETIREMENT SECURITY

Mr. Enzi, Chairman

Mr. Burr Mr. Sanders (I)
Ms. Collins Mr. Bennet
Dr. Cassidy Ms. Baldwin
Mr. Young Mr. Murphy
Mr. Hatch Ms. Warren
Mr. Roberts Mr. Kaine
Mr. Scott Ms. Hassan
Ms. Murkowski Mr. Jones

(*Note.—The Chairman and the Ranking Minority Member are ex officio if the
subcommittee they do not serve on.)
REVIEW OF LEGISLATIVE ACTIVITY

The Committee on Health, Education, Labor, and Pensions has jurisdiction over approximately 1,000 Federal programs relating to health, education, disability policy, children and families, older Americans, pensions, labor, and public welfare. These programs are administered by the Departments of Education, Health and Human Services, Labor and over a hundred independent agencies, councils, and bureaus.

During the 115th Congress, which convened on January 3, 2017 and adjourned on January 3, 2019, 583 bills and resolutions were referred to the committee for its consideration, reflecting the substantial interest in issues within the committee's jurisdiction. The committee and its subcommittees held 66 hearings, and produced 21 public laws, most of which came within the area of health care.

FULL COMMITTEE ACTIVITIES

In addition to the legislation referred to the committee, 63 nominations were received by the committee during the 115th Congress, 50 were reported and 35 were confirmed by the Senate.

The committee reported 28 bills and 1 resolution to the Senate, and 21 measures within its jurisdiction were enacted into law.

The committee and its subcommittees held 66 days of public hearings and held 16 executive sessions for the purpose of considering legislation and nominations. There were no conferences held with the House of Representatives.

I. BILLS APPROVED BY THE HELP COMMITTEE
ENACTED INTO LAW

A. Health Care

OPIOID CRISIS RESPONSE ACT OF 2018
(Short Title as Passed Senate)

The Opioid Crisis Response Act of 2018 (Short Title as Passed Senate) — (SUPPORT for Patients and Communities Act (Short Title as Enacted, H.R. 6): Provides for opioid use disorder prevention, recovery, and treatment, and for other purposes.

This bipartisan package of “landmark” legislation to fight the opioid crisis included more than 40 HELP Committee proposals. It deals with the nation’s worst public health challenge by helping to stop deadly fentanyl from coming from China to the United States by mail, finding new non-addictive pain killers, allowing opioids to be dispensed in blister packs, for example a 3- or 7-day supply, and providing more opportunities for treatment.


SPORTS MEDICINE LICENSURE CLARITY ACT OF 2017
(Short Title as Passed Senate)

The Sports Medicine Licensure Clarity Act of 2017 (Short Title as Passed Senate, S. 808) — (The FAA Reauthorization Act of 2018 (Short Title as Enacted), H.R. 302): Provides protections for certain sports medicine professionals, to reauthorize Federal aviation pro-
grams, to improve aircraft safety certification processes, and for other purposes.
This law ensures when a sports medicine professional travels with a team outside the state in which they are licensed, they will continue to be covered by their medical malpractice insurance provider.


PROTECTING PATIENT ACCESS TO EMERGENCY MEDICATIONS ACT OF 2017

The Protecting Patient Access to Emergency Medications Act of 2017 (H.R. 304): Amends the Controlled Substances Act with regard to the provision of emergency medical services.
This bill amends the Controlled Substances Act to direct the Drug Enforcement Administration (DEA) to register an emergency medical services (EMS) agency to administer controlled substances if the agency submits an application demonstrating that it is authorized to conduct such activity in the state in which the agency practices. The DEA may deny an application if it determines that the registration is inconsistent with the public interest.
If someone is the victim of a life-threatening emergency, like a burn victim or a child experiencing a seizure, this law ensures that he or she will continue to have access to time-sensitive and life-saving treatments under the supervision of a physician.


IMPROVING ACCESS TO MATERNITY CARE ACT

The Improving Access to Maternity Care Act (H.R. 315): Amends the Public Health Service Act to distribute maternity care health professionals to health professional shortage areas identified as in need of maternity care health services.
This bill amends the Public Health Service Act to require the Health Resources and Services Administration (HRSA) to identify maternity care health professional target areas, which are areas within health professional shortage areas that have a shortage of maternity care health professionals, for purposes of assigning maternity care health professionals to those areas.
This bill will help bring more doctors and nurses to provide care for pregnant women living in rural areas and other areas where there is a shortage of these health care providers.

[Public Law 115–320, enacted December 17, 2018. H.R. 315.]

SOAR TO HEALTH AND WELLNESS ACT OF 2018

The SOAR to Health and Wellness Act of 2018 (H.R. 767): Establishes the Stop, Observe, Ask, and Respond to Health and Wellness Training pilot program to address human trafficking in the health care system.
This bill directs the Department of Health and Human Services (HHS) to establish a program, to be known as the Stop, Observe, Ask, and Respond to Health and Wellness Training Program or the
SOAR to Health and Wellness Training Program, to train health care providers and other related providers to:

- identify potential human trafficking victims,
- work with law enforcement to report and facilitate communication with such victims,
- refer victims to social or victims service agencies or organizations,
- provide such victims with coordinated care tailored to their circumstances, and
- consider integrating this training with existing training programs. [H.Rept. 115–327]


**Firefighter Cancer Registry Act of 2018**

The Firefighter Cancer Registry Act of 2018 (H.R. 931): Requires require the Secretary of Health and Human Services to develop a voluntary registry to collect data on cancer incidence among firefighters.

This bill requires the Centers for Disease Control and Prevention (CDC) to develop and maintain a voluntary registry of firefighters in order to collect history and occupational information that can be used to determine the incidence of cancer among firefighters. The registry must be used to improve monitoring of cancer among firefighters and to collect and publish epidemiological information. The CDC should seek to include specified information in the registry, including the number and type of fire incidents attended by an individual. [H.Rept. 115–301]

Firefighters are exposed to a range of harmful toxins, and research has shown a strong connection between firefighting and an increased risk for several major cancers. This legislation creates a national registry for firefighters diagnosed with cancer.


**Congenital Heart Futures Reauthorization Act of 2017**

The Congenital Heart Futures Reauthorization Act of 2017 (H.R. 1222): Amends the Public Health Service Act to coordinate Federal congenital heart disease research efforts and to improve public education and awareness of congenital heart disease, and for other purposes.

This bill amends the Public Health Service Act to replace the authorization for a National Congenital Heart Disease Surveillance System with a requirement for the Department of Health and Human Services (HHS), regarding congenital heart disease, to enhance and expand research and surveillance infrastructure. (Congenital heart disease is a condition caused by a heart defect that is present at birth.) [H.Rept. 115–329]

If you're the parent of a child who suffers from a congenital heart disease, this reauthorization is important because it will continue to support the research and data collection that is needed to better understand congenital heart disease.
The Action For Dental Health Act of 2018 (H.R. 2422): Amends the Public Health Service Act to improve essential oral health care for low-income and other underserved individuals by breaking down barriers to care, and for other purposes.

This bill amends the Public Health Service Act to reauthorize oral health promotion and disease prevention programs through FY2022. [H.Rept. 115–328]

The FDA Reauthorization Act of 2017 (H.R. 2430): Amends the Federal Food, Drug, and Cosmetic Act to revise and extend the user-fee programs for prescription drugs, medical devices, generic drugs, and biosimilar biological products, and for other purposes.

This reauthorization of the four Food and Drug Administration (FDA) user fee agreements ensures the FDA has the funding it needs to quickly and safely bring new drugs and treatments to patients and make sure the promising research supported by the 21st Century Cures Act actually reaches patients. [H.Rept. 115–201]

Related bill: S. 934.

The RAISE Family Caregivers Act (Recognize, Assist, Include, Support, and Engage Family Caregivers Act of 2017) (H.R. 3759): Provides for the establishment and maintenance of a Family Caregiving Strategy, and for other purposes.

This bill directs the Department of Health and Human Services (HHS) to develop and make publicly available a National Family Caregiving Strategy that identifies recommended actions for recognizing and supporting family caregivers in a manner that reflects their diverse needs.

HHS shall convene a Family Caregiving Advisory Council to advise the department on recognizing and supporting family caregivers.

The council shall terminate after three years.

This law helps develop a strategy to coordinate federal programs to better support the millions of Americans who are caregivers for a family member.

Related bill: S. 1028 [S. Rept. 115–364 — Special Committee on Aging]

The Children’s Hospital GME Support Reauthorization Act of 2018 (Short Title as Introduced)

The Children’s Hospital GME Support Reauthorization Act of 2018 (Short Title as Introduced) (H.R. 5385): Amends the Public Health Service Act to reauthorize the program of payments to chil-
children’s hospitals that operate graduate medical education programs, and for other purposes.

This bill reauthorizes the children’s hospital graduate medical education (CHGME) program that provides funding to more than 50 freestanding children’s hospitals around the country, supporting the training of pediatricians and improving children’s access to care.


