

ROBERTS) was added as a cosponsor of S. 2793, a bill to enhance research and education in the areas of pharmaceutical and biotechnology science and engineering, including therapy development and manufacturing, analytical technologies, modeling, and informatics.

S. 3504

At the request of Mr. SANTORUM, the name of the Senator from Alabama (Mr. SESSIONS) was added as a cosponsor of S. 3504, a bill to amend the Public Health Service Act to prohibit the solicitation or acceptance of tissue from fetuses gestated for research purposes, and for other purposes.

S. 3547

At the request of Mr. SESSIONS, the names of the Senator from Iowa (Mr. GRASSLEY), the Senator from Texas (Mr. CORNYN) and the Senator from Ohio (Mr. DEWINE) were added as cosponsors of S. 3547, a bill to amend title 18, United States Code, with respect to fraud in connection with major disaster or emergency funds.

S. 3658

At the request of Mr. GRASSLEY, the names of the Senator from New Mexico (Mr. BINGAMAN) and the Senator from Oregon (Mr. WYDEN) were added as cosponsors of S. 3658, a bill to reauthorize customs and trade functions and programs in order to facilitate legitimate international trade with the United States, and for other purposes.

S. 3667

At the request of Mr. FRIST, the name of the Senator from Hawaii (Mr. AKAKA) was added as a cosponsor of S. 3667, a bill to promote nuclear non-proliferation in North Korea.

S. RES. 531

At the request of Mr. SANTORUM, his name was added as a cosponsor of S. Res. 531, a resolution to urge the President to appoint a Presidential Special Envoy for Sudan.

At the request of Mr. LIEBERMAN, the names of the Senator from Nebraska (Mr. NELSON), the Senator from Colorado (Mr. SALAZAR), the Senator from Wyoming (Mr. THOMAS) and the Senator from Minnesota (Mr. DAYTON) were added as cosponsors of S. Res. 531, supra.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. BURR (for himself, Mr. KENNEDY, Mr. ENZI, Mr. HARKIN, Mr. GREGG, Mr. FRIST, and Ms. MIKULSKI):

S. 3678. A bill to amend the Public Health Service Act with respect to public health security and all-hazards preparedness and response, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

Mr. BURR. Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 3678

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

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the “Pandemic and All-Hazards Preparedness Act”.

(b) TABLE OF CONTENTS.—The table of contents of this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—NATIONAL PREPAREDNESS AND RESPONSE, LEADERSHIP, ORGANIZATION, AND PLANNING

Sec. 101. Public health and medical preparedness and response functions of the Secretary of Health and Human Services.

Sec. 102. Assistant Secretary for Preparedness and Response.

Sec. 103. National Health Security Strategy.

TITLE II—PUBLIC HEALTH SECURITY PREPAREDNESS

Sec. 201. Improving State and local public health security.

Sec. 202. Using information technology to improve situational awareness in public health emergencies.

Sec. 203. Public health workforce enhancements.

Sec. 204. Vaccine tracking and distribution.

Sec. 205. National Science Advisory Board for Biosecurity.

TITLE III—ALL-HAZARDS MEDICAL SURGE CAPACITY

Sec. 301. National Disaster Medical System.

Sec. 302. Enhancing medical surge capacity.

Sec. 303. Encouraging health professional volunteers.

Sec. 304. Core education and training.

Sec. 305. Partnerships for state and regional hospital preparedness to improve surge capacity.

Sec. 306. Enhancing the role of the Department of Veterans Affairs.

TITLE I—NATIONAL PREPAREDNESS AND RESPONSE, LEADERSHIP, ORGANIZATION, AND PLANNING

SEC. 101. PUBLIC HEALTH AND MEDICAL PREPAREDNESS AND RESPONSE FUNCTIONS OF THE SECRETARY OF HEALTH AND HUMAN SERVICES.

Title XXVIII of the Public Health Service Act (42 U.S.C. 300hh–11 et seq.) is amended—

(1) by striking the title heading and inserting the following:

“TITLE XXVIII—NATIONAL ALL-HAZARDS PREPAREDNESS FOR PUBLIC HEALTH EMERGENCIES”;

(2) by amending subtitle A to read as follows:

“Subtitle A—National All-Hazards Preparedness and Response Planning, Coordinating, and Reporting

“SEC. 2801. PUBLIC HEALTH AND MEDICAL PREPAREDNESS AND RESPONSE FUNCTIONS.

“(a) IN GENERAL.—The Secretary of Health and Human Services shall lead all Federal public health and medical response to public health emergencies and incidents covered by the National Response Plan developed pursuant to section 502(6) of the Homeland Security Act of 2002, or any successor plan.

“(b) INTERAGENCY AGREEMENT.—The Secretary, in collaboration with the Secretary of Veterans Affairs, the Secretary of Transportation, the Secretary of Defense, the Secretary of Homeland Security, and the head of any other relevant Federal agency, shall establish an interagency agreement, consistent with the National Response Plan or any successor plan, under which agreement the Secretary of Health and Human Services shall

assume operational control of emergency public health and medical response assets, as necessary, in the event of a public health emergency.”.

SEC. 102. ASSISTANT SECRETARY FOR PREPAREDNESS AND RESPONSE.

(a) ASSISTANT SECRETARY FOR PREPAREDNESS AND RESPONSE.—Subtitle B of title XXVIII of the Public Health Service Act (42 U.S.C. 300hh–11 et seq.) is amended—

(1) in the subtitle heading, by inserting “All-Hazards” before “Emergency Preparedness”;

(2) by redesignating section 2811 as section 2812;

(3) by inserting after the subtitle heading the following new section:

“SEC. 2811. COORDINATION OF PREPAREDNESS FOR AND RESPONSE TO ALL-HAZARDS PUBLIC HEALTH EMERGENCIES.

“(a) IN GENERAL.—There is established within the Department of Health and Human Services the position of the Assistant Secretary for Preparedness and Response. The President, with the advice and consent of the Senate, shall appoint an individual to serve in such position. Such Assistant Secretary shall report to the Secretary.

“(b) DUTIES.—Subject to the authority of the Secretary, the Assistant Secretary for Preparedness and Response shall carry out the following functions:

“(1) LEADERSHIP.—Serve as the principal advisor to the Secretary on all matters related to Federal public health and medical preparedness and response for public health emergencies.

“(2) PERSONNEL.—Register, credential, organize, train, equip, and have the authority to deploy Federal public health and medical personnel under the authority of the Secretary, including the National Disaster Medical System, and coordinate such personnel with the Medical Reserve Corps and the Emergency System for Advance Registration of Volunteer Health Professionals.

“(3) COUNTERMEASURES.—

“(A) OVERSIGHT.—Oversee advanced research, development, and procurement of qualified countermeasures (as defined in section 319F–1) and qualified pandemic or epidemic products (as defined in section 319F–3).

“(B) STRATEGIC NATIONAL STOCKPILE.—Maintain the Strategic National Stockpile in accordance with section 319F–2, including conducting an annual review (taking into account at-risk individuals) of the contents of the stockpile, including non-pharmaceutical supplies, and make necessary additions or modifications to the contents based on such review.

“(4) COORDINATION.—

“(A) FEDERAL INTEGRATION.—Coordinate with relevant Federal officials to ensure integration of Federal preparedness and response activities for public health emergencies.

“(B) STATE, LOCAL, AND TRIBAL INTEGRATION.—Coordinate with State, local, and tribal public health officials, the Emergency Management Assistance Compact, health care systems, and emergency medical service systems to ensure effective integration of Federal public health and medical assets during a public health emergency.

“(C) EMERGENCY MEDICAL SERVICES.—Promote improved emergency medical services medical direction, system integration, research, and uniformity of data collection, treatment protocols, and policies with regard to public health emergencies.

“(5) LOGISTICS.—In coordination with the Secretary of Veterans Affairs, the Secretary of Homeland Security, the General Services Administration, and other public and private

entities, provide logistical support for medical and public health aspects of Federal responses to public health emergencies.

“(6) LEADERSHIP.—Provide leadership in international programs, initiatives, and policies that deal with public health and medical emergency preparedness and response.

“(c) FUNCTIONS.—The Assistant Secretary for Preparedness and Response shall—

“(1) have authority over and responsibility for the functions, personnel, assets, and liabilities of the following—

“(A) the National Disaster Medical System (in accordance with section 301 of the Pandemic and All-Hazards Preparedness Act);

“(B) the Hospital Preparedness Cooperative Agreement Program pursuant to section 319C-2; and

“(C) the Public Health Preparedness Cooperative Agreement Program pursuant to section 319C-1;

“(2) exercise the responsibilities and authorities of the Secretary with respect to the coordination of—

“(A) the Medical Reserve Corps pursuant to section 2813 as added by the Pandemic and All-Hazards Preparedness Act;

“(B) the Emergency System for Advance Registration of Volunteer Health Professionals pursuant to section 319I;

“(C) the Strategic National Stockpile; and

“(D) the Cities Readiness Initiative; and

“(3) assume other duties as determined appropriate by the Secretary.”; and

(4) by striking “Assistant Secretary for Public Health Emergency Preparedness” each place it appears and inserting “Assistant Secretary for Preparedness and Response”.

(b) TRANSFER OF FUNCTIONS; REFERENCES.—

(1) TRANSFER OF FUNCTIONS.—There shall be transferred to the Office of the Assistant Secretary for Preparedness and Response the functions, personnel, assets, and liabilities of the Assistant Secretary for Public Health Emergency Preparedness as in effect on the day before the date of enactment of this Act.

(2) REFERENCES.—Any reference in any Federal law, Executive order, rule, regulation, or delegation of authority, or any document of or pertaining to the Assistant Secretary for Public Health Emergency Preparedness as in effect the day before the date of enactment of this Act, shall be deemed to be a reference to the Assistant Secretary for Preparedness and Response.

SEC. 103. NATIONAL HEALTH SECURITY STRATEGY.

Title XXVIII of the Public Health Service Act (300hh-11 et seq.), as amended by section 101, is amended by inserting after section 2801 the following:

“SEC. 2802. NATIONAL HEALTH SECURITY STRATEGY.

“(a) IN GENERAL.—

“(1) PREPAREDNESS AND RESPONSE REGARDING PUBLIC HEALTH EMERGENCIES.—Beginning in 2009 and every 4 years thereafter, the Secretary shall prepare and submit to the relevant Committees of Congress a coordinated strategy and any revisions thereof, and an accompanying implementation plan for public health emergency preparedness and response. The strategy shall identify the process for achieving the preparedness goals described in subsection (b) and shall be consistent with the National Preparedness Goal, the National Incident Management System, and the National Response Plan developed pursuant to section 502(6) of the Homeland Security Act of 2002, or any successor plan.

“(2) EVALUATION OF PROGRESS.—The National Health Security Strategy shall include an evaluation of the progress made by Federal, State, local, and tribal entities, based on the evidence-based benchmarks and objective standards that measure levels of

preparedness established pursuant to section 319C-1(g). Such evaluation shall include aggregate and State-specific breakdowns of obligated funding spent by major category (as defined by the Secretary) for activities funded through awards pursuant to sections 319C-1 and 319C-2.

“(3) PUBLIC HEALTH WORKFORCE.—In 2009, the National Health Security Strategy shall include a national strategy for establishing an effective and prepared public health workforce, including defining the functions, capabilities, and gaps in such workforce, and identifying strategies to recruit, retain, and protect such workforce from workplace exposures during public health emergencies.

“(b) PREPAREDNESS GOALS.—The strategy under subsection (a) shall include provisions in furtherance of the following:

“(1) INTEGRATION.—Integrating public health and public and private medical capabilities with other first responder systems, including through—

“(A) the periodic evaluation of Federal, State, local, and tribal preparedness and response capabilities through drills and exercises; and

“(B) integrating public and private sector public health and medical donations and volunteers.

“(2) PUBLIC HEALTH.—Developing and sustaining Federal, State, local, and tribal essential public health security capabilities, including the following:

“(A) Disease situational awareness domestically and abroad, including detection, identification, and investigation.

“(B) Disease containment including capabilities for isolation, quarantine, social distancing, and decontamination.

“(C) Risk communication and public preparedness.

“(D) Rapid distribution and administration of medical countermeasures.

“(3) MEDICAL.—Increasing the preparedness, response capabilities, and surge capacity of hospitals, other health care facilities (including mental health facilities), and trauma care and emergency medical service systems with respect to public health emergencies, which shall include developing plans for the following:

“(A) Strengthening public health emergency medical management and treatment capabilities.

“(B) Medical evacuation and fatality management.

“(C) Rapid distribution and administration of medical countermeasures.

“(D) Effective utilization of any available public and private mobile medical assets and integration of other Federal assets.

“(E) Protecting health care workers and health care first responders from workplace exposures during a public health emergency.

“(4) AT-RISK INDIVIDUALS.—

“(A) Taking into account the public health and medical needs of at-risk individuals in the event of a public health emergency.

“(B) For purpose of this title and section 319, the term ‘at-risk individuals’ means children, pregnant women, senior citizens and other individuals who have special needs in the event of a public health emergency, as determined by the Secretary.

“(5) COORDINATION.—Minimizing duplication of, and ensuring coordination between Federal, State, local, and tribal planning, preparedness, and response activities (including the State Emergency Management Assistance Compact). Such planning shall be consistent with the National Response Plan, or any successor plan, and National Incident Management System and the National Preparedness Goal.

“(6) CONTINUITY OF OPERATIONS.—Maintaining vital public health and medical services to allow for optimal Federal, State, local,

and tribal operations in the event of a public health emergency.”.

TITLE II—PUBLIC HEALTH SECURITY PREPAREDNESS

SEC. 201. IMPROVING STATE AND LOCAL PUBLIC HEALTH SECURITY.

Section 319C-1 of the Public Health Service Act (42 U.S.C. 247d-3a) is amended—

(1) by amending the heading to read as follows: “improving state and local public health security.”;

(2) by striking subsections (a) through (i) and inserting the following:

“(a) IN GENERAL.—To enhance the security of the United States with respect to public health emergencies, the Secretary shall award cooperative agreements to eligible entities to enable such entities to conduct the activities described in subsection (d).

“(b) ELIGIBLE ENTITIES.—To be eligible to receive an award under subsection (a), an entity shall—

“(1)(A) be a State;

“(B) be a political subdivision determined by the Secretary to be eligible for an award under this section (based on criteria described in subsection (h)(4)); or

“(C) be a consortium of entities described in subparagraph (A); and

“(2) prepare and submit to the Secretary an application at such time, and in such manner, and containing such information as the Secretary may require, including—

“(A) an All-Hazards Public Health Emergency Preparedness and Response Plan which shall include—

“(i) a description of the activities such entity will carry out under the agreement to meet the goals identified under section 2802;

“(ii) a pandemic influenza plan consistent with the requirements of paragraphs (2) and (5) of subsection (g);

“(iii) preparedness and response strategies and capabilities that take into account the medical and public health needs of at-risk individuals in the event of a public health emergency;

“(iv) a description of the mechanism the entity will implement to utilize the Emergency Management Assistance Compact or other mutual aid agreements for medical and public health mutual aid; and

“(v) a description of how the entity will include the State Area Agency on Aging in public health emergency preparedness;

“(B) an assurance that the entity will report to the Secretary on an annual basis (or more frequently as determined by the Secretary) on the evidence-based benchmarks and objective standards established by the Secretary to evaluate the preparedness and response capabilities of such entity;

“(C) an assurance that the entity will conduct, on at least an annual basis, an exercise or drill that meets any criteria established by the Secretary to test the preparedness and response capabilities of such entity, and that the entity will report back to the Secretary within the application of the following year on the strengths and weaknesses identified through such exercise or drill, and corrective actions taken to address material weaknesses;

“(D) an assurance that the entity will provide to the Secretary the data described under section 319D(d)(3) as determined feasible by the Secretary;

“(E) an assurance that the entity will conduct activities to inform and educate the hospitals within the jurisdiction of such entity on the role of such hospitals in the plan required under subparagraph (A);

“(F) an assurance that the entity, with respect to the plan described under subparagraph (A), has developed and will implement an accountability system to ensure that

such entity make satisfactory annual improvement and describe such system in the plan under subparagraph (A);

“(G) a description of the means by which to obtain public comment and input on the plan described in subparagraph (A) and on the implementation of such plan, that shall include an advisory committee or other similar mechanism for obtaining comment from the public and from other State, local, and tribal stakeholders; and

“(H) as relevant, a description of the process used by the entity to consult with local departments of public health to reach consensus, approval, or concurrence on the relative distribution of amounts received under this section.

“(c) LIMITATION.—Beginning in fiscal year 2009, the Secretary may not award a cooperative agreement to a State unless such State is a participant in the Emergency System for Advance Registration of Volunteer Health Professionals described in section 319I.

“(d) USE OF FUNDS.—

“(1) IN GENERAL.—An award under subsection (a) shall be expended for activities to achieve the preparedness goals described under paragraphs (1), (2), (4), (5), and (6) of section 2802(b).

“(2) EFFECT OF SECTION.—Nothing in this subsection may be construed as establishing new regulatory authority or as modifying any existing regulatory authority.

“(e) COORDINATION WITH LOCAL RESPONSE CAPABILITIES.—An entity shall, to the extent practicable, ensure that activities carried out under an award under subsection (a) are coordinated with activities of relevant Metropolitan Medical Response Systems, local public health departments, the Cities Readiness Initiative, and local emergency plans.

“(f) CONSULTATION WITH HOMELAND SECURITY.—In making awards under subsection (a), the Secretary shall consult with the Secretary of Homeland Security to—

“(1) ensure maximum coordination of public health and medical preparedness and response activities with the Metropolitan Medical Response System, and other relevant activities;

“(2) minimize duplicative funding of programs and activities;

“(3) analyze activities, including exercises and drills, conducted under this section to develop recommendations and guidance on best practices for such activities, and

“(4) disseminate such recommendations and guidance, including through expanding existing lessons learned information system to create a single Internet-based point of access for sharing and distributing medical and public health best practices and lessons learned from drills, exercises, disasters, and other emergencies.

“(g) ACHIEVEMENT OF MEASURABLE EVIDENCE-BASED BENCHMARKS AND OBJECTIVE STANDARDS.—

“(1) IN GENERAL.—Not later than 180 days after the date of enactment of the Pandemic and All-Hazards Preparedness Act, the Secretary shall develop or where appropriate adopt, and require the application of measurable evidence-based benchmarks and objective standards that measure levels of preparedness with respect to the activities described in this section and with respect to activities described in section 319C-2. In developing such benchmarks and standards, the Secretary shall consult with and seek comments from State, local, and tribal officials and private entities, as appropriate. Where appropriate, the Secretary shall incorporate existing objective standards. Such benchmarks and standards shall, at a minimum, require entities to—

“(A) demonstrate progress toward achieving the preparedness goals described in section 2802 in a reasonable timeframe determined by the Secretary;

“(B) annually report grant expenditures to the Secretary (in a form prescribed by the Secretary) who shall ensure that such information is included on the Federal Internet-based point of access developed under subsection (f); and

“(C) at least annually, test and exercise the public health and medical emergency preparedness and response capabilities of the grantee, based on criteria established by the Secretary.

“(2) CRITERIA FOR PANDEMIC INFLUENZA PLANS.—

“(A) IN GENERAL.—Not later than 180 days after the date of enactment of the Pandemic and All-Hazards Preparedness Act, the Secretary shall develop and disseminate to the chief executive officer of each State criteria for an effective State plan for responding to pandemic influenza.

“(B) RULE OF CONSTRUCTION.—Nothing in this section shall be construed to require the duplication of Federal efforts with respect to the development of criteria or standards, without regard to whether such efforts were carried out prior to or after the date of enactment of this section.

“(3) TECHNICAL ASSISTANCE.—The Secretary shall, as determined appropriate by the Secretary, provide to a State, upon request, technical assistance in meeting the requirements of this section, including the provision of advice by experts in the development of high-quality assessments, the setting of State objectives and assessment methods, the development of measures of satisfactory annual improvement that are valid and reliable, and other relevant areas.

“(4) NOTIFICATION OF FAILURES.—The Secretary shall develop and implement a process to notify entities that are determined by the Secretary to have failed to meet the requirements of paragraph (1) or (2). Such process shall provide such entities with the opportunity to correct such noncompliance. An entity that fails to correct such noncompliance shall be subject to paragraph (5).

“(5) WITHHOLDING OF AMOUNTS FROM ENTITIES THAT FAIL TO ACHIEVE BENCHMARKS OR SUBMIT INFLUENZA PLAN.—Beginning with fiscal year 2009, and in each succeeding fiscal year, the Secretary shall—

“(A) withhold from each entity that has failed substantially to meet the benchmarks and performance measures described in paragraph (1) for a previous fiscal year (beginning with fiscal year 2008), pursuant to the process developed under paragraph (4), the amount described in paragraph (6); and

“(B) withhold from each entity that has failed to submit to the Secretary a plan for responding to pandemic influenza that meets the criteria developed under paragraph (2), the amount described in paragraph (6).

“(6) AMOUNTS DESCRIBED.—

“(A) IN GENERAL.—The amounts described in this paragraph are the following amounts that are payable to an entity for activities described in section 319C-1 or 319C-2:

“(i) For the fiscal year immediately following a fiscal year in which an entity experienced a failure described in subparagraph (A) or (B) of paragraph (5) by the entity, an amount equal to 10 percent of the amount the entity was eligible to receive for such fiscal year.

“(ii) For the fiscal year immediately following two consecutive fiscal years in which an entity experienced such a failure, an amount equal to 15 percent of the amount the entity was eligible to receive for such fiscal year, taking into account the withholding of funds for the immediately preceding fiscal year under clause (i).

“(iii) For the fiscal year immediately following three consecutive fiscal years in which an entity experienced such a failure, an amount equal to 20 percent of the amount

the entity was eligible to receive for such fiscal year, taking into account the withholding of funds for the immediately preceding fiscal years under clauses (i) and (ii).

“(iv) For the fiscal year immediately following four consecutive fiscal years in which an entity experienced such a failure, an amount equal to 25 percent of the amount the entity was eligible to receive for such a fiscal year, taking into account the withholding of funds for the immediately preceding fiscal years under clauses (i), (ii), and (iii).

“(B) SEPARATE ACCOUNTING.—Each failure described in subparagraph (A) or (B) of paragraph (5) shall be treated as a separate failure for purposes of calculating amounts withheld under subparagraph (A).

“(7) REALLOCATION OF AMOUNTS WITHHELD.—

“(A) IN GENERAL.—The Secretary shall make amounts withheld under paragraph (6) available for making awards under section 319C-2 to entities described in subsection (b)(1) of such section.

“(B) PREFERENCE IN REALLOCATION.—In making awards under section 319C-2 with amounts described in subparagraph (A), the Secretary shall give preference to eligible entities (as described in section 319C-2(b)(1)) that are located in whole or in part in States from which amounts have been withheld under paragraph (6).

“(8) WAIVER OR REDUCE WITHHOLDING.—The Secretary may waive or reduce the withholding described in paragraph (6), for a single entity or for all entities in a fiscal year, if the Secretary determines that mitigating conditions exist that justify the waiver or reduction.”;

(3) by redesignating subsection (j) as subsection (h);

(4) in subsection (h), as so redesignated—

(A) by striking paragraphs (1) through (3)(A) and inserting the following:

“(1) AUTHORIZATION OF APPROPRIATIONS.—

“(A) IN GENERAL.—For the purpose of carrying out this section, there is authorized to be appropriated \$824,000,000 fiscal year 2007 for awards pursuant to paragraph (3) (subject to the authority of the Secretary to make awards pursuant to paragraphs (4) and (5)), and such sums as may be necessary for each of fiscal years 2008 through 2011.

“(B) COORDINATION.—There are authorized to be appropriated, \$10,000,000 for fiscal year 2007 to carry out subsection (f)(3).

“(C) REQUIREMENT FOR STATE MATCHING FUNDS.—Beginning in fiscal year 2009, in the case of any State or consortium of two or more States, the Secretary may not award a cooperative agreement under this section unless the State or consortium of States agree that, with respect to the amount of the cooperative agreement awarded by the Secretary, the State or consortium of States will make available (directly or through donations from public or private entities) non-Federal contributions in an amount equal to—

“(i) for the first fiscal year of the cooperative agreement, not less than 5 percent of such costs (\$1 for each \$20 of Federal funds provided in the cooperative agreement); and

“(ii) for any second fiscal year of the cooperative agreement, and for any subsequent fiscal year of such cooperative agreement, not less than 10 percent of such costs (\$1 for each \$10 of Federal funds provided in the cooperative agreement).