ANIMAL DRUG AND ANIMAL GENERIC DRUG USER FEE AMENDMENTS OF 2018


This reauthorization of the FDA animal drug and animal generic drug user fee agreements helps bring new animal drugs to farmers and ranchers, families, and veterinarians to keep their animals healthy and our food supply safe.


TRICKETT WENDLER, FRANK MONGIELLO, JORDAN MCLINN, AND MATTHEW BELLINA RIGHT TO TRY ACT OF 2017

The Trickett Wendler, Frank Mongiello, Jordan Mclinn, and Matthew Bellina Right To Try Act of 2017 (S. 204): Authorizes the use of unapproved medical products by patients diagnosed with a terminal illness in accordance with State law, and for other purposes.

This bill amends the Federal Food, Drug, and Cosmetic Act to exempt, from specified requirements and restrictions under that Act and other laws, the provision of certain unapproved, investigational drugs to a terminally ill patient who has exhausted approved treatment options and is unable to participate in a clinical trial involving the drugs. The manufacturer or sponsor of an eligible investigational drug must report annually to the Food and Drug Administration (FDA) on any use of the drug in accordance with these provisions. The FDA shall post an annual summary report of such use on its Web site.


CHILDHOOD CANCER STAR ACT OF 2018


This bill amends the Public Health Service Act to authorize the National Institutes of Health (NIH) to provide support to collect the medical specimens and information of children, adolescents, and young adults with selected cancers that have the least effective treatments in order to achieve a better understanding of these cancers and the effects of treatment.
If you're the parent of a child with cancer, this law encourages pediatric cancer research by building on last year's RACE for the Children Act and reauthorization of the Food and Drug Administration (FDA) user fee agreements.


**Early Hearing Detection and Intervention Act of 2017**

The Early Hearing Detection and Intervention Act of 2017 (S. 652): Amends the Public Health Service Act to reauthorize a program for early detection, diagnosis, and treatment regarding deaf and hard-of-hearing newborns, infants, and young children.

This bill amends the Public Health Service Act to revise programs for deaf and hard-of-hearing newborns and infants, including to expand the programs to include young children. The programs are reauthorized through FY2022. Health Resources and Services Administration support for the education and training of personnel and health care providers for such programs is expanded to include education and training of family members.

If you're a parent with a newborn, infant, or young child, this law supports state-based efforts to screen them for hearing loss and ensure proper follow-up care, including diagnosis and early intervention.

[Public Law 115–71, enacted October 18, 2017. S. 652.]

**National Clinical Care Commission Act**


This bill establishes within the Department of Health and Human Services (HHS) a National Clinical Care Commission to evaluate and make recommendations regarding improvements to the coordination and leveraging of federal programs related to complex metabolic or autoimmune diseases that result from issues related to insulin and represent a significant disease burden (e.g., diabetes). The commission must report on: (1) HHS programs that focus on prevention, (2) current activities and gaps in federal efforts to support clinicians in providing integrated care, (3) improvement in federal education and awareness activities related to prevention and treatment, (4) methods for outreach and dissemination of education and awareness materials, and (5) opportunities for consolidation of overlapping federal programs.

This law creates a commission of leading experts to study complex metabolic or autoimmune diseases, like diabetes. The commission will recommend improvements to federal programs that work to help prevent diseases like diabetes or educate patients on their condition.

[Public Law 115–80, enacted November 2, 2017. S. 920.]

**Supporting Grandparents Raising Grandchildren Act**

This bill establishes an Advisory Council to Support Grandparents Raising Grandchildren.

The council must identify, promote, coordinate, and publicly disseminate information and resources to help older relatives meet the needs of the children in their care and maintain their own health and emotional well-being.

If you are a grandparent raising your grandchild, this law helps you navigate that process by creating a task force, made up of federal agencies and grandparents, to coordinate federal resources and information available to you.


**BOLD INFRASTRUCTURE FOR ALZHEIMER'S ACT**

The Bold Infrastructure For Alzheimer's Act (S. 2076): Amends the Public Health Service Act to authorize the expansion of activities related to Alzheimer's disease, cognitive decline, and brain health under the Alzheimer's Disease and Healthy Aging Program, and for other purposes.

This bill amends the Public Health Service Act to award cooperative agreements: (1) for the establishment or support of national or regional centers of excellence in public health practice in Alzheimer's disease; (2) to state public health departments, Native American tribes, and other entities to promote cognitive functioning, address cognitive impairment and unique aspects of Alzheimer's disease, and help meet the needs of caregivers; (3) for analysis and public reporting of data on the state and national levels regarding cognitive decline, caregiving, and health disparities, and monitoring of objectives on dementia and caregiving in the Department of Health and Human Services' Healthy People 2020 report.

This legislation will create Centers of Excellence to advance public health knowledge and ensure public health professionals, doctors and nurses, and patients and their families have the support and updated information on Alzheimer's and related dementia diseases they need.


**STATE OFFICES OF RURAL HEALTH REAUTHORIZATION ACT OF 2018**

The State Offices of Rural Health Reauthorization Act of 2018 (S. 2278): Amends the Public Health Service Act to provide grants to improve health care in rural areas.

This bill amends the Public Health Service Act to reauthorize through FY2022 and revise the grant program for state offices of rural health, including to require the Department of Health and Human Services (HHS) to make the grants, thus removing HHS's discretion to make them.

This law reauthorizes grant programs that strengthen rural health care systems and develop long-term solutions to rural health challenges.
SICKLE CELL DISEASE AND OTHER HERITABLE BLOOD DISORDERS RESEARCH, SURVEILLANCE, PREVENTION, AND TREATMENT ACT OF 2018

The Sickle Cell Disease and Other Heritable Blood Disorders Research, Surveillance, Prevention, and Treatment Act of 2018 (S. 2465): Amends the Public Health Service Act to reauthorize a sickle cell disease prevention and treatment demonstration program and to provide for sickle cell disease research, surveillance, prevention, and treatment.

This bill amends the Public Health Service Act to authorize the Department of Health and Human Services to award grants to government, educational, and nonprofit entities for the purpose of supporting data collection and public health activities regarding sickle cell disease.

At least 100,000 Americans have sickle cell disease, but the exact number is unknown because we do not have sufficient data. This bill will allow the Department of Health and Human Services to study sickle cell disease and other heritable blood disorders so we know how many people are affected by these conditions and implement strategies to help treat these diseases.

PATIENT RIGHT TO KNOW DRUG PRICES ACT

The Patient Right to Know Drug Prices Act (S. 2554): Ensures that health insurance issuers and group health plans do not prohibit pharmacy providers from providing certain information to enrollees.

This law bans the “gag” clauses that prevented a pharmacist from telling a patient their prescription would be cheaper if they paid with cash instead of using their insurance.

PREEMIE REAUTHORIZATION ACT OF 2018


This bill reauthorizes through FY 2023 and revises the Prematurity Research Expansion and Education for Mothers who deliver Infants Early Act. Among other changes, the Centers for Disease Control and Prevention must publish its research report on its website.

In Tennessee, about 11 percent of babies are born preterm. This bill reauthorizes legislation first introduced by Alexander in 2003 to help researchers, doctors, and parents prevent premature births and give more babies the chance for long and healthy lives.
B. Education

STRENGTHENING CAREER AND TECHNICAL EDUCATION FOR THE 21ST CENTURY ACT


The effective date for this bill is July 1, 2018.

This bill amends the Carl D. Perkins Career and Technical Education Act of 2006 to revise and introduce definitions, including common definitions for terms already defined in the Workforce Innovation and Opportunity Act. The bill divides career and technical education (CTE) students into CTE concentrators and CTE participants. [H.Rept. 115–164]

More than 200,000 students in Tennessee participate in career and technical education programs. This new law updates a nearly $1.2 billion federal program of grants to states that help fund the programs that train the workers we need, for example, a high school student looking to become a computer coder, or an adult going back to school to learn about commercial construction.

Related bill: S. 3217. [S. Rept. 115–434]


MUSEUM AND LIBRARY SERVICES ACT OF 2018


This bill amends and reauthorizes through FY2025 the Museum and Library Services Act and provides funding for library services and technology through FY2025.

This bill reauthorizes programs for museums and libraries, including the only federal program exclusively for libraries—the Library Services and Technology Act.

[Public Law 115–410, enacted December 31, 2018. S. 3530.]

II. VETOED LEGISLATION

In the 115th Congress, no legislation was vetoed by the President.

III. BILLS REPORTED FROM THE COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS, NOT ENACTED INTO LAW IN THE 115TH CONGRESS

A. Health

FIREFIGHTER CANCER REGISTRY ACT OF 2018

The Firefighter Cancer Registry Act of 2018 (S. 382): Requires the Secretary of Health and Human Services to develop a voluntary registry to collect data on cancer incidence among firefighters.

On April 24, 2018, the bill was considered in executive session by full committee and ordered favorably reported without an
amendment and on April 25, 2018 the bill was reported with an amendment in the nature of a substitute to the Senate on April 18, 2016, without written report.

**SPORTS MEDICINE LICENSURE CLARITY ACT OF 2017**

The Sports Medicine Licensure Clarity Act of 2017 (S. 808): Provides protections for certain sports medicine professionals who provide certain medical services in a secondary State.

On June 26, 2018, the bill was considered in executive session by full committee and ordered favorably reported with an amendment in the nature of a substitute and was reported to the Senate on July 9, 2018, without written report.

**STRENGTHENING MOSQUITO ABATEMENT FOR SAFETY AND HEALTH ACT**

The Strengthening Mosquito Abatement for Safety and Health Act (S. 849): Supports programs for mosquito-borne and other vector-borne disease surveillance and control.

On April 26, 2017, the bill was considered in executive session by full committee and ordered favorably reported with an amendment in the nature of a substitute and reported to the Senate on May 1, 2017, without written report.

This bill will improve public health preparedness capabilities to help combat the Zika virus and other mosquito-borne diseases that threaten public health by strengthening key programs that support state and local mosquito surveillance and control efforts.

**PATIENT ACCESS TO SUBSTANCE USE DISORDER TREATMENTS ACT OF 2018**

The Ensuring Patient Access to Substance Use Disorder Treatments Act of 2018 (S. 916): Amends the Controlled Substances Act with regard to the provision of emergency medical services.

On April 26, 2017 the bill was considered in executive session by full committee and ordered favorably reported with an amendment in the nature of a substitute and reported to the Senate on May 1, 2017, without written report.

**FDA REAUTHORIZATION ACT OF 2017**

FDA Reauthorization Act of 2017 (S. 934): Amends the Federal Food, Drug, and Cosmetic Act to revise and extend the user-fee programs for prescription drugs, medical devices, generic drugs, and biosimilar biological products, and for other purposes.

On May 11, 2017, the bill was considered in executive session by full committee and ordered favorably reported with an amendment in the nature of a substitute and reported to the Senate on May 11, 2017, without written report.

**RAISE FAMILY CAREGIVERS ACT**

The RAISE Family Caregivers Act (Recognize, Assist, Include, Support, and Engage Family Caregivers Act of 2017 (S. 1028): Provides for the establishment and maintenance of a National Family Caregiving Strategy, and for other purposes.
On May 11, 2017, the bill was considered in executive session by full committee and ordered favorably reported without amendment and reported to the Senate on May 11, 2017, without written report.

This law helps develop a strategy to coordinate federal programs to better support the millions of Americans who are caregivers for a family member.

[S. Rept. 115–364 — Special Committee on Aging]

**MATERNAL HEALTH ACCOUNTABILITY ACT OF 2017**

The Maternal Health Accountability Act of 2017 (S. 1112): Supports States in their work to save and sustain the health of mothers during pregnancy, childbirth, and in the postpartum period, to eliminate disparities in maternal health outcomes for pregnancy-related and pregnancy-associated deaths, to identify solutions to improve health care quality and health outcomes for mothers, and for other purposes.

On June 26, 2018, the bill was considered in executive session by full committee and ordered favorably reported with an amendment in the nature of a substitute and reported to the Senate on July 9, 2018, without written report.

This legislation aims to support states in reviewing pregnancy-related deaths to identify ways to improve maternal care and reduce maternal mortality in the United States. (H.R. 1318 became law per LIS P.L. 115–344, December 21, 2018 — Senate language subbed in.)

**OVER-THE-COUNTER DRUG SAFETY, INNOVATION, AND REFORM ACT**

The Over-the-Counter Drug Safety, Innovation, and Reform Act (S. 2315): Amends the Federal Food, Drug, and Cosmetic Act to clarify the regulatory framework with respect to certain non-prescription drugs that are marketed without an approved new drug application, and for other purposes.

On April 24, 2018, it was considered in executive session by full committee and ordered favorably reported with an amendment in the nature of a substitute and reported to the Senate on May 14, 2018, without written report.

This legislation would modernize the way over-the-counter medications are regulated and brought to market, to encourage the development of new drugs for patients.

**ANIMAL DRUG AND ANIMAL GENERIC DRUG USER FEE AMENDMENTS OF 2018**


On February 28, 2018, it was considered in executive session by full committee and ordered favorably reported with an amendment in the nature of a substitute and reported to the Senate on March 7, 2018, without written report.

This reauthorization of the FDA animal drug and animal generic drug user fee agreements helps bring new animal drugs to farmers
and ranchers, families, and veterinarians to keep their animals healthy and our food supply safe.

**CHILDREN’S HOSPITAL GME SUPPORT REAUTHORIZATION ACT OF 2018**

The Children’s Hospital GME Support Reauthorization Act of 2018 (S. 2597): Amends the Public Health Service Act to reauthorize the program of payments to children's hospitals that operate graduate medical education programs, and for other purposes.

On April 24, 2018, the bill was considered in executive session by full committee and ordered favorably reported with an amendment in the nature of a substitute and reported to the Senate on April 25, 2018, without written report.

This bill reauthorizes the children’s hospital graduate medical education (CHGME) program that provides funding to more than 50 freestanding children’s hospitals around the country, supporting the training of pediatricians and improving children’s access to care.

**OPIOID CRISIS RESPONSE ACT OF 2018**

Opioid Crisis Response Act of 2018 (S. 2680): Addresses the opioid crisis.

On March 9, 2016, the bill was considered in executive session by full committee and ordered favorably reported with an amendment in the nature of a substitute and reported to the Senate on April 5, 2016, without written report.

This bipartisan package of “landmark” legislation to fight the opioid crisis included more than 40 HELP Committee proposals. It deals with the nation’s worst public health challenge by helping to stop deadly fentanyl from coming from China to the United States by mail, finding new non-addictive pain killers, allowing opioids to be dispensed in blister packs, for example a 3- or 7- day supply, and providing more opportunities for treatment.

**PANDEMIC AND ALL-HAZARDS PREPAREDNESS AND ADVANCING INNOVATION ACT OF 2018**

The Pandemic and All-Hazards Preparedness and Advancing Innovation Act of 2018 (S. 2852): Reauthorizes certain programs under the Pandemic and All-Hazards Preparedness Reauthorization Act.

On May 23, 2018 the bill was considered in executive session by full committee and ordered favorably reported with an amendment in the nature of a substitute and was reported to the Senate on June 18, 2018, without written report.

It is crucial we are prepared to face a range of public health threats—including outbreaks of infectious diseases like Ebola, Zika, or the flu; natural disasters, such as hurricanes and the wildfires that swept across East Tennessee in 2016; or deliberate attacks with dangerous agents, like anthrax or nuclear weapons. This legislation strengthens our preparedness and response capabilities so we can better protect Tennesseans and all Americans from 21st century threats.
The Action for Dental Health Act of 2018 (S. 3016): Amends the Public Health Service Act to improve essential oral health care for low-income and other underserved individuals by breaking down barriers to care, and for other purposes.

On July 25, 2018 the bill was considered in executive session by full committee and ordered favorably reported with an amendment in the nature of a substitute, and was reported to the Senate on August 15, 2018, without written report.

This legislation supports states, dental associations, and community-based oral health programs to help prevent dental disease, and expands efforts to provide care to underserved patients.

The Emergency Medical Services for Children Program Reauthorization Act of 2018 (S. 3482): Amends the Public Health Service Act to reauthorize the Emergency Medical Services for Children program.

On November 29, 2018 the bill was considered in executive session by full committee and ordered favorably reported without amendment and was reported to the Senate on November 29, 2018, without written report.

This bill will ensure that, from the ambulance to the emergency department, emergency health care providers are prepared to treat children, who typically require smaller equipment and different doses of medicine.


On November 26, 2018 the bill was considered in executive session by full committee and ordered favorably reported with an amendment in the nature of a substitute and was reported to the Senate on November 29, 2018, without written report.

This bill reauthorizes state grants and programs related to surveillance, prevention, care, and research of traumatic brain injuries, and encourages data collection and analysis so we can better understand trends and causes of concussions. (H.R. 6615 House version became law per LIS P.L. 115–377, December 21, 2018 — Senate language subbed in.)

B. Education


On July 16, 2018 was considered in executive session by full committee and ordered favorably reported and was reported to the Senate on December 19, 2018, with written report no. 115–434.
More than 200,000 students in Tennessee participate in career and technical education programs. This new law updates a nearly $1.2 billion federal program of grants to states that help fund the programs that train the workers we need, for example, a high school student looking to become a computer coder, or an adult going back to school to learn about commercial construction.

IV. OTHER BILLS UNDER THE JURISDICTION OF THE COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS, CONSIDERED BY THE SENATE IN THE 115TH CONGRESS

A. Health

JESSIE’S LAW

Jessie’s Law (S. 581) is a bill to include information concerning a patient’s opioid addiction in certain medical records. This bill requires the Department of Health and Human Services (HHS) to develop and disseminate best practices for health care providers and state agencies regarding the display of a patient’s history of opioid addiction in the patient’s medical records. On Aug. 3, 2017, the Senate passed the measure with an amendment by Unanimous Consent. It was subsequently referred to the Subcommittee on Health, of the Committee on Energy and Commerce.