“(D) DETERMINATION OF AMOUNT OF NON-FEDERAL CONTRIBUTIONS.—As determined by the Secretary, non-Federal contributions required in subparagraph (C) may be provided directly or through donations from public or private entities and may be in cash or in kind, fairly evaluated, including plant, equipment or services. Amounts provided by

the Federal government, or services assisted or subsidized to any significant extent by the Federal government, may not be included in determining the amount of such non-Federal contributions.

“(2) MAINTAINING STATE FUNDING.—

“(A) IN GENERAL.—An entity that receives an award under this section shall maintain expenditures for public health security at a level that is not less than the average level of such expenditures maintained by the entity for the preceding 2 year period.

“(B) RULE OF CONSTRUCTION.—Nothing in this section shall be construed to prohibit the use of awards under this section to pay salary and related expenses of public health and other professionals employed by State, local, or tribal public health agencies who are carrying out activities supported by such awards (regardless of whether the primary assignment of such personnel is to carry out such activities).

“(3) DETERMINATION OF AMOUNT.—

“(A) IN GENERAL.—The Secretary shall award cooperative agreements under subsection (a) to each State or consortium of 2 or more States that submits to the Secretary an application that meets the criteria of the Secretary for the receipt of such an award and that meets other implementation conditions established by the Secretary for such awards.”;

(B) in paragraph (4)(A)—

(i) by striking “2003” and inserting “2007”; and

(ii) by striking “(A)(i)(I)”;

(C) in paragraph (4)(D), by striking “2002” and inserting “2006”;

(D) in paragraph (5), by striking “2003” and inserting “2007”; and

(E) by striking paragraph (6) and inserting the following:

“(6) FUNDING OF LOCAL ENTITIES.—The Secretary shall, in making awards under this section, ensure that with respect to the cooperative agreement awarded, the entity make available appropriate portions of such award to political subdivisions and local departments of public health through a process involving the consensus, approval or concurrence with such local entities.”; and

(5) by adding at the end the following:

“(i) ADMINISTRATIVE AND FISCAL RESPONSIBILITY.—

“(1) ANNUAL REPORTING REQUIREMENTS.—Each entity shall prepare and submit to the Secretary annual reports on its activities under this section and section 319C-2. Each such report shall be prepared by, or in consultation with, the health department. In order to properly evaluate and compare the performance of different entities assisted under this section and section 319C-2 and to assure the proper expenditure of funds under this section and section 319C-2, such reports shall be in such standardized form and contain such information as the Secretary determines (after consultation with the States) to be necessary to—

“(A) secure an accurate description of those activities;

“(B) secure a complete record of the purposes for which funds were spent, and of the recipients of such funds;

“(C) describe the extent to which the entity has met the goals and objectives it set forth under this section or section 319C-2; and

“(D) determine the extent to which funds were expended consistent with the entity’s application transmitted under this section or section 319C-2.

“(2) AUDITS; IMPLEMENTATION.—

“(A) IN GENERAL.—Each entity receiving funds under this section or section 319C-2 shall, not less often than once every 2 years, audit its expenditures from amounts received under this section or section 319C-2.

Such audits shall be conducted by an entity independent of the agency administering a program funded under this section or section 319C-2 in accordance with the Comptroller General’s standards for auditing governmental organizations, programs, activities, and functions and generally accepted auditing standards. Within 30 days following the completion of each audit report, the entity shall submit a copy of that audit report to the Secretary.

“(B) REPAYMENT.—Each entity shall repay to the United States amounts found by the Secretary, after notice and opportunity for a hearing to the entity, not to have been expended in accordance with this section or section 319C-2 and, if such repayment is not made, the Secretary may offset such amounts against the amount of any allotment to which the entity is or may become entitled under this section or section 319C-2 or may otherwise recover such amounts.

“(C) WITHHOLDING OF PAYMENT.—The Secretary may, after notice and opportunity for a hearing, withhold payment of funds to any entity which is not using its allotment under this section or section 319C-2 in accordance with such section. The Secretary may withhold such funds until the Secretary finds that the reason for the withholding has been removed and there is reasonable assurance that it will not recur.

“(3) MAXIMUM CARRYOVER AMOUNT.—

“(A) IN GENERAL.—For each fiscal year, the Secretary, in consultation with the States and political subdivisions, shall determine the maximum percentage amount of an award under this section that an entity may carryover to the succeeding fiscal year.

“(B) AMOUNT EXCEEDED.—For each fiscal year, if the percentage amount of an award under this section unexpended by an entity exceeds the maximum percentage permitted by the Secretary under subparagraph (A), the entity shall return to the Secretary the portion of the unexpended amount that exceeds the maximum amount permitted to be carried over by the Secretary.

“(C) ACTION BY SECRETARY.—The Secretary shall make amounts returned to the Secretary under subparagraph (B) available for awards under section 319C-2(b)(1). In making awards under section 319C-2(b)(1) with amounts collected under this paragraph the Secretary shall give preference to entities that are located in whole or in part in States from which amounts have been returned under subparagraph (B).

“(D) WAIVER.—An entity may apply to the Secretary for a waiver of the maximum percentage amount under subparagraph (A). Such an application for a waiver shall include an explanation why such requirement should not apply to the entity and the steps taken by such entity to ensure that all funds under an award under this section will be expended appropriately.

“(E) WAIVE OR REDUCE WITHHOLDING.—The Secretary may waive the application of subparagraph (B) for a single entity pursuant to subparagraph (D) or for all entities in a fiscal year, if the Secretary determines that mitigating conditions exist that justify the waiver or reduction.”.

SEC. 202. USING INFORMATION TECHNOLOGY TO IMPROVE SITUATIONAL AWARENESS IN PUBLIC HEALTH EMERGENCIES.

Section 319D of the Public Health Service Act (42 U.S.C. 247d-4) is amended—

(1) in subsection (a)(1), by inserting “domestically and abroad” after “public health threats”; and

(2) by adding at the end the following:

“(d) PUBLIC HEALTH SITUATIONAL AWARENESS.—

“(1) IN GENERAL.—Not later than 2 years after the date of enactment of the Pandemic and All-Hazards Preparedness Act, the Sec-

retary, in collaboration with State, local, and tribal public health officials, shall establish a near real-time electronic nationwide public health situational awareness capability through an interoperable network of systems to share data and information to enhance early detection of rapid response to, and management of, potentially catastrophic infectious disease outbreaks and other public health emergencies that originate domestically or abroad. Such network shall be built on existing State situational awareness systems or enhanced systems that enable such connectivity.

“(2) STRATEGIC PLAN.—Not later than 180 days after the date of enactment of the Pandemic and All-Hazards Preparedness Act, the Secretary shall submit to the appropriate committees of Congress, a strategic plan that demonstrates the steps the Secretary will undertake to develop, implement, and evaluate the network described in paragraph (1), utilizing the elements described in paragraph (3).

“(3) ELEMENTS.—The network described in paragraph (1) shall include data and information transmitted in a standardized format from—

“(A) State, local, and tribal public health entities, including public health laboratories;

“(B) Federal health agencies;

“(C) zoonotic disease monitoring systems;

“(D) public and private sector health care entities, hospitals, pharmacies, poison control centers or professional organizations in the field of poison control, and clinical laboratories, to the extent practicable and provided that such data are voluntarily provided simultaneously to the Secretary and appropriate State, local, and tribal public health agencies; and

“(E) such other sources as the Secretary may deem appropriate.

“(4) RULE OF CONSTRUCTION.—Paragraph (3) shall not be construed as requiring separate reporting of data and information from each source listed.

“(5) REQUIRED ACTIVITIES.—In establishing and operating the network described in paragraph (1), the Secretary shall—

“(A) utilize applicable interoperability standards as determined by the Secretary through a joint public and private sector process;

“(B) define minimal data elements for such network;

“(C) in collaboration with State, local, and tribal public health officials, integrate and build upon existing State, local, and tribal capabilities, ensuring simultaneous sharing of data, information, and analyses from the network described in paragraph (1) with State, local, and tribal public health agencies; and

“(D) in collaboration with State, local, and tribal public health officials, develop procedures and standards for the collection, analysis, and interpretation of data that States, regions, or other entities collect and report to the network described in paragraph (1).

“(e) STATE AND REGIONAL SYSTEMS TO ENHANCE SITUATIONAL AWARENESS IN PUBLIC HEALTH EMERGENCIES.—

“(1) IN GENERAL.—To implement the network described in section (d), the Secretary may award grants to States to enhance the ability of such States to establish or operate a coordinated public health situational awareness system for regional or Statewide early detection of, rapid response to, and management of potentially catastrophic infectious disease outbreaks and public health emergencies, in collaboration with public health agencies, sentinel hospitals, clinical laboratories, pharmacies, poison control centers, other health care organizations, or animal health organizations within such States.

“(2) ELIGIBILITY.—To be eligible to receive a grant under paragraph (1), the State shall submit to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require, including an assurance that the State will submit to the Secretary—

“(A) reports of such data, information, and metrics as the Secretary may require;

“(B) a report on the effectiveness of the systems funded under the grant; and

“(C) a description of the manner in which grant funds will be used to enhance the timelines and comprehensiveness of efforts to detect, respond to, and manage potentially catastrophic infectious disease outbreaks and public health emergencies.

“(3) USE OF FUNDS.—A State that receives an award under this subsection—

“(A) shall establish, enhance, or operate a coordinated public health situational awareness system for regional or Statewide early detection of, rapid response to, and management of potentially catastrophic infectious disease outbreaks and public health emergencies; and

“(B) may award grants or contracts to entities described in paragraph (1) within or serving such State to assist such entities in improving the operation of information technology systems, facilitating the secure exchange of data and information, and training personnel to enhance the operation of the system described in paragraph (A).

“(4) LIMITATION.—Information technology systems acquired or implemented using grants awarded under this section must be compliant with—

“(A) interoperability and other technological standards, as determined by the Secretary; and

“(B) data collection and reporting requirements for the network described in subsection (d).

“(5) INDEPENDENT EVALUATION.—Not later than 4 years after the date of enactment of the Pandemic and All-Hazards Preparedness Act, the Government Accountability Office shall conduct an independent evaluation, and submit to the Secretary and the appropriate committees of Congress a report, concerning the activities conducted under this subsection and subsection (d).

“(f) GRANTS FOR REAL-TIME SURVEILLANCE IMPROVEMENT.—

“(1) IN GENERAL.—The Secretary may award grants to eligible entities to carry out projects described under paragraph (4).

“(2) ELIGIBLE ENTITY.—For purposes of this section, the term ‘eligible entity’ means an entity that is—

“(A)(i) a hospital, clinical laboratory, university; or

“(ii) poison control center or professional organization in the field of poison control; and

“(B) a participant in the network established under subsection (d).

“(3) APPLICATION.—Each eligible entity desiring a grant under this section shall submit to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require.

“(4) USE OF FUNDS.—

“(A) IN GENERAL.—An eligible entity described in paragraph (2)(A)(i) that receives a grant under this section shall use the funds awarded pursuant to such grant to carry out a pilot demonstration project to purchase and implement the use of advanced diagnostic medical equipment to analyze real-time clinical specimens for pathogens of public health or bioterrorism significance and report any results from such project to State, local, and tribal public health entities and the network established under subsection (d).

“(B) OTHER ENTITIES.—An eligible entity described in paragraph (2)(A)(ii) that receives a grant under this section shall use the funds awarded pursuant to such grant to—

“(i) improve the early detection, surveillance, and investigative capabilities of poison control centers for chemical, biological, radiological, and nuclear events by training poison information personnel to improve the accuracy of surveillance data, improving the definitions used by the poison control centers for surveillance, and enhancing timely and efficient investigation of data anomalies;

“(ii) improve the capabilities of poison control centers to provide information to health care providers and the public with regard to chemical, biological, radiological, or nuclear threats or exposures, in consultation with the appropriate State, local, and tribal public health entities; or

“(iii) provide surge capacity in the event of a chemical, biological, radiological, or nuclear event through the establishment of alternative poison control center worksites and the training of nontraditional personnel.

“(g) AUTHORIZATION OF APPROPRIATIONS.—

“(1) FISCAL YEAR 2007.—There are authorized to be appropriated to carry out subsections (d), (e), and (f) \$102,000,000 for fiscal year 2007, of which \$35,000,000 is authorized to be appropriated to carry out subsection (f).

“(2) SUBSEQUENT FISCAL YEARS.—There are authorized to be appropriated such sums as may be necessary to carry out subsections (d), (e), and (f) for each of fiscal years 2008 through 2011.”

SEC. 203. PUBLIC HEALTH WORKFORCE ENHANCEMENTS.

(a) DEMONSTRATION PROJECT.—Section 338L of the Public Health Service Act (42 U.S.C. 254t) is amended by adding at the end the following:

“(h) PUBLIC HEALTH DEPARTMENTS.—

“(1) IN GENERAL.—To the extent that funds are appropriated under paragraph (5), the Secretary shall establish a demonstration project to provide for the participation of individuals who are eligible for the Loan Repayment Program described in section 338B and who agree to complete their service obligation in a State health department that serves a significant number of health professional shortage areas or areas at risk of a public health emergency, as determined by the Secretary, or in a local health department that serves a health professional shortage area or an area at risk of a public health emergency.

“(2) PROCEDURE.—To be eligible to receive assistance under paragraph (1), with respect to the program described in section 338B, an individual shall—

“(A) comply with all rules and requirements described in such section (other than section 338B(f)(1)(B)(iv)); and

“(B) agree to serve for a time period equal to 2 years, or such longer period as the individual may agree to, in a State, local, or tribal health department, consistent with paragraph (1).

“(3) DESIGNATIONS.—The demonstration project described in paragraph (1), and any healthcare providers who are selected to participate in such project, shall not be considered by the Secretary in the designation of health professional shortage areas under section 332 during fiscal years 2007 through 2010.

“(4) REPORT.—Not later than 3 years after the date of enactment of this subsection, the Secretary shall submit a report to the relevant committees of Congress that evaluates the participation of individuals in the demonstration project under paragraph (1), the impact of such participation on State, local, and tribal health departments, and the benefit and feasibility of permanently allowing

such placements in the Loan Repayment Program.

“(5) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this subsection, such sums as may be necessary for each of fiscal years 2007 through 2010.”

(b) GRANTS FOR LOAN REPAYMENT PROGRAM.—Section 338I of the Public Health Service Act (42 U.S.C. 254q-1) is amended by adding at the end the following:

“(i) PUBLIC HEALTH LOAN REPAYMENT.—

“(1) IN GENERAL.—The Secretary may award grants to States for the purpose of assisting such States in operating loan repayment programs under which such States enter into contracts to repay all or part of the eligible loans borrowed by, or on behalf of, individuals who agree to serve in State, local, or tribal health departments that serve health professional shortage areas or other areas at risk of a public health emergency, as designated by the Secretary.

“(2) LOANS ELIGIBLE FOR REPAYMENT.—To be eligible for repayment under this subsection, a loan shall be a loan made, insured, or guaranteed by the Federal Government that is borrowed by, or on behalf of, an individual to pay the cost of attendance for a program of education leading to a degree appropriate for serving in a State, local, or tribal health department as determined by the Secretary and the chief executive officer of the State in which the grant is administered, at an institution of higher education (as defined in section 102 of the Higher Education Act of 1965), including principal, interest, and related expenses on such loan.

“(3) APPLICABILITY OF EXISTING REQUIREMENTS.—With respect to awards made under paragraph (1)—

“(A) the requirements of subsections (b), (f), and (g) shall apply to such awards; and

“(B) the requirements of subsection (c) shall apply to such awards except that with respect to paragraph (1) of such subsection, the State involved may assign an individual only to public and nonprofit private entities that serve health professional shortage areas or areas at risk of a public health emergency, as determined by the Secretary.

“(4) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this subsection, such sums as may be necessary for each of fiscal years 2007 through 2010.”

SEC. 204. VACCINE TRACKING AND DISTRIBUTION.

Section 319A of the Public Health Service Act (42 U.S.C. 247d-1) is amended to read as follows:

“SEC. 319A. VACCINE TRACKING AND DISTRIBUTION.

“(a) TRACKING.—The Secretary, together with relevant manufacturers, wholesalers, and distributors as may agree to cooperate, may track the initial distribution of federally purchased influenza vaccine in an influenza pandemic. Such tracking information shall be used to inform Federal, State, local, and tribal decision makers during an influenza pandemic.

“(b) DISTRIBUTION.—The Secretary shall promote communication between State, local, and tribal public health officials and such manufacturers, wholesalers, and distributors as agree to participate, regarding the effective distribution of seasonal influenza vaccine. Such communication shall include estimates of high priority populations, as determined by the Secretary, in State, local, and tribal jurisdictions in order to inform Federal, State, local, and tribal decision makers during vaccine shortages and supply disruptions.

“(c) CONFIDENTIALITY.—The information submitted to the Secretary or its contractors, if any, under this section or under any

other section of this Act related to vaccine distribution information shall remain confidential in accordance with the exception from the public disclosure of trade secrets, commercial or financial information, and information obtained from an individual that is privileged and confidential, as provided for in section 552(b)(4) of title 5, United States Code, and subject to the penalties and exceptions under sections 1832 and 1833 of title 18, United States Code, relating to the protection and theft of trade secrets, and subject to privacy protections that are consistent with the regulations promulgated under section 264(c) of the Health Insurance Portability and Accountability Act of 1996. None of such information provided by a manufacturer, wholesaler, or distributor shall be disclosed without its consent to another manufacturer, wholesaler, or distributor, or shall be used in any manner to give a manufacturer, wholesaler, or distributor a proprietary advantage.

“(d) GUIDELINES.—The Secretary, in order to maintain the confidentiality of relevant information and ensure that none of the information contained in the systems involved may be used to provide proprietary advantage within the vaccine market, while allowing State, local, and tribal health officials access to such information to maximize the delivery and availability of vaccines to high priority populations, during times of influenza pandemics, vaccine shortages, and supply disruptions, in consultation with manufacturers, distributors, wholesalers and State, local, and tribal health departments, shall develop guidelines for subsections (a) and (b).

“(e) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section, such sums for each of fiscal years 2007 through 2011.

“(f) REPORT TO CONGRESS.—As part of the National Health Security Strategy described in section 2802, the Secretary shall provide an update on the implementation of subsections (a) through (d).”

SEC. 205. NATIONAL SCIENCE ADVISORY BOARD FOR BIOSECURITY.

The National Science Advisory Board for Biosecurity shall, when requested by the Secretary of Health and Human Services, provide to relevant Federal departments and agencies, advice, guidance, or recommendations concerning—

(1) a core curriculum and training requirements for workers in maximum containment biological laboratories; and

(2) periodic evaluations of maximum containment biological laboratory capacity nationwide and assessments of the future need for increased laboratory capacity;

TITLE III—ALL-HAZARDS MEDICAL SURGE CAPACITY

SEC. 301. NATIONAL DISASTER MEDICAL SYSTEM.

(a) NATIONAL DISASTER MEDICAL SYSTEM.—Section 2812 of subtitle B of title XXVIII of the Public Health Service Act (42 U.S.C. 300hh-11 et seq.), as redesignated by section 102, is amended—

(1) by striking the section heading and inserting “national disaster medical system”;

(2) by striking subsection (a);

(3) by redesignating subsections (b) through (h) as subsections (a) through (g);

(4) in subsection (a), as so redesignated—

(A) in paragraph (2)(B), by striking “Federal Emergency Management Agency” and inserting “Department of Homeland Security”; and

(B) in paragraph (3)(C), by striking “Public Health Security and Bioterrorism Preparedness and Response Act of 2002” and inserting “Pandemic and All-Hazards Preparedness Act”;

(5) in subsection (b), as so redesignated, by—

(A) striking the subsection heading and inserting “MODIFICATIONS”;

(B) redesignating paragraph (2) as paragraph (3); and

(C) striking paragraph (1) and inserting the following:

“(1) IN GENERAL.—Taking into account the findings from the joint review described under paragraph (2), the Secretary shall modify the policies of the National Disaster Medical System as necessary.

“(2) JOINT REVIEW AND MEDICAL SURGE CAPACITY STRATEGIC PLAN.—Not later than 180 days after the date of enactment of the Pandemic and All-Hazards Preparedness Act, the Secretary, in coordination with the Secretary of Homeland Security, the Secretary of Defense, and the Secretary of Veterans Affairs, shall conduct a joint review of the National Disaster Medical System. Such review shall include an evaluation of medical surge capacity, as described by section 2804(a). As part of the National Health Security Strategy under section 2802, the Secretary shall update the findings from such review and further modify the policies of the National Disaster Medical System as necessary.”;

(6) by striking “subsection (b)” each place it appears and inserting “subsection (a)”;

(7) by striking “subsection (d)” each place it appears and inserting “subsection (c)”;

(8) in subsection (g), as so redesignated, by striking “2002 through 2006” and inserting “2007 through 2011”.

(b) TRANSFER OF NATIONAL DISASTER MEDICAL SYSTEM TO THE DEPARTMENT OF HEALTH AND HUMAN SERVICES.—There shall be transferred to the Secretary of Health and Human Services the functions, personnel, assets, and liabilities of the National Disaster Medical System of the Department of Homeland Security, including the functions of the Secretary of Homeland Security and the Under Secretary for Emergency Preparedness and Response relating thereto.

(c) CONFORMING AMENDMENTS TO THE HOMELAND SECURITY ACT OF 2002.—The Homeland Security Act of 2002 (6 U.S.C. 312(3)(B), 313(5)) is amended—

(1) in section 502(3)(B), by striking “, the National Disaster Medical System.”; and

(2) in section 503(5), by striking “, the National Disaster Medical System”.

(d) UPDATE OF CERTAIN PROVISION.—Section 319F(b)(2) of the Public Health Service Act (42 U.S.C. 247d-6(b)(2)) is amended—

(1) in the paragraph heading, by striking “CHILDREN AND TERRORISM” and inserting “AT-RISK INDIVIDUALS AND PUBLIC HEALTH EMERGENCIES”;

(2) in subparagraph (A), by striking “Children and Terrorism” and inserting “At-Risk Individuals and Public Health Emergencies”;

(3) in subparagraph (B)—

(A) in clause (i), by striking “bioterrorism as it relates to children” and inserting “public health emergencies as they relate to at-risk individuals”;

(B) in clause (ii), by striking “children” and inserting “at-risk individuals”;

(C) in clause (iii), by striking “children” and inserting “at-risk individuals”;

(4) in subparagraph (C), by striking “children” and all that follows through the period and inserting “at-risk populations.”; and

(5) in subparagraph (D), by striking “one year” and inserting “six years”.

(e) EFFECTIVE DATE.—The amendments made by subsections (b) and (c) shall take effect on January 1, 2007.

SEC. 302. ENHANCING MEDICAL SURGE CAPACITY.

(a) IN GENERAL.—Title XXVIII of the Public Health Service Act (300hh-11 et seq.), as amended by section 103, is amended by inserting after section 2802 the following:

“SEC. 2804. ENHANCING MEDICAL SURGE CAPACITY.

“(a) STUDY OF ENHANCING MEDICAL SURGE CAPACITY.—As part of the joint review described in section 2812(b), the Secretary shall evaluate the benefits and feasibility of improving the capacity of the Department of Health and Human Services to provide additional medical surge capacity to local communities in the event of a public health emergency. Such study shall include an assessment of the need for and feasibility of improving surge capacity through—

“(1) acquisition and operation of mobile medical assets by the Secretary to be deployed, on a contingency basis, to a community in the event of a public health emergency; and

“(2) other strategies to improve such capacity as determined appropriate by the Secretary.

“(b) AUTHORITY TO ACQUIRE AND OPERATE MOBILE MEDICAL ASSETS.—In addition to any other authority to acquire, deploy, and operate mobile medical assets, the Secretary may acquire, deploy, and operate mobile medical assets if, taking into consideration the evaluation conducted under subsection (a), such acquisition, deployment, and operation is determined to be beneficial and feasible in improving the capacity of the Department of Health and Human Services to provide additional medical surge capacity to local communities in the event of a public health emergency.