BENEFIT ACT OF 2017

The BENEFIT Act of 2017 (Better Empowerment Now to Enhance Framework and Improve Treatments Act of 2017) (S. 1052) strengthens the use of patient-experience data within the benefit-risk framework for approval of new drugs. This bill amends the Federal Food, Drug, and Cosmetic Act to require the Food and Drug Administration (FDA) to consider patient-focused drug development data, such as patient preferences, patient-reported outcomes, and patient experiences, as part of the risk-benefit assessment of new drugs. Following approval of a drug, the FDA must include a description of how this information was considered in its statement of patient experience. On Aug. 3, 2017, the Senate passed the measure without amendment by Unanimous Consent. It was subsequently referred to the Subcommittee on Health, of the Committee on Energy and Commerce.

CURD ACT

The CURD Act (Codifying Useful Regulatory Definitions Act) (S. 2322) was introduced to amend the Federal Food, Drug, and Cosmetic Act to define the term natural cheese. Congress found that there is a need to define the term “natural cheese” in order to maintain transparency and consistency for consumers so that they may differentiate “natural cheese” from “process cheese”. On Dec. 13, 2018 the Senate passed/agreed with an amendment by Voice Vote. It subsequently failed passage in the House on Dec. 20, 2018.
B. Education

CHILDREN OF FALLEN HEROES SCHOLARSHIP ACT

The Children of Fallen Heroes Scholarship Act, S. 597, increasing Federal Pell Grants for the children of fallen public safety officers, and for other purposes.

This bill amends title IV (Student Assistance) of the Higher Education Act of 1965 to eliminate the expected family contribution (EFC) used to determine financial need in the case of a Pell Grant-eligible student whose parent or guardian died in the line of duty as a police officer, firefighter, or other public safety officer. Such student is eligible to receive an automatic zero EFC and qualify for the maximum Pell Grant award if the student was less than 24 years old or enrolled at an institution of higher education at the time of the parent or guardian’s death.

On Sept. 7, 2017, the Senate passed the measure without amendment by Voice Vote. It was subsequently referred to the Committee on Education and the Workforce, and in addition to the Committees on the Judiciary, the Budget, and Subcommittee on Crime, Terrorism, Homeland Security, and Investigations.

V. LIST OF PUBLIC LAWS OF THE 115TH CONGRESS FROM THE COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS

1. P.L. 115–31 [enacted May. 5, 2017], making appropriations for the fiscal year ending September 30, 2017, and for other purposes. (H.R. 244)

2. P.L. 115–71 [enacted Oct. 18, 2017], to amend the Public Health Service Act to reauthorize a program for early detection, diagnosis, and treatment regarding deaf and hard-of-hearing newborns, infants, and young children. (S. 652)


4. P.L. 115–83 [enacted Nov. 17, 2017], to amend the Controlled Substances Act with regard to the provision of emergency medical services. (H.R. 304)

5. P.L. 115–119 [enacted Jan. 22, 2017], to provide for the establishment and maintenance of a Family Caregiving Strategy, and for other purposes. (H.R. 3759)

6. P.L. 115–176 [enacted May 30, 2018], to authorize the use of unapproved medical products by patients diagnosed with a terminal illness in accordance with State law, and for other purposes. (S. 204)

7. P.L. 115–180 [enacted June 5, 2018], to maximize discovery, and accelerate development and availability, of promising childhood cancer treatments, and for other purposes. (S. 292)

8. P.L. 115–194 [enacted July 7, 2018], to require the Secretary of Health and Human Services to develop a voluntary registry to collect data on cancer incidence among firefighters. (H.R. 951)


11. P.L. 115–254 [enacted Oct. 5, 2018], to provide protections for certain sports medicine professionals, to reauthorize Federal aviation programs, to improve aircraft safety certification processes, and for other purposes. (H.R. 302)

12. P.L. 115–326 [enacted Oct. 10, 2018], to ensure that health insurance issuers and group health plans do not prohibit pharmacy providers from providing certain information to enrollees. (S. 2554)

13. P.L. 115–302 [enacted Dec. 11, 2018], to amend the Public Health Service Act to improve essential oral health care for low-income and other underserved individuals by breaking down barriers to care, and for other purposes. (H.R. 2422)

14. P.L. 115–320 [enacted Dec. 17, 2018], to amend the Public Health Service Act to distribute maternity care health professionals to health professional shortage areas identified as in need of maternity care health services. (H.R. 315)

15. P.L. 115–327 [enacted Dec. 18, 2018], to amend the Public Health Service Act to reauthorize a sickle cell disease prevention and treatment demonstration program
and to provide for sickle cell disease research, surveillance, prevention, and treatment. (S. 2465)

16. P.L. 115–328 [enacted Dec. 18, 2018], to revise and extend the Prematurity Research Expansion and Education for Mothers who deliver Infants Early Act (PREEMIE Act). (S. 3029)

17. P.L. 115–342 [enacted Dec. 21, 2018], to amend the Public Health Service Act to coordinate Federal congenital heart disease research efforts and to improve public education and awareness of congenital heart disease, and for other purposes. (H.R. 1222)


19. P.L. 115–406 [enacted Dec. 31, 2018], to amend the Public Health Service Act to authorize the expansion of activities related to Alzheimer’s disease, cognitive decline, and brain health under the Alzheimer’s Disease and Healthy Aging Program, and for other purposes. (S. 2076)

20. P.L. 115–408 [enacted Dec. 31, 2018], to amend the Public Health Service Act to amend the Public Health Service Act to provide grants to improve health care in rural areas. (S. 2278)

VI. LIST OF FULL COMMITTEE AND SUBCOMMITTEE HEARINGS OF THE COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS

1. Nomination of Betsy DeVos to Serve As Secretary of Education. (January 21, 2017)
2. Nomination of Tom Price to Serve As Secretary of Health and Human Services. (January 18, 2017)
5. Nomination of Alex Acosta to Serve As Secretary of Labor. (March 22, 2017)
7. Nomination of Scott Gottlieb, M.D., to Serve As Commissioner of Food and Drugs. (April 5, 2017)
9. Nomination Hearing for Deputy Secretary of Labor and Members of the National Labor Relations Board. (Patrick Pizella, Marvin Kaplan, William Emmanuel) (July 13, 2017)
25. Nominations. (Brigadier General Mitchell Zais, USA (Ret.), James Blew, Timothy Kelly, Kate O’Scanlain) (Nov. 15, 2017)
27. Nomination of Alex Azar to Serve As Secretary of Health and Human Services. (Nov. 29, 2017)
33. The Opioid Crisis: An Examination of How We Got Here and How We Move Forward. (Jan. 9, 2018)
37. Nomination of Frank T. Brogan to be Assistant Secretary for Elementary and Secondary Education. (Jan. 25, 2018)
41. Reauthorizing the Higher Education Act: Improving College Affordability. (Feb. 6, 2018)
42. Exploring the “GIG Economy” and the Future of Retirement Savings. (Feb. 6, 2018)
43. The Opioid Crisis: Impact on Children and Families. (Feb. 8, 2018)
45. The Opioid Crisis: The Role of Technology and Data in Preventing and Treating Addiction. (Feb. 27, 2018)
46. Nomination of John F. Ring to be a Member of the National Labor Relations Board. (March 1, 2018)
47. The Opioid Crisis: Leadership and Innovation in the States. (March 8, 2018)
48. Perspectives on the 340B Drug Pricing Program. (March 15, 2018)
49. Nomination of Sharon Gustafson to be General Counsel of the Equal Employment Opportunity Commission. (April 10, 2018)
50. The Opioid Crisis Response Act of 2018. (April 11, 2018)
52. The Healthcare Workforce: Addressing Shortages and Improving Care. (May 22, 2018)
53. The Cost of Prescription Drugs: Examining the President’s Blueprint “American Patients First” to Lower Drug Prices. (June 12, 2018)
54. Effective Administration of the 340B Drug Pricing Program. (June 19, 2018)
55. How to Reduce Health Care Costs: Understanding the Cost of Health Care in America. (June 27, 2018)
56. Reducing Health Care Costs: Eliminating Excess Health Care Spending and Improving Quality and Value for Patients. (July 17, 2018)
57. Modernizing Apprenticeships to Expand Opportunities. (July 26, 2018)
58. Reducing Health Care Costs: Decreasing Administrative Spending. (July 31, 2018)
60. Prioritizing Cures: Science and Stewardship at the National Institutes of Health. (Aug. 23, 2018)
61. The Impact of Zero Tariffs on U.S. Autoworkers. (Sept. 5, 2018)
63. The Every Student Succeeds Act: States Leading the Way. (Sept. 25, 2018)
64. Health Care in Rural America: Examining Experiences and Costs. (Sept. 25, 2018)
65. Rare Diseases: Expediting Treatments for Patients. (Oct. 3, 2018)
VII. ANTICIPATED ACTIVITIES FOR 116TH CONGRESS

A. Health Care

Reauthorization of the Older Americans Act, Community Health Centers, and numerous public health bills. In addition, we will work on an extensive project to examine ways to lower health care costs in the United States.

B. Education

Reauthorization of the Higher Education Act that expired in 2015.

C. Labor

Conduct oversight of labor laws and prepare to reauthorize workforce programs as the Workforce Innovation Opportunity Act nears expiration.

D. Pensions

Work to address the growing crisis among multi-employer pension plans.
APPENDIX

I. REPORTS OF THE COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS

115–434
S. 3217
Strengthening Career and Technical Education for the 21st Century Act
Related reports:

II. PUBLIC LAWS ENACTED DURING THE 115TH CONGRESS

H.R. 244
S. 652

S. 920
National Clinical Care Commission Act.

H.R. 304

H.R. 3759
RAISE Family Caregivers Act.

S. 204

S. 292

H.R. 931
Firefighter Cancer Registry Act of 2018.
S. 1091

S. 2353

H.R. 302

S. 2554
Patient Right to Know Drug Prices Act.

H.R. 2422
Action For Dental Health Act of 2018.

H.R. 315
Improving Access to Maternity Care Act.

S. 2465

S. 3029
Patient Right to Know Drug Prices Act.

S. 1222
Congenital Heart Futures Reauthorization Act of 2017.

H.R. 767
S. 2076
Bold Infrastructure For Alzheimer’s Act.

S. 2278
State Offices of Rural Health Reauthorization Act of 2018.

S. 3530
Museum and Library Services Act of 2018
III. HEARINGS BY FULL COMMITTEE AND SUBCOMMITTEES

HEARINGS BY THE FULL COMMITTEE

OBAMACARE EMERGENCY: STABILIZING THE INDIVIDUAL HEALTH INSURANCE MARKET
Examining the Affordable Care Act, focusing on stabilizing the individual health insurance market.
Date: Feb. 1, 2017.
Number of volumes: One (S. Hrg. 115–238).

FDA USER FEE AGREEMENTS: IMPROVING MEDICAL PRODUCT REGULATION AND INNOVATION FOR PATIENTS, PART I
Examining Food and Drug Administration user fee agreements, focusing on improving medical product innovation for patients.
Date: Mar. 21, 2017.
Number of volumes: One (S. Hrg. 115–255).

FDA USER FEE AGREEMENTS: IMPROVING MEDICAL PRODUCT REGULATION AND INNOVATION FOR PATIENTS, PART II
Examining FDA user fee agreements, focusing on improving medical product regulations and innovation for patients.
Date: Apr. 4, 2017.
Number of volumes: One (S. Hrg. 115–333).

THE COST OF PRESCRIPTION DRUGS: HOW THE DRUG DELIVERY SYSTEM AFFECTS WHAT PATIENTS PAY
Examining the cost of prescription drugs, focusing on how the drug delivery system affects what patients pay.
Date: June 13, 2017.
Number of volumes: One (S. Hrg. 115–355).

STABILIZING PREMIUMS AND HELPING INDIVIDUALS IN THE INDIVIDUAL INSURANCE MARKET FOR 2018: STATE INSURANCE COMMISSIONERS
Examining stabilizing premiums and helping individuals in the individual insurance market for 2018.
Date: Sept. 6, 2017.
Number of volumes: One (S. Hrg. 115– ).

STABILIZING PREMIUMS AND HELPING INDIVIDUALS IN THE INDIVIDUAL INSURANCE MARKET FOR 2018: GOVERNORS
Examining stabilizing premiums and helping individuals in the individual insurance market for 2018, focusing on governors.
Date: Sept. 7, 2017.
Number of volumes: One (S. Hrg. 115– ).
STABILIZING PREMIUMS AND HELPING INDIVIDUALS IN THE INDIVIDUAL INSURANCE MARKET FOR 2018: STATE FLEXIBILITY
Examining stabilizing premiums and helping individuals in the individual insurance market for 2018, focusing on state flexibility.
Date: Sept. 12, 2017.
Number of volumes: One (S. Hrg. 115–).

STABILIZING PREMIUMS AND HELPING INDIVIDUALS IN THE INDIVIDUAL INSURANCE MARKET FOR 2018: HEALTH CARE STAKEHOLDERS
Examining stabilizing premiums and helping individuals in the individual insurance market for 2018, focusing on health care stakeholders.
Date: Sept. 14, 2017.
Number of volumes: One (S. Hrg. 115–).

THE EVERY STUDENT SUCCEEDS ACT: UNLEASHING STATE INNOVATION
Examining the Every Student Succeeds Act, focusing on unleashing State innovation.
Number of volumes: One (S. Hrg. 115–).

THE FEDERAL RESPONSE TO THE OPIOID CRISIS
Examining the Federal response to the opioid crisis.
Date: Oct. 5, 2017.
Number of volumes: One (S. Hrg. 115–).

THE COST OF PRESCRIPTION DRUGS: HOW THE DRUG DELIVERY SYSTEM AFFECTS WHAT PATIENTS PAY, PART II
Examining the cost of prescription drugs, focusing on how the drug delivery system affects what patients pay.
Date: Oct. 17, 2017.
Number of volumes: One (S. Hrg. 115–).

EXAMINING HOW HEALTHY CHOICES CAN IMPROVE HEALTH OUTCOMES AND REDUCE COSTS
Examining how healthy choices can improve health outcomes and reduce costs.
Number of volumes: One (S. Hrg. 115–).

EXPLORING FREE SPEECH ON COLLEGE CAMPUSES
Examining free speech on college campuses.
Number of volumes: One (S. Hrg. 115–).
IMPLEMENTATION OF THE 21ST CENTURY CURES ACT: ACHIEVING THE PROMISE OF HEALTH INFORMATION TECHNOLOGY

Examining implementation of the 21st Century Cures Act, focusing on achieving the promise of health information technology.

Date: Oct. 31, 2017.
Number of volumes: One (S. Hrg. 115–).

GENE EDITING TECHNOLOGY: INNOVATION AND IMPACT

Examining gene editing technology, focusing on innovation and impact.

Date: Nov. 14, 2017.
Number of volumes: One (S. Hrg. 115–).

ENCOURAGING HEALTHY COMMUNITIES: PERSPECTIVE FROM THE SURGEON GENERAL

Examining encouraging healthy communities, focusing on perspective from the Surgeon General.

Date: Nov. 15, 2017.
Number of volumes: One (S. Hrg. 115–).

REAUTHORIZING THE HIGHER EDUCATION ACT: EXAMINING PROPOSALS TO SIMPLIFY THE FREE APPLICATION FOR FEDERAL STUDENT AID

Examining reauthorizing the Higher Education Act, focusing on examining proposals to simplify the Free Application for Federal Student Aid (FAFSA).

Date: Nov. 28, 2017.
Number of volumes: One (S. Hrg. 115–).

THE FRONT LINES OF THE OPIOID CRISIS: PERSPECTIVES FROM STATES, COMMUNITIES, AND PROVIDERS

Examining the front lines of the opioid crisis, focusing on perspectives from states, communities, and providers.

Date: Nov. 30, 2017.
Number of volumes: One (S. Hrg. 115–).

IMPLEMENTATION OF THE 21ST CENTURY CURES ACT: PROGRESS AND THE PATH FORWARD FOR MEDICAL INNOVATION

Examining implementation of the 21st Century Cures Act, focusing on progress and the path forward for medical innovation.

Date: Dec. 7, 2017.
Number of volumes: One (S. Hrg. 115–).

THE COST OF PRESCRIPTION DRUGS: AN EXAMINATION OF THE NATIONAL ACADEMIES OF SCIENCES, ENGINEERING, AND MEDICINE REPORT "MAKING MEDICINES AFFORDABLE: A NATIONAL IMPERATIVE"

Examining the cost of prescription drugs, focusing on an examination of the National Academies of Sciences, Engineering and Medicine report “Making Medicines Affordable: A National Imperative”.

IMPLEMENTATION OF THE 21ST CENTURY CURES ACT: RESPONDING TO MENTAL HEALTH
Examining implementation of the 21st Century Cures Act, focusing on responding to mental health needs.
Date: Dec. 12, 2017.
Number of volumes: One (S. Hrg. 115–).

THE OPIOID CRISIS: AN EXAMINATION OF HOW WE GOT HERE AND HOW WE MOVE FORWARD
Examining the opioid crisis, focusing on how to move forward.
Date: Jan. 9, 2018.
Number of volumes: One (S. Hrg. 115–).

FACING 21ST CENTURY PUBLIC HEALTH THREATS: OUR NATION’S PREPAREDNESS AND RESPONSE CAPABILITIES, PART I
Examining facing 21st century public health threats, focusing on our nation’s preparedness and response capabilities.
Date: Jan. 17, 2018.
Number of volumes: One (S. Hrg. 115–).

REAUTHORIZING THE HIGHER EDUCATION ACT: FINANCIAL AID SIMPLIFICATION AND TRANSPARENCY
Examining reauthorizing the Higher Education Act, focusing on financial aid simplification and transparency.
Date: Jan. 18, 2018.
Number of volumes: One (S. Hrg. 115–).