“(c) USING FEDERAL FACILITIES TO ENHANCE MEDICAL SURGE CAPACITY.—

“(1) ANALYSIS.—The Secretary shall conduct an analysis of whether there are Federal facilities which, in the event of a public health emergency, could practicably be used as facilities in which to provide health care.

“(2) MEMORANDA OF UNDERSTANDING.—If, based on the analysis conducted under paragraph (1), the Secretary determines that there are Federal facilities which, in the event of a public health emergency, could be used as facilities in which to provide health care, the Secretary shall, with respect to each such facility, seek to conclude a memorandum of understanding with the head of the Department or agency that operates such facility that permits the use of such facility to provide health care in the event of a public health emergency.”.

(b) EMTALA.—

(1) IN GENERAL.—Section 1135(b) of the Social Security Act (42 U.S.C. 1320b-5(b)) is amended—

(A) in paragraph (3), by striking subparagraph (B) and inserting the following:

“(B) the direction or relocation of an individual to receive medical screening in an alternative location—

“(i) pursuant to an appropriate State emergency preparedness plan; or

“(ii) in the case of a public health emergency described in subsection (g)(1)(B) that involves a pandemic infectious disease, pursuant to a State pandemic preparedness plan or a plan referred to in clause (i), whichever is applicable in the State.”;

(B) in the third sentence, by striking “and shall be limited to” and inserting “and, except in the case of a waiver or modification to which the fifth sentence of this subsection applies, shall be limited to”; and

(C) by adding at the end the following: “If a public health emergency described in subsection (g)(1)(B) involves a pandemic infectious disease (such as pandemic influenza), the duration of a waiver or modification under paragraph (3) shall be determined in accordance with subsection (e) as such subsection applies to public health emergencies.”.

(2) EFFECTIVE DATE.—The amendments made by paragraph (1) shall take effect on

the date of the enactment of this Act and shall apply to public health emergencies declared pursuant to section 319 of the Public Health Service Act (42 U.S.C. 247d) on or after such date.

SEC. 303. ENCOURAGING HEALTH PROFESSIONAL VOLUNTEERS.

(a) VOLUNTEER MEDICAL RESERVE CORPS.—Title XXVIII of the Public Health Service Act (42 U.S.C. 300hh–11 et seq.), as amended by this Act, is amended by inserting after section 2812 the following:

“SEC. 2813. VOLUNTEER MEDICAL RESERVE CORPS.

“(a) IN GENERAL.—Not later than 180 days after the date of enactment of the Pandemic and All-Hazards Preparedness Act, the Secretary, in collaboration with State, local, and tribal officials, shall build on State, local, and tribal programs in existence on the date of enactment of such Act to establish and maintain a Medical Reserve Corps (referred to in this section as the ‘Corps’) to provide for an adequate supply of volunteers in the case of a Federal, State, local, or tribal public health emergency. The Corps shall be headed by a Director who shall be appointed by the Secretary and shall oversee the activities of the Corps chapters that exist at the State, local, and tribal levels.

“(b) STATE, LOCAL, AND TRIBAL COORDINATION.—The Corps shall be established using existing State, local, and tribal teams and shall not alter such teams.

“(c) COMPOSITION.—The Corps shall be composed of individuals who—

“(1)(A) are health professionals who have appropriate professional training and expertise as determined appropriate by the Director of the Corps; or

“(B) are non-health professionals who have an interest in serving in an auxiliary or support capacity to facilitate access to health care services in a public health emergency;

“(2) are certified in accordance with the certification program developed under subsection (d);

“(3) are geographically diverse in residence;

“(4) have registered and carry out training exercises with a local chapter of the Medical Reserve Corps; and

“(5) indicate whether they are willing to be deployed outside the area in which they reside in the event of a public health emergency.

“(d) CERTIFICATION; DRILLS.—

“(1) CERTIFICATION.—The Director, in collaboration with State, local, and tribal officials, shall establish a process for the periodic certification of individuals who volunteer for the Corps, as determined by the Secretary, which shall include the completion by each individual of the core training programs developed under section 319F, as required by the Director. Such certification shall not supercede State licensing or credentialing requirements.

“(2) DRILLS.—In conjunction with the core training programs referred to in paragraph (1), and in order to facilitate the integration of trained volunteers into the health care system at the local level, Corps members shall engage in periodic training exercises to be carried out at the local level.

“(e) DEPLOYMENT.—During a public health emergency, the Secretary shall have the authority to activate and deploy willing members of the Corps to areas of need, taking into consideration the public health and medical expertise required, with the concurrence of the State, local, or tribal officials from the area where the members reside.

“(f) EXPENSES AND TRANSPORTATION.—While engaged in performing duties as a member of the Corps pursuant to an assignment by the Secretary (including periods of

travel to facilitate such assignment), members of the Corps who are not otherwise employed by the Federal Government shall be allowed travel or transportation expenses, including per diem in lieu of subsistence.

“(g) IDENTIFICATION.—The Secretary, in cooperation and consultation with the States, shall develop a Medical Reserve Corps Identification Card that describes the licensure and certification information of Corps members, as well as other identifying information determined necessary by the Secretary.

“(h) INTERMITTENT DISASTER-RESPONSE PERSONNEL.—

“(1) IN GENERAL.—For the purpose of assisting the Corps in carrying out duties under this section, during a public health emergency, the Secretary may appoint selected individuals to serve as intermittent personnel of such Corps in accordance with applicable civil service laws and regulations. In all other cases, members of the Corps are subject to the laws of the State in which the activities of the Corps are undertaken.

“(2) APPLICABLE PROTECTIONS.—Subsections (c)(2), (d), and (e) of section 2812 shall apply to an individual appointed under paragraph (1) in the same manner as such subsections apply to an individual appointed under section 2812(c).

“(3) LIMITATION.—State, local, and tribal officials shall have no authority to designate a member of the Corps as Federal intermittent disaster-response personnel, but may request the services of such members.

“(i) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section, \$22,000,000 for fiscal year 2007, and such sums as may be necessary for each of fiscal years 2008 through 2011.”

(b) ENCOURAGING HEALTH PROFESSIONS VOLUNTEERS.—Section 319I of the Public Health Service Act (42 U.S.C. 247d–7b) is amended—

(1) by redesignating subsections (e) and (f) as subsections (j) and (k), respectively;

(2) by striking subsections (a) and (b) and inserting the following:

“(a) IN GENERAL.—Not later than 12 months after the date of enactment of the Pandemic and All-Hazards Preparedness Act, the Secretary shall link existing State verification systems to maintain a single national interoperable network of systems, each system being maintained by a State or group of States, for the purpose of verifying the credentials and licenses of health care professionals who volunteer to provide health services during a public health emergency (such network shall be referred to in this section as the ‘verification network’).

“(b) REQUIREMENTS.—The interoperable network of systems established under subsection (a) shall include—

“(1) with respect to each volunteer health professional included in the system—

“(A) information necessary for the rapid identification of, and communication with, such professionals; and

“(B) the credentials, certifications, licenses, and relevant training of such individuals; and

“(2) the name of each member of the Medical Reserve Corps, the National Disaster Medical System, and any other relevant federally-sponsored or administered programs determined necessary by the Secretary.”;

(3) by striking subsection (d) and inserting the following:

“(d) ACCESSIBILITY.—The Secretary shall ensure that the network established under subsection (a) is electronically accessible by State, local, and tribal health departments and can be linked with the identification cards under section 2813.

“(e) CONFIDENTIALITY.—The Secretary shall establish and require the application of and compliance with measures to ensure the effective security of, integrity of, and access to the data included in the network.

“(f) COORDINATION.—The Secretary shall coordinate with the Secretary of Veterans Affairs and the Secretary of Homeland Security to assess the feasibility of integrating the verification network under this section with the VetPro system of the Department of Veterans Affairs and the National Emergency Responder Credentialing System of the Department of Homeland Security. The Secretary shall, if feasible, integrate the verification network under this section with such VetPro system and the National Emergency Responder Credentialing System.

“(g) UPDATING OF INFORMATION.—The States that are participants in the network established under subsection (a) shall, on at least a quarterly basis, work with the Director to provide for the updating of the information contained in such network.

“(h) CLARIFICATION.—Inclusion of a health professional in the verification network established pursuant to this section shall not constitute appointment of such individual as a Federal employee for any purpose, either under section 2812(c) or otherwise. Such appointment may only be made under section 2812 or 2813.

“(i) HEALTH CARE PROVIDER LICENSES.—The Secretary shall encourage States to establish and implement mechanisms to waive the application of licensing requirements applicable to health professionals, who are seeking to provide medical services (within their scope of practice), during a national, State, local, or tribal public health emergency upon verification that such health professionals are licensed and in good standing in another State and have not been disciplined by any State health licensing or disciplinary board.”; and

(4) in subsection (k) (as so redesignated), by striking “2006” and inserting “2011”.

SEC. 304. CORE EDUCATION AND TRAINING.

Section 319F of the Public Health Service Act (42 U.S.C. 247d–6) is amended—

(1) by striking subsections (a) through (g) and inserting the following;

“(a) ALL-HAZARDS PUBLIC HEALTH AND MEDICAL RESPONSE CURRICULA AND TRAINING.—

“(1) IN GENERAL.—The Secretary, in collaboration with the Secretary of Defense, and in consultation with relevant public and private entities, shall develop core health and medical response curricula and trainings by adapting applicable existing curricula and training programs to improve responses to public health emergencies.

“(2) CURRICULUM.—The public health and medical response training program may include course work related to—

“(A) medical management of casualties, taking into account the needs of at-risk individuals;

“(B) public health aspects of public health emergencies;

“(C) mental health aspects of public health emergencies;

“(D) national incident management, including coordination among Federal, State, local, tribal, international agencies, and other entities; and

“(E) protecting health care workers and health care first responders from workplace exposures during a public health emergency.

“(3) PEER REVIEW.—On a periodic basis, products prepared as part of the program shall be rigorously tested and peer-reviewed by experts in the relevant fields.

“(4) CREDIT.—The Secretary and the Secretary of Defense shall—

“(A) take into account continuing professional education requirements of public health and healthcare professions; and

“(B) cooperate with State, local, and tribal accrediting agencies and with professional associations in arranging for students enrolled in the program to obtain continuing

professional education credit for program courses.

“(5) DISSEMINATION AND TRAINING.—

“(A) IN GENERAL.—The Secretary may provide for the dissemination and teaching of the materials described in paragraphs (1) and (2) by appropriate means, as determined by the Secretary.

“(B) CERTAIN ENTITIES.—The education and training activities described in subparagraph (A) may be carried out by Federal public health or medical entities, appropriate educational entities, professional organizations and societies, private accrediting organizations, and other nonprofit institutions or entities meeting criteria established by the Secretary.

“(C) GRANTS AND CONTRACTS.—In carrying out this subsection, the Secretary may carry out activities directly or through the award of grants and contracts, and may enter into interagency agreements with other Federal agencies.

“(b) EXPANSION OF EPIDEMIC INTELLIGENCE SERVICE PROGRAM.—The Secretary may establish 20 officer positions in the Epidemic Intelligence Service Program, in addition to the number of the officer positions offered under such Program in 2006 for individuals who agree to participate, for a period of not less than 2 years, in the Career Epidemiology Field Officer program in a State, local, or tribal health department that serves a health professional shortage area (as defined under section 332(a)), a medically underserved population (as defined under section 330(b)(3)), or a medically underserved area or area at high risk of a public health emergency as designated by the Secretary.

“(c) CENTERS FOR PUBLIC HEALTH PREPAREDNESS; CORE CURRICULA AND TRAINING.—

“(1) IN GENERAL.—The Secretary may establish at accredited schools of public health, Centers for Public Health Preparedness (hereafter referred to in this section as the ‘Centers’).

“(2) ELIGIBILITY.—To be eligible to receive an award under this subsection to establish a Center, an accredited school of public health shall agree to conduct activities consistent with the requirements of this subsection.

“(3) CORE CURRICULA.—The Secretary, in collaboration with the Centers and other public or private entities shall establish core curricula based on established competencies leading to a 4-year bachelor’s degree, a graduate degree, a combined bachelor and master’s degree, or a certificate program, for use by each Center. The Secretary shall disseminate such curricula to other accredited schools of public health and other health professions schools determined appropriate by the Secretary, for voluntary use by such schools.