FACING 21ST CENTURY PUBLIC HEALTH THREATS: OUR NATION’S PREPAREDNESS AND RESPONSE CAPABILITIES, PART II
Examining facing 21st century public health threats, focusing on our Nation’s preparedness and response capabilities.
Date: Jan. 23, 2018.
Number of volumes: One (S. Hrg. 115–).

REAUTHORIZING THE HIGHER EDUCATION ACT: ACCESS AND INNOVATION
Examining reauthorizing the Higher Education Act, focusing on access and innovation.
Date: Jan. 25, 2018.
Number of volumes: One (S. Hrg. 115–).

REAUTHORIZING THE HIGHER EDUCATION ACT: ACCOUNTABILITY AND RISK FOR TAXPAYERS
Examining reauthorizing the Higher Education Act, focusing on accountability and risk to taxpayers.
REAUTHORIZING THE HIGHER EDUCATION ACT: IMPROVING COLLEGE AFFORDABILITY
Examining reauthorizing the Higher Education Act, focusing on improving college affordability.
Date: Feb. 6, 2018.
Number of volumes: One (S. Hrg. 115–).

THE OPIOID CRISIS: IMPACT ON CHILDREN AND FAMILIES
Examining the opioid crisis, focusing on the impact on children and families.
Date: Feb. 8, 2018.
Number of volumes: One (S. Hrg. 115–).

IMPROVING ANIMAL HEALTH: REAUTHORIZATION OF FDA ANIMAL DRUG USER FEES
Examining improving animal health, focusing on reauthorization of Food and Drug Administration Animal Drug User Fees.
Number of volumes: One (S. Hrg. 115–).

THE OPIOID CRISIS: THE ROLE OF TECHNOLOGY AND DATA IN PREVENTING AND TREATING ADDICTION
Examining the opioid crisis, focusing on the role of technology and data in preventing and treating addiction.
Date: Feb. 27, 2017.
Number of volumes: One (S. Hrg. 115–).

THE OPIOID CRISIS: LEADERSHIP AND INNOVATION IN THE STATES
Examining the opioid crisis, focusing on leadership and innovation in the states.
Date: Mar. 8, 2018.
Number of volumes: One (S. Hrg. 115–).

PERSPECTIVES ON THE 340B DRUG PRICING PROGRAM
Examining perspectives on the 340B Drug Discount Program.
Date: Mar. 15, 2018.
Number of volumes: One (S. Hrg. 115–).

THE OPIOID CRISIS RESPONSE ACT OF 2018
Examining an original bill entitled, “The Opioid Crisis Response Act of 2018”.
Date: Apr. 11, 2018.
Number of volumes: One (S. Hrg. 115–).
EXAMINING OVERSIGHT REPORTS ON THE 340B DRUG PRICING PROGRAM
Examining oversight reports on the 340B Drug Pricing Program.
Date: May 15, 2018.
Number of volumes: One (S. Hrg. 115–).

THE HEALTHCARE WORKFORCE: ADDRESSING SHORTAGES AND IMPROVING CARE
Examining the healthcare workforce, focusing on addressing shortages and improving care.
Date: May 22, 2018.
Number of volumes: One (S. Hrg. 115–).

THE COST OF PRESCRIPTION DRUGS: EXAMINING THE PRESIDENT’S BLUEPRINT “AMERICAN PATIENTS FIRST” TO LOWER DRUG PRICES
Examining the cost of prescription drugs, focusing on examining the President’s blueprint ‘American Patients First’ to lower drug prices.
Date: June 12, 2018.
Number of volumes: One (S. Hrg. 115–).

EFFECTIVE ADMINISTRATION OF THE 340B DRUG PRICING PROGRAM
Examining effective administration of the 340B Drug Pricing Program.
Date: June 19, 2018.
Number of volumes: One (S. Hrg. 115–).

HOW TO REDUCE HEALTH CARE COSTS: UNDERSTANDING THE COST OF HEALTH CARE IN AMERICA
Examining how to reduce health care costs, focusing on understanding the cost of health care in America.
Date: June 27, 2018.
Number of volumes: One (S. Hrg. 115–).

REDUCING HEALTH CARE COSTS: ELIMINATING EXCESS HEALTH CARE SPENDING AND IMPROVING QUALITY AND VALUE FOR PATIENTS
Examining reducing health care costs, focusing on eliminating excess health care spending and improving quality and value for patients.
Date: July 17, 2018.
Number of volumes: One (S. Hrg. 115–).

MODERNIZING APPRENTICESHIPS TO EXPAND OPPORTUNITIES
Examining modernizing apprenticeships to expand opportunities.
Date: July 26, 2018.
Number of volumes: One (S. Hrg. 115–).
REDUCING HEALTH CARE COSTS: DECREASING ADMINISTRATIVE SPENDING
Examining reducing health care costs, focusing on decreasing administrative spending.
Date: July 31, 2018.
Number of volumes: One (S. Hrg. 115–).

PRIORITIZING CURES: SCIENCE AND STEWARDSHIP AT THE NATIONAL INSTITUTES OF HEALTH
Examining prioritizing cures, focusing on science and stewardship at the National Institutes of Health.
Date: Aug. 23, 2018.
Number of volumes: One (S. Hrg. 115–).

THE IMPACT OF ZERO TARIFFS ON U.S. AUTOWORKERS
Examining the impact of zero tariffs on United States autoworkers.
Date: Sept. 5, 2018.
Number of volumes: One (S. Hrg. 115–).

REDUCING HEALTH CARE COSTS: EXAMINING HOW TRANSPARENCY CAN LOWER SPENDING AND EMPOWER PATIENTS
Examining reducing health care costs, focusing on how transparency can lower spending and empower patients.
Date: Sept. 18, 2018.
Number of volumes: One (S. Hrg. 115–).

THE EVERY STUDENT SUCCEEDS ACT: STATES LEADING THE WAY
Examining the Every Student Succeeds Act, focusing on states leading the way.
Date: Sept. 25, 2018.
Number of volumes: One (S. Hrg. 115–).

REDUCING HEALTH CARE COSTS: IMPROVING AFFORDABILITY THROUGH INNOVATION
Examining reducing health care costs, focusing on improving affordability through innovation.
Date: Nov. 28, 2018.
Number of volumes: One (S. Hrg. 115–).
HEARINGS ON NOMINATIONS

DEPARTMENT OF EDUCATION

Elisabeth Prince DeVos, of Michigan, to be Secretary, Department of Education.
Date: Jan. 17, 2017.
Number of volumes: One (S. Hrg. 115–206).

Carlos G. Muniz, of Florida, to be General Counsel, Department of Education.
Date: Sept. 19, 2017.
Number of volumes: One (S. Hrg. 115–).

James Blew, of California, to be Assistant Secretary for Planning, Evaluation, and Policy Development, Department of Education.
Date: Nov. 15, 2017.
Number of volumes: One (S. Hrg. 115–).

Mitchell Zais, of South Carolina, to be Deputy Secretary of Education.
Date: Nov. 15, 2017.
Number of volumes: One (S. Hrg. 115–).

Kenneth L. Marcus, of Virginia, to be Assistant Secretary for Civil Rights, Department of Education.
Date: Dec. 5, 2017.
Number of volumes: One (S. Hrg. 115–).

Johnny Collett, of Kentucky, to be Assistant Secretary for Special Education and Rehabilitative Services, Department of Education.
Date: Dec. 5, 2017.
Number of volumes: One (S. Hrg. 115–).

Frank T. Brogan, of Pennsylvania, to be Assistant Secretary for Elementary and Secondary Education, Department of Education.
Date: Jan. 25, 2018.
Number of volumes: One (S. Hrg. 115–).

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Thomas Price, of Michigan, to be Secretary, Department of Health and Human Services.
Date: Jan. 18, 2017.
Number of volumes: One (S. Hrg. 115–228).

Scott Gottlieb, M.D., of Connecticut, to be Commissioner of Food and Drugs, Department of Health and Human Services.
Date: Apr. 5, 2017.
Number of volumes: One (S. Hrg. 115–341).
Elinore F. McCance-Katz, of Rhode Island, to be Assistant Secretary for Mental
Health and Substance Use, Department of Health and Human Services.
Date: Aug. 1, 2017.
Number of volumes: One (S. Hrg. 115–390).

Lance Allen Robertson, of Oklahoma, to be Assistant Secretary for Aging, Depart-
ment of Health and Human Services.
Date: Aug. 1, 2017.
Number of volumes: One (S. Hrg. 115–390).

Robert P. Kadlec, of New York, to be Medical Director in the Regular Corps of the
Public Health Service.
Date: Aug. 1, 2017.
Number of volumes: One (S. Hrg. 115–390).

Alex Azar, Indianapolis, IN, to serve as Secretary of Health and Human Services.
Date: Nov. 29, 2017.
Number of volumes: One (S. Hrg. 115–).
Number of volumes: One (S. Hrg. 115–).

David G. Zatezalo, of West Virginia, to be Assistant Secretary of Labor for Mine Safety and Health.
Date: Oct. 4, 2017.
Number of volumes: One (S. Hrg. 115–).

Kate S. O'Scannlain, of Maryland, to be Solicitor for the Department of Labor.
Date: Nov. 15, 2017.
Number of volumes: One (S. Hrg. 115–).

Preston Rutledge, of the District of Columbia, to be an Assistant Secretary of Labor.
  Date: Nov. 15, 2017.
Number of volumes: One (S. Hrg. 115–).

William Beach, of Kansas, to be Commissioner of Labor Statistics, Department of Labor.
Date: Dec. 5, 2017.
Number of volumes: One (S. Hrg. 115–).

Scott A. Mugno, of Pennsylvania, to be an Assistant Secretary of Labor.
Date: Dec. 5, 2017.
Number of volumes: One (S. Hrg. 115–).

EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

Janet Dhillon, of Pennsylvania, to be a Member of the Equal Employment Opportunity Commission.
Date: Sept. 19, 2017.
Number of volumes: One (S. Hrg. 115–).

Daniel M. Gade, of North Dakota, to be a Member of the Equal Employment Opportunity Commission.
Date: Sept. 19, 2017.
Number of volumes: One (S. Hrg. 115–).

Sharon Fast Gustafson, of Virginia, to be General Counsel of the Equal Employment Opportunity Commission.
Date: Apr. 10, 2018.
Number of volumes: One (S. Hrg. 115–).
Marvin Kaplan, of Kansas, to be a member of the National Labor Relations Board.
Date: July 13, 2017.
Number of volumes: One (S. Hrg. 115–374).

William J. Emanuel, of California, to be a member of the National Labor Relations Board.
Date: July 13, 2017.
Number of volumes: One (S. Hrg. 115–374).

Peter B. Robb, of Vermont, to be General Counsel of the National Labor Relations Board.
Date: Oct. 4, 2017.
Number of volumes: One (S. Hrg. 115–).  

John F. Ring, of the District of Columbia, to be a Member of the National Labor Relations Board.
Date: Mar. 1, 2018.
Number of volumes: One (S. Hrg. 115–).

HEARING BY THE SUBCOMMITTEE ON CHILDREN AND FAMILIES

RARE DISEASES: EXPEDITING TREATMENTS FOR PATIENTS
Examining rare diseases, focusing on expediting treatments for patients.
Number of volumes: One (S. Hrg. 115–).

HEARINGS BY THE SUBCOMMITTEE ON EMPLOYMENT AND WORKPLACE SAFETY
No hearings held by the subcommittee in the 115th Congress.

HEARINGS BY THE SUBCOMMITTEE ON PRIMARY HEALTH AND RETIREMENT SECURITY
ROUNDTABLE ON SMALL BUSINESS HEALTH PLANS
Examining small business health plans.
Date: Jan. 30, 2018.
Number of volumes: One (S. Hrg. 115–).

EXPLORING THE “GIG ECONOMY” AND THE FUTURE OF RETIREMENT SAVINGS
Examining the “Gig Economy” and the future of retirement savings.
FINANCIAL LITERACY: THE STARTING POINT FOR A SECURE RETIREMENT

Examining financial literacy, focusing on the starting point for a secure retirement.

Date: Aug. 21, 2018.
Number of volumes: One (S. Hrg. 115–).

HEALTHCARE IN RURAL AMERICA: EXAMINING EXPERIENCES AND COSTS

Examining health care in rural America, focusing on experiences and costs.

Date: Sept. 25, 2018.
Number of volumes: One (S. Hrg. 115–).
### IV. STATISTICAL SUMMARY

**ACTIVITIES OF THE COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS 115TH CONGRESS**

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2018</th>
<th><strong>TOTAL</strong></th>
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<tbody>
<tr>
<td><strong>Nominations</strong></td>
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<tr>
<td>Referred to Committee</td>
<td>36</td>
<td>27</td>
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<tr>
<td>Confirmed by Senate</td>
<td>23</td>
<td>12</td>
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<tr>
<td>Withdrawn (by house or personal request)</td>
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<td>Referred to President (pursuant to Rule XXXIX of Senate)</td>
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<td><strong>Communications</strong></td>
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<td>Presidential messages</td>
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<td><strong>Total</strong></td>
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<td><strong>Bills and Resolutions</strong></td>
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<td>Senate bills and joint resolutions</td>
<td>279</td>
<td>245</td>
<td>524</td>
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<td>House-passed bills, joint resolutions, and concurrent resolutions</td>
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<td>270</td>
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<td><strong>Total</strong></td>
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<td><strong>Hearing Days Held</strong></td>
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<td>Full Committee:</td>
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<tr>
<td>In Washington, DC</td>
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<td>29</td>
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<td>Out of town</td>
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<td>Subcommittees:</td>
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<td>In Washington, DC</td>
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<tr>
<td>Out of town</td>
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<tr>
<td><strong>Total</strong></td>
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<tr>
<td><strong>Executive Meetings</strong></td>
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<td>Full committee:</td>
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<tr>
<td>Subcommittees:</td>
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<td>8</td>
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<td>Conference weekends</td>
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<td><strong>Reports to the Senate</strong></td>
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<td>Senate bills and joint resolutions</td>
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<tr>
<td>House-passed bills</td>
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<td>Senate resolutions, concurrent resolutions, and special reports</td>
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<tr>
<td><strong>Total</strong></td>
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<td>Presidential veto override and enacted into law</td>
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<td>0</td>
<td>0</td>
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</table>

*Including bills acted upon on the floor and Senate and House bills listed on the Calendar or File. **Including omnibus hearings. *Including bills reported by, and discharged from, the Committee.
V. RULES OF PROCEDURE

RULES OF PROCEDURE (AS AGREED TO JANUARY 16, 2019)

Rule 1.—Subject to the provisions of rule XXVI, paragraph 5, of the Standing Rules of the Senate, regular meetings of the committee shall be held on the second and fourth Wednesday of each month, at 10:00 a.m., in room SD-430, Dirksen Senate Office Building. The chairman may, upon proper notice, call such additional meetings as he may deem necessary.

Rule 2.—The chairman of the committee or of a subcommittee, or if the chairman is not present, the ranking majority member present, shall preside at all meetings. The chairman may designate the ranking minority member to preside at hearings of the committee or subcommittee.

Rule 3.—Meetings of the committee or a subcommittee, including meetings to conduct hearings, shall be open to the public except as otherwise specifically provided in subsections (b) and (d) of rule 26.5 of the Standing Rules of the Senate.

Rule 4.—(a) Subject to paragraph (b), one-third of the membership of the committee, actually present, shall constitute a quorum for the purpose of transacting business. Any quorum of the committee which is composed of less than a majority of the members of the committee shall include at least one member of the majority and one member of the minority.

(b) A majority of the members of a subcommittee, actually present, shall constitute a quorum for the purpose of transacting business: provided, no measure or matter shall be ordered reported unless such majority shall include at least one member of the minority who is a member of the subcommittee. If, at any subcommittee meeting, a measure or matter cannot be ordered reported because of the absence of such a minority member, the measure or matter shall lay over for a day. If the presence of a member of the minority is not then obtained, a majority of the members of the subcommittee, actually present, may order such measure or matter reported.

(c) No measure or matter shall be ordered reported from the committee or a subcommittee unless a majority of the committee or subcommittee is physically present.

Rule 5.—With the approval of the chairman of the committee or subcommittee, one member thereof may conduct public hearings other than taking sworn testimony.

Rule 6.—Proxy voting shall be allowed on all measures and matters before the committee or a subcommittee if the absent member has been informed of the matter on which he is being recorded and has affirmatively requested that he be so recorded. While proxies may be voted on a motion to report a measure or matter from the committee, such a motion shall also require the concurrence of a majority of the members who are actually present at the time such action is taken.

The committee may poll any matters of committee business as a matter of unanimous consent; provided that every member is polled and every poll consists of the following two questions:

(1) Do you agree or disagree to poll the proposal; and
(2) Do you favor or oppose the proposal.
Rule 7.—There shall be prepared and kept a complete transcript or electronic recording adequate to fully record the proceedings of each committee or subcommittee meeting or conference whether or not such meetings or any part thereof is closed pursuant to the specific provisions of subsections (b) and (d) of rule 26.5 of the Standing Rules of the Senate, unless a majority of said members vote to forgo such a record. Such records shall contain the vote cast by each member of the committee or subcommittee on any question on which a “yea and nay” vote is demanded, and shall be available for inspection by any committee member. The clerk of the committee, or the clerk’s designee, shall have the responsibility to make appropriate arrangements to implement this rule.

Rule 8.—The committee and each subcommittee shall undertake, consistent with the provisions of rule XXVI, paragraph 4, of the Standing Rules of the Senate, to issue public announcement of any hearing or executive session it intends to hold at least one week prior to the commencement of such hearing or executive session. In the case of an executive session, the text of any bill or joint resolution to be considered must be provided to the chairman for prompt electronic distribution to the members of the committee.

Rule 9.—The committee or a subcommittee shall require all witnesses heard before it to file written statements of their proposed testimony at least 24 hours before a hearing, unless the chairman and the ranking minority member determine that there is good cause for failure to so file, and to limit their oral presentation to brief summaries of their arguments. Testimony may be filed electronically. The presiding officer at any hearing is authorized to limit the time of each witness appearing before the committee or a subcommittee. The committee or a subcommittee shall, as far as practicable, utilize testimony previously taken on bills and measures similar to those before it for consideration.