“(4) CORE COMPETENCY-BASED TRAINING PROGRAM.—The Secretary, in collaboration with the Centers and other public or private entities shall facilitate the development of a competency-based training program to train public health practitioners. The Centers shall use such training program to train public health practitioners. The Secretary shall disseminate such training program to other accredited schools of public health, and other health professions schools as determined by the Secretary, for voluntary use by such schools.

“(5) CONTENT OF CORE CURRICULA AND TRAINING PROGRAM.—The Secretary shall ensure that the core curricula and training program established pursuant to this subsection respond to the needs of State, local, and tribal public health authorities and integrate and emphasize essential public health security capabilities consistent with section 2802(b)(2).

“(6) ACADEMIC-WORKFORCE COMMUNICATION.—As a condition of receiving funding

from the Secretary under this subsection, a Center shall collaborate with a State, local, or tribal public health department to—

“(A) define the public health preparedness and response needs of the community involved;

“(B) assess the extent to which such needs are fulfilled by existing preparedness and response activities of such school or health department, and how such activities may be improved;

“(C) prior to developing new materials or trainings, evaluate and utilize relevant materials and trainings developed by others Centers; and

“(D) evaluate community impact and the effectiveness of any newly developed materials or trainings.

“(7) PUBLIC HEALTH SYSTEMS RESEARCH.—In consultation with relevant public and private entities, the Secretary shall define the existing knowledge base for public health preparedness and response systems, and establish a research agenda based on Federal, State, local, and tribal public health preparedness priorities. As a condition of receiving funding from the Secretary under this subsection, a Center shall conduct public health systems research that is consistent with the agenda described under this paragraph.”;

(2) by redesignating subsection (h) as subsection (d);

(3) by inserting after subsection (d) (as so redesignated), the following:

“(e) AUTHORIZATION OF APPROPRIATIONS.—

“(1) FISCAL YEAR 2007.—There are authorized to be appropriated to carry out this section for fiscal year 2007—

“(A) to carry out subsection (a), \$12,000,000, of which \$5,000,000 shall be used to carry out paragraphs (1) through (4) of such subsection, and \$7,000,000 shall be used to carry out paragraph (5) of such subsection;

“(B) to carry out subsection (b), \$3,000,000; and

“(C) to carry out subsection (c), \$31,000,000, of which \$5,000,000 shall be used to carry out paragraphs (3) through (5) of such subsection.

“(2) SUBSEQUENT FISCAL YEARS.—There are authorized to be appropriated such sums as may be necessary to carry out this section for fiscal year 2008 and each subsequent fiscal year.”; and

(4) by striking subsections (i) and (j).

SEC. 305. PARTNERSHIPS FOR STATE AND REGIONAL HOSPITAL PREPAREDNESS TO IMPROVE SURGE CAPACITY.

Section 319C-2 of the Public Health Service Act (42 U.S.C. 247d-3b) is amended to read as follows:

“SEC. 319C-2. PARTNERSHIPS FOR STATE AND REGIONAL HOSPITAL PREPAREDNESS TO IMPROVE SURGE CAPACITY.

“(a) IN GENERAL.—The Secretary shall award competitive grants or cooperative agreements to eligible entities to enable such entities to improve surge capacity and enhance community and hospital preparedness for public health emergencies.

“(b) ELIGIBILITY.—To be eligible for an award under subsection (a), an entity shall—

“(1)(A) be a partnership consisting of—

“(i) one or more hospitals, at least one of which shall be a designated trauma center, consistent with section 1213(c);

“(ii) one or more other local health care facilities, including clinics, health centers, primary care facilities, mental health centers, mobile medical assets, or nursing homes; and

“(iii)(I) one or more political subdivisions;

“(II) one or more States; or

“(III) one or more States and one or more political subdivisions; and

“(B) prepare, in consultation with the Chief Executive Officer and the lead health officials of the State, District, or territory in which the hospital and health care facilities

described in subparagraph (A) are located, and submit to the Secretary, an application at such time, in such manner, and containing such information as the Secretary may require; or

“(2)(A) be an entity described in section 319C-1(b)(1); and

“(B) submit an application at such time, in such manner, and containing such information as the Secretary may require, including the information or assurances required under section 319C-1(b)(2) and an assurance that the State will retain not more than 25 percent of the funds awarded for administrative and other support functions.

“(c) USE OF FUNDS.—An award under subsection (a) shall be expended for activities to achieve the preparedness goals described under paragraphs (1), (3), (4), (5), and (6) of section 2802(b).

“(d) PREFERENCES.—

“(1) REGIONAL COORDINATION.—In making awards under subsection (a), the Secretary shall give preference to eligible entities that submit applications that, in the determination of the Secretary—

“(A) will enhance coordination—

“(i) among the entities described in subsection (b)(1)(A)(i); and

“(ii) between such entities and the entities described in subsection (b)(1)(A)(ii); and

“(B) include, in the partnership described in subsection (b)(1)(A), a significant percentage of the hospitals and health care facilities within the geographic area served by such partnership.

“(2) OTHER PREFERENCES.—In making awards under subsection (a), the Secretary shall give preference to eligible entities that, in the determination of the Secretary—

“(A) include one or more hospitals that are participants in the National Disaster Medical System;

“(B) are located in a geographic area that faces a high degree of risk, as determined by the Secretary in consultation with the Secretary of Homeland Security; or

“(C) have a significant need for funds to achieve the medical preparedness goals described in section 2802(b)(2).

“(e) CONSISTENCY OF PLANNED ACTIVITIES.—

The Secretary may not award a cooperative agreement to an eligible entity described in subsection (b)(1) unless the application submitted by the entity is coordinated and consistent with an applicable State All-Hazards Public Health Emergency Preparedness and Response Plan and relevant local plans, as determined by the Secretary in consultation with relevant State health officials.

“(f) LIMITATION ON AWARDS.—A political subdivision shall not participate in more than one partnership described in subsection (b)(1).

“(g) COORDINATION WITH LOCAL RESPONSE CAPABILITIES.—An eligible entity shall, to the extent practicable, ensure that activities carried out under an award under subsection (a) are coordinated with activities of relevant local Metropolitan Medical Response Systems, local Medical Reserve Corps, the Cities Readiness Initiative, and local emergency plans.

“(h) MAINTENANCE OF STATE FUNDING.—

“(1) IN GENERAL.—An entity that receives an award under this section shall maintain expenditures for health care preparedness at a level that is not less than the average level of such expenditures maintained by the entity for the preceding 2 year period.

“(2) RULE OF CONSTRUCTION.—Nothing in this section shall be construed to prohibit the use of awards under this section to pay salary and related expenses of public health and other professionals employed by State, local, or tribal agencies who are carrying out activities supported by such awards (regardless of whether the primary assignment of

such personnel is to carry out such activities).

“(i) PERFORMANCE AND ACCOUNTABILITY.—The requirements of section 319C-1(g) and (i) shall apply to entities receiving awards under this section (regardless of whether such entities are described under subsection (b)(1)(A) or (b)(2)(A)) in the same manner as such requirements apply to entities under section 319C-1.

“(j) AUTHORIZATION OF APPROPRIATIONS.—

“(1) IN GENERAL.—For the purpose of carrying out this section, there is authorized to be appropriated \$474,000,000 for fiscal year 2007, and such sums as may be necessary for each of fiscal years 2008 through 2011.

“(2) RESERVATION OF AMOUNTS FOR PARTNERSHIPS.—Prior to making awards described in paragraph (3), the Secretary may reserve from the amount appropriated under paragraph (1) for a fiscal year, an amount determined appropriate by the Secretary for making awards to entities described in subsection (b)(1)(A).

“(3) AWARDS TO STATES AND POLITICAL SUBDIVISIONS.—

“(A) IN GENERAL.—From amounts appropriated for a fiscal year under paragraph (1) and not reserved under paragraph (2), the Secretary shall make awards to entities described in subsection (b)(2)(A) that have completed an application as described in subsection (b)(2)(B).

“(B) AMOUNT.—The Secretary shall determine the amount of an award to each entity described in subparagraph (A) in the same manner as such amounts are determined under section 319C-1(h).”

SEC. 306. ENHANCING THE ROLE OF THE DEPARTMENT OF VETERANS AFFAIRS.

(a) IN GENERAL.—Section 8117 of title 38, United States Code, is amended—

(1) in subsection (a)—

(A) in paragraph (1), by—

(i) striking “chemical or biological attack” and inserting “a public health emergency (as defined in section 2801 of the Public Health Service Act)”;

(ii) striking “an attack” and inserting “such an emergency”;

(iii) striking “public health emergencies” and inserting “such emergencies”;

(B) in paragraph (2)—

(i) in subparagraph (A), by striking “; and” and inserting a semicolon;

(ii) in subparagraph (B), by striking the period and inserting a semicolon;

(iii) by adding at the end the following:

“(C) organizing, training, and equipping the staff of such centers to support the activities carried out by the Secretary of Health and Human Services under section 2801 of the Public Health Service Act in the event of a public health emergency and incidents covered by the National Response Plan developed pursuant to section 502(6) of the Homeland Security Act of 2002, or any successor plan; and

“(D) providing medical logistical support to the National Disaster Medical System and the Secretary of Health and Human Services as necessary, on a reimbursable basis, and in coordination with other designated Federal agencies.”;

(2) in subsection (c), by striking “a chemical or biological attack or other terrorist attack.” and inserting “a public health emergency. The Secretary shall, through existing medical procurement contracts, and on a reimbursable basis, make available as necessary, medical supplies, equipment, and pharmaceuticals in response to a public health emergency in support of the Secretary of Health and Human Services.”;

(3) in subsection (d), by—

(A) striking “develop and”;

(B) striking “biological, chemical, or radiological attacks” and inserting “public health emergencies”;

(C) by inserting “consistent with section 319F(a) of the Public Health Service Act” before the period; and

(4) in subsection (e)—

(A) in paragraph (1), by striking “2811(b)” and inserting “2812”;

(B) in paragraph (2)—

(i) by striking “bioterrorism and other”;

and

(ii) by striking “319F(a)” and inserting “319F”.

(b) AUTHORIZATION OF APPROPRIATIONS.—Section 8117 of title 38, United States Code, is amended by adding at the end the following:

“(g) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated, such sums as may be necessary to carry out this section for each of fiscal years 2007 through 2011.”

By Mr. KERRY:

S. 3680. A bill to amend the Small Business Investment Act of 1958 to reauthorize and expand the New Markets Venture Capital Program, and for other purposes; to the Committee on Small Business and Entrepreneurship.

Mr. KERRY. Mr. President, in 1999, President Clinton unveiled the New Markets Investment Initiative to counter an unmet challenge in the 21st century: building economically vibrant communities in underserved places such as inner cities and distressed rural areas, where there is a great need for jobs and economic development. The goal was to build a bridge between Wall Street and our untapped markets in Main Street America. In that same year, Senators Paul Wellstone, JEFF BINGAMAN, PAUL SARBANES, CARL LEVIN, Max Cleland, and I introduced the Community Development and Venture Capital Act to spearhead this innovative New Markets initiative in the Senate. In 2000, our New Markets initiative was enacted with bipartisan support in Congress as part of the Consolidated Appropriations Act of 2001. The New Markets Venture Capital Program, NMVC, which specifically promotes the creation of wealth and job opportunities in low-income areas, was only one part of the initiative agreed to by Speaker HASTERT and then-President Clinton. The other elements of that agreement included the New Markets Tax Credits, NMTC, additional empowerment zones, and a new program: Community Renewal Zones. The overall goal of the legislation was to provide a number of different approaches to alleviating poverty so that we could better understand what works best. With the exception of the NMVC Program, all of the other programs have moved forward. However, the NMVC Program has not been given the opportunity, the funding, or the support to reach its full potential as Congress intended.

The NMVC Program has had many successes since its inception 5 years ago. CEI Community Ventures, Inc. from Maine—close to my home State of Massachusetts—has invested venture capital funds in Look’s Gourmet Food

Company, which manufactures and sells all-natural, high-quality, shelf-stable seafood products under the “Bar Harbor T” and “Atlantic T” brands. Another example can be found in Vermont, where Carolyn Cooke and Poppy Gall founded Juno Rising/Isis Women’s Apparel, an outdoor clothing company targeting the needs of today’s active women. Their products can be found in outdoor stores throughout the country.

Today, I rise to introduce legislation that will not only reauthorize the New Markets Venture Capital Program for 3 years, but will provide critical components for success: providing appropriate funding authorization levels, expanding the NMVC program into all regions of the country, encouraging investment in small manufacturers, making the NMVC Program consistent with the NMTC as Congress intended, incorporating the operational assistance grant model from the Rural Business Investment Program, and establishing a long-overdue Office of New Markets Venture Capital. The legislation is a companion to H.R. 4303, introduced by Representatives GWEN MOORE of Wisconsin and HAL ROGERS of Kentucky. While few differences exist between our bills, both send a clear legislative signal that there is strong bipartisan and bicameral support from Congress to reauthorize this program.

Mr. President, this program has a history of strong bipartisan support. In fiscal year 2001, together we appropriated \$150 million for debenture guarantees and \$30 million in grant financing to support up to 15 NMVC companies. Unfortunately, only half of this money was obligated to support 6 NMVC companies, and the remaining funds were rescinded in the Fiscal Year 2003 Omnibus Appropriations Act Conference Report. Now today this program faces further challenges with the President’s Fiscal Year 2007 budget request asking for no funding for the NMVC Program. This is the sixth year in a row the President has not backed this program, although Congress restored funding in 2002 and initially provided funding in 2003. The Small Business Administration’s, SBA’s, failure to obligate the remaining funds and the President’s lack of support for funding the NMVC Program raises an important question: Has the challenge in the 21st century of improving local economies in low-income urban and rural communities been met? All evidence says no. A 2006 report on America’s Children by the Federal Interagency Forum on Child and Family Statistics stated that in 2004, 17 percent of children live in poverty—a total of 12.5 million. In addition, 42 percent of children with single mothers and one in three African-American children live in poverty. The Bureau of Labor Statistics shows that in areas such as Flint, MI, where the NMVC has not yet had the time or resources to reach, the unemployment rate is at 7.3 percent, well above the national average of 4.6

percent. Congress must use this reauthorization process as an opportunity to stimulate business activity in all communities and create jobs for low-income residents throughout the entire country.

Prior to the creation of the NMVC Program, Congress attempted to fill this unmet need through various programs. In fact, Congress created the NMVC Program based on the SBA's Small Business Investment Company Program, SBIC. Since its beginning in 1958, the SBIC Program has provided approximately \$46 billion of long-term debt and equity capital to more than 99,000 small U.S. companies. Although the SBIC Program has been popular, it does not sufficiently reach the underserved areas of our country that need economic development the most. The NMVC is targeted specifically to very low-income areas, including historically underutilized business zones—HUB Zones—and low-income rural and urban neighborhoods, which are overlooked by traditional venture capital investors. I do not have an NMVC Company in my State, and I am sure that many States, like Massachusetts, could benefit from the opportunities that the NMVC creates. To ensure that the NMVC Program expands into diverse areas around the country, the legislation encourages the SBA Administrator to establish not fewer than one company from each of the 10 geographic regions of the country. In addition to diversifying the geographic distribution of NMVC companies to our underserved communities, there is a great need to diversify the types of investments approved by the SBA, particularly in the area of manufacturing. According to a 2004 study by the U.S. Department of Commerce, the most recent recession in the business cycle hit U.S. manufacturers and their workers hardest—a downturn that first was felt in 2000. The manufacturing community lost 2.6 million jobs, accounting for all of the net job losses from the fourth quarter of 2000 through the third quarter of 2003. Much of the manufacturing sector continues to operate well below its previous peak and potential. For example, in places such as Milwaukee, where in 2002, according to the Bureau of Labor Statistics, 59 percent of working-age African-American males were either unemployed or out of the workforce. Milwaukee has also lost 33,000 manufacturing jobs in the past 5 years. We need to do all we can to bring back these lost manufacturing jobs, and the NMVC Program could play a role. Relying on the market to bring venture capital funding to Milwaukee and other manufacturing hubs is not the solution. According to a study by the University of Kansas, Milwaukee ranks 49th out of the 50 largest U.S. cities in terms of venture capital dollars. Imagine the difference that a venture capital investment could make in this area, creating one job for every \$15,000 invested.

As I mentioned previously, this legislation is a companion to the bipartisan

legislation introduced by Representatives MOORE and ROGERS in the House. Both of our bills include small manufacturers in the mission of the program, by encouraging the SBA Administrator to select at least one NMVC company that is primarily involved in the investment and development of small manufacturing firms.

Mr. President, the legislation also makes the NMVC Program and the NMTC consistent in defining low-income geographic areas. Both programs were designed to work together—the NMTC was intended to be a tool to encourage NMVC companies to raise private investment capital in low-income communities. Conforming their definitions will assure a smooth coordination between the two programs for future investors.

The nexus between the NMVC Program and the NMTC is only one aspect that makes this program unique among all of the SBA's programs. Another unique aspect is the operational assistance grant program that fund managers can use to assist entrepreneurs in low-income communities to develop a business plan, manage employees, or market their products and services. These grants are an essential tool for fostering community development using venture capital firms because investors are able to reach out into communities not served by conventional investors. Many of the NMVC companies are also members of the surrounding community, therefore, they will have the local expertise and guidance for entrepreneurs to start and sustain a viable business. Some NMVC companies are having a difficult time meeting the SBA requirement that each company raise an upfront dollar-for-dollar match in order to obtain an operational assistance grant. To avoid this unnecessary burden, the legislation incorporates a provision modeled after the joint SBA/Department of Agriculture Rural Business Investment Program which does not require a match from the company and limits the amount of the grant.

Mr. President, these improvements to the NMVC Program are important but they cannot be implemented without dedicated staff at the SBA. In October 2005, I wrote a letter to the SBA expressing my concern about the lack of staffing and resources devoted to the NMVC office within the SBA's Investment Division. The SBA informed me that staff members within the Office of SBIC Operations were getting cross-trained on the NMVC Program to ensure adequate staffing and provide ample support to meet the needs of the six NMVC companies currently assigned to the Office of New Markets Venture Capital within the SBIC Program. Reshuffling SBA staff to assist six companies is not sufficient. If this program grows to its originally intended potential of 15 companies, there needs to be staff dedicated solely to administering the NMVC Program. This legislation establishes an Office of New

Markets Venture Capital within the Investment Division of the SBA, headed by a Director appointed by the SBA Administrator. The Director would be responsible for administering and encouraging investment in small manufacturing firms and working to expand the number of small businesses participating in the NMVC Program.

This bill is urgently needed now to expand the good work of the NMVC Program, and I urge all of my colleagues to show their support for the small but growing number of businesses that promise both financial returns for their investors and social returns to low-income people and distressed regions in which they invest. This double bottom line distinguishes the NMVC Program from any other SBA program, and we cannot afford to let it expire.

By Mr. DOMENICI (for himself, Mrs. LINCOLN, Mr. CRAIG, Mr. PRYOR, Mr. ALLARD, Mr. BROWNBACK, Mr. BURNS, Mr. BOND, Mr. CHAMBLISS, Mr. CORNYN, Mr. CRAPO, Mrs. DOLE, Mr. GRASSLEY, Mr. HAGEL, Mr. LOTT, Mr. ROBERTS, Mr. STEVENS, Mr. TALENT, Mr. THOMAS, Mr. THUNE, Mr. BURR, Mr. NELSON of Nebraska, and Ms. LANDRIEU).

S. 3681. A bill to amend the Comprehensive Environmental Response Compensation and Liability Act of 1980 to provide that manure shall not be considered to be a hazardous substance, pollutant, or contaminant; to the Committee on Environment and Public Works.

Mr. DOMENICI. Mr. President, I rise today to introduce the Agricultural Protection and Prosperity Act of 2006. I would like to thank my colleagues from both sides of the aisle for their support by cosponsoring this important legislation.

The Agricultural Protection and Prosperity Act of 2006 seeks to clarify the original intent of the Comprehensive Environmental Response, Compensation, and Liability Act, CERCLA, by providing an exemption for manure derived from agricultural operations. This clarification is badly needed in order to protect America's agriculture industry from onerous and frivolous lawsuits. Without clarification, agriculture operations could be fined up to \$27,500 per day per violation, thereby bankrupting many livestock operations in this country. American livestock operations are already some of the most regulated businesses with regards to environmental quality. Additional requirements and liability under CERCLA, which is designed to clean up toxic industrial pollutants, is unwarranted and unfair for America's farmers.

Agriculture has been the backbone of this country since its inception and we owe our farmers a debt of gratitude. However, in an environment where our farmers and ranchers are struggling to

compete on the international stage, it seems unconscionable that some people wish to place them at a further disadvantage.

This clarification is especially important for New Mexico's dairy industry. This relatively new sector of our economy has grown by leaps and bounds over the years to a point where it contributes substantially to the overall economic output of my great State. On a national level, New Mexico enjoys one of the largest average herd sizes and per capita milk production in the country. This dramatic increase benefits many related businesses from the alfalfa growers along the Rio Grande to the implement salesman in our small towns. However, this growth and the future of the dairy industry in New Mexico are in great jeopardy. If this clarification to CERCLA is not made, the resulting dairy closures and the effects on related industries would devastate my State.

Mr. President, I ask unanimous consent that a copy of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 3681

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

SECTION 1. SHORT TITLE.

This Act may be cited as the "Agricultural Protection and Prosperity Act of 2006".

SEC. 2. ANIMAL WASTE.

(a) AMENDMENT OF SUPERFUND.—Title III of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (42 U.S.C. 9651 et seq.) is amended by adding at end the following:

"SEC. 313. EXCEPTION FOR MANURE.

"(a) DEFINITION OF MANURE.—In this section, the term 'manure' means—

"(1) digestive emissions, feces, urine, urea, and other excrement from livestock (as defined in section 205.2 of title 7, Code of Federal Regulations (or a successor regulation));

"(2) any associated bedding, compost, raw materials, or other materials commingled with such excrement from livestock (as so defined);

"(3) any process water associated with any item referred to in paragraph (1) or (2); and

"(4) any byproduct, constituent, or substance contained in or originating from, or any emission relating to, an item described in paragraph (1), (2), or (3).

"(b) EXEMPTION.—Upon the date of enactment of this section, manure shall not be included in the meaning of—

"(1) the term 'hazardous substance', as defined in section 101(14); or

"(2) the term 'pollutant or contaminant', as defined in section 101(33).

"(c) EFFECT ON OTHER LAW.—Nothing with respect to the enactment of this subsection shall—

"(1) impose any liability under the Emergency Planning and Community Right-To-Know Act of 1986 (42 U.S.C. 11001 et seq.) with respect to manure;

"(2) abrogate or otherwise affect any provision of the Air Quality Agreement entered into between the Administrator and operators of animal feeding operations (70 Fed. Reg. 4958 (January 31, 2005)); or

"(3) affect the applicability of any other environmental law as such a law relates to—

"(A) the definition of manure; or

"(B) the responsibilities or liabilities of any person regarding the treatment, storage, or disposal of manure."

(b) AMENDMENT OF SARA.—Section 304(a)(4) of the Superfund Amendments and Reauthorization Act of 1986 (42 U.S.C. 11004(a)(4)) is amended—

(1) by striking "This section" and inserting the following:

"(A) IN GENERAL.—This section"; and

(2) by adding at the end the following:

"(B) MANURE.—The notification requirements under this subsection do not apply to releases associated with manure (as defined in section 313 of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980)."

By Mr. ALEXANDER (for himself,
Mr. ENSIGN, Mr. GREGG, and Mr.
SANTORUM):

S. 3682. A bill to establish the America's Opportunity Scholarships for Kids Program; to the Committee on Health, Education, Labor, and Pensions.

Mr. ALEXANDER. Mr. President, I ask unanimous consent that the attached bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 3682

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

SECTION 1. SHORT TITLE.

This Act may be cited as the "America's Opportunity Scholarships for Kids Act".

SEC. 2. PURPOSE.

It is the purpose of this Act to support local efforts to enable students from low-income families who attend a school identified for restructuring under section 1116(b)(8) of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 6316(b)(8))—

(1) to attend a private elementary school or secondary school, or a public elementary school or secondary school outside the student's home school district, including a public charter school; or

(2) to receive intensive, sustained supplemental educational services.