Rule 10.—Should a subcommittee fail to report back to the full committee on any measure within a reasonable time, the chairman may withdraw the measure from such subcommittee and report that fact to the full committee for further disposition.

Rule 11.—No subcommittee may schedule a meeting or hearing at a time designated for a hearing or meeting of the full committee. No more than one subcommittee executive meeting may be held at the same time.

Rule 12.—It shall be the duty of the chairman in accordance with section 133(c) of the Legislative Reorganization Act of 1946, as amended, to report or cause to be reported to the Senate, any measure or recommendation approved by the committee and to take or cause to be taken, necessary steps to bring the matter to a vote in the Senate.

Rule 13.—Whenever a meeting of the committee or subcommittee is closed pursuant to the provisions of subsection (b) or (d) of rule 26.5 of the Standing Rules of the Senate, no person other than members of the committee, members of the staff of the committee, and designated assistants to members of the committee shall be permitted to attend such closed session, except by special dispensation of the committee or subcommittee or the chairman thereof.

Rule 14.—The chairman of the committee or a subcommittee shall be empowered to adjourn any meeting of the committee or a
subcommittee if a quorum is not present within fifteen minutes of
the time schedule for such meeting.

Rule 15.—Whenever a bill or joint resolution shall be before the
committee or a subcommittee for final consideration, the clerk shall
distribute to each member of the committee or subcommittee a doc-
ument, prepared by the sponsor of the bill or joint resolution. If the
bill or joint resolution has no underlying statutory language, the
document shall consist of a detailed summary of the purpose and
impact of each section. If the bill or joint resolution repeals or
amends any statute or part thereof, the document shall consist of
a detailed summary of the underlying statute and the proposed
changes in each section of the underlying law and either a print
of the statute or the part or section thereof to be amended or re-
placed showing by stricken-through type, the part or parts to be
omitted and, in italics, the matter proposed to be added, along with
a summary of the proposed changes; or a side-by-side document
showing a comparison of current law, the proposed legislative
changes, and a detailed description of the proposed changes.

Rule 16.—An appropriate opportunity shall be given the minority
to examine the proposed text of committee reports prior to their fil-
ing or publication. In the event there are supplemental, minority,
or additional views, an appropriate opportunity shall be given the
majority to examine the proposed text prior to filing or publication.
Unless the chairman and ranking minority member agree on a
shorter period of time, the minority shall have no fewer than three
business days to prepare supplemental, minority or additional
views for inclusion in a committee report from the time the major-
ity makes the proposed text of the committee report available to
the minority.

Rule 17.—(a) The committee, or any subcommittee, may issue
subpoenas, or hold hearings to take sworn testimony or hear sub-
poenaeed witnesses, only if such investigative activity has been au-
thorized by majority vote of the committee.

(b) For the purpose of holding a hearing to take sworn testimony
or hear subpoenaed witnesses, three members of the committee or
subcommittee shall constitute a quorum: provided, with the concur-
rence of the chairman and ranking minority member of the com-
mittee or subcommittee, a single member may hear subpoenaed
witnesses or take sworn testimony.

(c) The committee may, by a majority vote, delegate the authority
to issue subpoenas to the chairman of the committee or a sub-
committee, or to any member designated by such chairman. Prior
to the issuance of each subpoena, the ranking minority member of
the committee or subcommittee, and any other member so request-
ing, shall be notified regarding the identity of the person to whom
it will be issued and the nature of the information sought and its
relationship to the authorized investigative activity, except where
the chairman of the committee or subcommittee, in consultation
with the ranking minority member, determines that such notice
would unduly impede the investigation. All information obtained
pursuant to such investigative activity shall be made available as
promptly as possible to each member of the committee requesting
same, or to any assistant to a member of the committee designated
by such member in writing, but the use of any such information is
subject to restrictions imposed by the rules of the Senate. Such information, to the extent that it is relevant to the investigation shall, if requested by a member, be summarized in writing as soon as practicable. Upon the request of any member, the chairman of the committee or subcommittee shall call an executive session to discuss such investigative activity or the issuance of any subpoena in connection therewith.

(d) Any witness summoned to testify at a hearing, or any witness giving sworn testimony, may be accompanied by counsel of his own choosing who shall be permitted, while the witness is testifying, to advise him of his legal rights.

(e) No confidential testimony taken or confidential material presented in an executive hearing, or any report of the proceedings of such an executive hearing, shall be made public, either in whole or in part or by way of summary, unless authorized by a majority of the members of the committee or subcommittee.

Rule 18.—Presidential nominees shall submit a statement of their background and financial interests, including the financial interests of their spouse and children living in their household, on a form approved by the committee which shall be sworn to as to its completeness and accuracy. The committee form shall be in two parts—

(I) information relating to employment, education and background of the nominee relating to the position to which the individual is nominated, and which is to be made public; and,

(II) information relating to financial and other background of the nominee, to be made public when the committee determines that such information bears directly on the nominee's qualifications to hold the position to which the individual is nominated.

Information relating to background and financial interests (parts I and II) shall not be required of nominees for less than full-time appointments to councils, commissions or boards when the committee determines that some or all of the information is not relevant to the nature of the position. Information relating to other background and financial interests (part II) shall not be required of any nominee when the committee determines that it is not relevant to the nature of the position.

Committee action on a nomination, including hearings or meetings to consider a motion to recommend confirmation, shall not be initiated until at least five days after the nominee submits the form required by this rule unless the chairman, with the concurrence of the ranking minority member, waives this waiting period.

Rule 19.—Subject to statutory requirements imposed on the committee with respect to procedure, the rules of the committee may be changed, modified, amended or suspended at any time; provided, not less than a majority of the entire membership so determine at a regular meeting with due notice, or at a meeting specifically called for that purpose.

Rule 20.—When the ratio of members on the committee is even, the term “majority” as used in the committee's rules and guidelines shall refer to the party of the chairman for purposes of party identification. Numerical requirements for quorums, votes and the like shall be unaffected.
Rule 21.—First degree amendments must be filed with the chairman at least 24 hours before an executive session. The chairman shall promptly distribute all filed amendments electronically to the members of the committee. The chairman may modify the filing requirements to meet special circumstances with the concurrence of the ranking minority member.

Rule 22.—In addition to the foregoing, the proceedings of the committee shall be governed by the Standing Rules of the Senate and the provisions of the Legislative Reorganization Act of 1946, as amended.

** * * * * * *

GUIDELINES OF THE SENATE COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS WITH RESPECT TO HEARINGS, Markup Sessions, and Related Matters

HEARINGS

Section 133A(a) of the Legislative Reorganization Act requires each committee of the Senate to publicly announce the date, place, and subject matter of any hearing at least one week prior to the commencement of such hearing.

The spirit of this requirement is to assure adequate notice to the public and other Members of the Senate as to the time and subject matter of proposed hearings. In the spirit of section 133A(a) and in order to assure that members of the committee are themselves fully informed and involved in the development of hearings:

1. Public notice of the date, place, and subject matter of each committee or subcommittee hearing should be inserted in the Congressional Record seven days prior to the commencement of such hearing.

2. At least seven days prior to public notice of each committee or subcommittee hearing, the majority should provide notice to the minority of the time, place and specific subject matter of such hearing.

3. At least three days prior to the date of such hearing, the committee or subcommittee should provide to each member a list of witnesses who have been or are proposed to be invited to appear.

4. The committee and its subcommittee should, to the maximum feasible extent, enforce the provisions of rule 9 of the committee rules as it relates to the submission of written statements of witnesses twenty-four hours in advance of a hearing. Witnesses will be urged to submit testimony even earlier whenever possible. When statements are received in advance of a hearing, the committee or subcommittee (as appropriate) should distribute copies of such statements to each of its members. Witness testimony may be submitted and distributed electronically.

EXECUTIVE SESSIONS FOR THE PURPOSE OF MARKING UP BILLS

In order to expedite the process of marking up bills and to assist each member of the committee so that there may be full and fair
consideration of each bill which the committee or a subcommittee is marking up the following procedures should be followed:

1. Seven days prior to the proposed date for an executive session for the purpose of marking up bills the committee or subcommittee (as appropriate) should provide written notice to each of its members as to the time, place, and specific subject matter of such session, including an agenda listing each bill or other matters to be considered and including:
   
   (a) a copy of each bill, joint resolution, or other legislative matter (or committee print thereof) to be considered at such executive session; and
   
   (b) a copy of a summary of the provisions of each bill, joint resolution, or other legislative matter to be considered at such executive session including, whenever possible, an explanation of changes to existing law proposed to be made.

2. Insofar as practical, prior to the scheduled date for an executive session for the purpose of marking up bills, the committee or a subcommittee (as appropriate) should provide each member with a copy of the printed record or a summary of any hearings conducted by the committee or a subcommittee with respect to each bill, joint resolution, or other legislative matter to be considered at such executive session.