SEC. 3. DEFINITIONS.

In this Act:

(1) ELEMENTARY SCHOOL; LOCAL EDUCATIONAL AGENCY; SECONDARY SCHOOL; SECRETARY; STATE EDUCATIONAL AGENCY.—The terms "elementary school", "local educational agency", "secondary school", "Secretary", and "State educational agency" have the meanings given the terms in section 9101 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 7801).

(2) ELIGIBLE ENTITY.—The term "eligible entity" means—

(A) a local educational agency;

(B) a State educational agency; or

(C) a nonprofit organization or a consortium of nonprofit organizations.

(3) ELIGIBLE STUDENT.—The term "eligible student" means a student from a low-income family who—

(A) with respect to a school identified for restructuring under section 1116(b)(8) of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 6316(b)(8))—

(i) is eligible to enroll in the beginning grade of the school;

(ii) except as provided in subparagraph (C), attended the school for the entire school year preceding the identification;

(iii) in the case of a student who transfers to the school to attend any grade beyond the beginning grade of the school, attends the school for the remainder of the school year in which the transfer occurs; or

(iv) received a scholarship under this Act in a preceding school year due to such identification; or

(B) is a sibling of a student described in any 1 of clauses (i) through (iv) of subparagraph (A).

(4) LOW-INCOME FAMILY.—The term "low-income family" means a family whose income does not exceed 185 percent of the poverty line, except that in the case of a student participating in a project under this Act for a second or any succeeding school year the term includes a family whose income does not exceed 220 percent of the poverty line.

(5) POVERTY LINE.—The term "poverty line" means the income official poverty line (as defined by the Office of Management and Budget, and revised annually in accordance with section 673(2) of the Community Services Block Grant Act (42 U.S.C. 9902(2)) applicable to a family of the size involved.

(6) PRIVATE PROVIDER.—The term "private provider" means a nonprofit or for-profit private provider of supplemental educational services described in section 1116(e)(1) of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 6316(e)(1)) that is on the updated list of approved providers maintained by the State educational agency under section 1116(e)(4)(C) of such Act (20 U.S.C. 6316(e)(4)(C)).

(7) SUPPLEMENTAL EDUCATIONAL SERVICES.—The term "supplemental educational services" has the meaning given the term in section 1116(e)(12)(C) of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 6316(e)(12)(C)).

SEC. 4. PROGRAM AUTHORIZED.

(a) AUTHORITY.—

(1) IN GENERAL.—Subject to paragraph (2) and from amounts appropriated under section 6 for a fiscal year, the Secretary shall award grants, on a competitive basis, to eligible entities to support projects that provide—

(A) scholarships to enable eligible students to attend—

(i) the private elementary school or secondary school of their parent's choice; or

(ii) a public elementary school or secondary school of their parents' choice outside of the eligible student's home school district, consistent with State law; or

(B) eligible students with intensive, sustained supplemental educational services on an annual basis.

(2) SCHOLARSHIP DURATION RULE.—Each eligible entity that receives a grant under this Act shall only award a scholarship under this Act to an eligible student for—

(A)(i) in the case of an eligible student described in section 3(3)(A), the first school year for which the eligible student is eligible to receive the scholarship with respect to a school identified for restructuring under section 1116(b)(8) of the Elementary and Secondary Education Act of 1965; and

(ii) in the case of an eligible student described in section 3(3)(B), the first school year taught at the school so identified; and

(B) each subsequent school year through the school year applicable to the final grade taught at the school so identified.

(b) DURATION OF GRANTS.—The Secretary may award grants under this Act for a period of not more than 5 years.

(c) PRIORITIES.—In awarding grants under this Act, the Secretary shall give priority to eligible entities that—

(1) propose to serve eligible students in a local educational agency with a large number or percentage of schools identified for restructuring under section 1116(b)(8) of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 6316(b)(8));

(2) possess the knowledge and capacity to inform parents of eligible students, in urban,

suburban, and rural areas, about public and private elementary school and secondary school options; and

(3) will augment the scholarships provided to eligible students under this Act in order to help ensure that parents can afford the cost (including tuition, fees, and necessary transportation expenses) of the schools the parents choose to have their children attend under this Act.

(d) APPLICATION REQUIREMENTS.—

(1) IN GENERAL.—To be considered for a grant under this Act, an eligible entity shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may reasonably require.

(2) CONTENTS.—The application shall, at a minimum, include a description of—

(A) the eligible entity's plan for—

(i) recruiting private schools, local educational agencies, charter schools, and private providers, to participate in the project in order to meet eligible student demand for private and public school admission and supplemental educational services; and

(ii) ensuring that participating schools that enroll eligible students receiving scholarships under this Act, and private providers participating in the project, will meet the applicable requirements of the project;

(B) each school identified for restructuring that will be served under the project, including—

(i) the name of each such school; and

(ii) such demographic and socioeconomic information as the Secretary may require;

(C) how the eligible entity will work with the identified schools and the local educational agency to identify the parents of eligible students (including through contracts or cooperative agreements with the public school or local educational agency) consistent with the requirements of the Family Educational Rights and Privacy Act of 1974 (20 U.S.C. 1232g);

(D) how the eligible entity will structure the project in a manner that permits eligible students to participate in the second and succeeding school years of the project if the schools the eligible students attend with scholarship assistance under this Act are subsequently identified for restructuring under section 1116(b)(8) of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 6316(b)(8));

(E) how the eligible entity will use funds received under this Act;

(F) how the eligible entity will ensure that if more eligible students seek admission to the project than the project can accommodate, the eligible students will be selected through a random selection process;

(G) how the eligible entity will notify parents of eligible students of the expanded choice opportunities provided under the project and how the eligible entity will provide parents with sufficient information to enable the parents to make an informed decision;

(H) how the eligible entity will ensure that the schools receiving eligible students under the grant are financially responsible and will use the grant funds received under this Act effectively;

(I) how the eligible entity will prioritize between providing scholarships and providing sustained, intensive supplemental educational services, including the timing and duration of offering the opportunity for parents to determine which provision the parents prefer; and

(J) how the eligible entity will address the renewal of support for participating eligible students, including continued eligibility.

(e) USES OF FUNDS.—

(1) IN GENERAL.—Each eligible entity that receives a grant under this Act may—

(A) reserve not more than 5 percent of the grant funds for administrative expenses, including costs associated with recruiting and selecting eligible students, private schools, and private providers, to participate in the project;

(B) only for the first year for which grant funds are received under this Act, reserve not more than 5 percent of the grant funds (in addition to the funds reserved under subparagraph (A)), for initial implementation expenses, including costs associated with outreach, providing information to parents and school officials, and other administrative expenses;

(C) use the grant funds to provide scholarships to eligible students to pay for the cost, including tuition, fees, and necessary transportation expenses, to attend the private school of their parents' choice or a public elementary school or secondary school of their parents' choice outside of the eligible students' home school district (consistent with State law), except that the scholarship shall not exceed \$4,000 per student per school year; and

(D) use the grant funds to pay the costs, including reasonable transportation costs, of supplemental educational services (including summer school or after-school programs) provided by a private provider to eligible students, except that the costs shall not exceed \$3,000 per student, per school year.

(2) FUNDING ORDER.—Each eligible entity that receives a grant under this Act shall—

(A) first fund scholarships for eligible students to attend the private school of their parents' choice or a public elementary school or secondary school of their parents' choice outside of the eligible students' home school district (consistent with State law); and

(B) use any remaining grant funds to provide eligible students with access to supplemental educational services.

(3) PAYMENT.—Each eligible entity that receives a grant under this Act shall make scholarship payments under this Act to the parent of the eligible student participating in the project, in a manner that ensures that the payments will be used only for the payment of tuition, fees, and necessary transportation expenses, in accordance with this Act.

(f) PROHIBITION.—A student who receives supplemental educational services under this Act shall not be eligible to receive other such services under section 1116(e) of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 6316(e)).

(g) PROJECT PERFORMANCE.—Each eligible entity receiving a grant under this Act shall prepare and submit to the Secretary a final report on the results of the project assisted under this Act that contains such information as the Secretary may require. At a minimum, the report shall include information on the academic achievement of students receiving scholarships and supplemental educational services under the project.

(h) PERFORMANCE INFORMATION.—Each eligible entity that receives a grant under this Act shall collect and report such performance information as the Secretary may require for the national evaluation conducted under subsection (i).

(i) NATIONAL EVALUATION.—From the amount made available for any fiscal year under section 6, the Secretary shall reserve such sums as may be necessary to conduct an independent evaluation, by grant or by contract, of the program carried out under this Act, which shall include an assessment of the impact of the program on student achievement. The Secretary shall report the results of the evaluation to the appropriate committees of Congress.

SEC. 5. NONDISCRIMINATION.

(a) IN GENERAL.—An eligible entity or a school participating in a project under this Act shall not discriminate against an individual participant in, or an individual applicant to participate in, the project on the basis of race, color, religion, sex, or national origin.

(b) APPLICABILITY AND SINGLE-SEX SCHOOLS, CLASSES, OR ACTIVITIES.—

(1) IN GENERAL.—Notwithstanding any other provision of law, the prohibition of sex discrimination described in subsection (a) shall not apply to a school described in subsection (a) that is operated by, supervised by, controlled by, or connected to, a religious organization, to the extent that the application of subsection (a) is inconsistent with the religious tenets or beliefs of the organization.

(2) PARENTAL CHOICE.—Notwithstanding subsection (a) or any other provision of law, a parent may choose to enroll a child in, and a school may offer, a single-sex school, class, or activity under a project funded under this Act.

(3) NEUTRALITY.—Section 909 of the Education Amendments of 1972 (20 U.S.C. 1688) shall apply to this Act.

(c) CHILDREN WITH DISABILITIES.—Nothing in this Act may be construed to alter or modify the requirements of the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.).

(d) RELIGIOUSLY AFFILIATED SCHOOLS.—

(1) IN GENERAL.—Notwithstanding any other provision of law, a school described in subsection (a) that is operated by, supervised by, controlled by, or connected to, a religious organization may exercise, in matters of employment, the school's rights consistent with title VII of the Civil Rights Act of 1964 (42 U.S.C. 2000e et seq.), including the exemptions in that title.

(2) SPECIAL RULE.—Notwithstanding any other provision of law, if a school described in subsection (a) receives funds made available under this Act for an eligible student as a result of a choice made by the student's parent, the receipt of the funds shall not, consistent with the first amendment of the Constitution—

(A) necessitate any change in the school's teaching mission;

(B) require the school to remove any religious art, icon, scripture, or other symbol; or

(C) preclude the school from retaining a religious term in its name, selecting its board members on a religious basis, or including a religious reference in its mission statement or another chartering or governing document.

(e) RULES OF CONSTRUCTION.—For purposes of Federal law, a scholarship provided under this Act to a student shall be considered to be assistance to the parent of the student and shall not be considered to be assistance to the school that enrolls the student. The amount of any scholarship (or other form of support for the provision of supplemental educational services) provided to a parent of an eligible student under this Act shall not be treated as income of a parent of the eligible student for purposes of Federal tax laws or for purposes of determining eligibility for any other Federal program, other than the program carried out under this Act.

SEC. 6. AUTHORIZATION OF APPROPRIATIONS.

There are authorized to be appropriated to carry out this Act \$100,000,000 for fiscal year 2007 and such sums as may be necessary for each of the 4 succeeding fiscal years.

Mr. ENSIGN. Mr. President, I am pleased to join my colleague, Senator ALEXANDER, in introducing legislation

that would create the America's Opportunity Scholarships for Kids. First proposed by President Bush, this legislation will provide children who are in schools designated for restructuring with scholarships either for the cost of tuition at a private school or for sustained, supplemental educational services.

The No Child Left Behind Act set up a structure for schools to get evaluated annually to determine whether they are meeting adequate yearly progress. Schools are designated for restructuring after 6 years of poor student academic achievement. Children are often trapped in these circumstances, and this legislation will help provide them with either a way out or additional services to increase their academic achievement levels.

I believe that the America's Opportunity Scholarships for Kids will provide true school choice across the country.

Competitiveness and innovation are two of the latest buzz words that surround education. I believe that school choice will breed both competitiveness and innovation.

A few years ago I read an article by Maurice McTigue, now a professor at George Mason University. Mr. McTigue was the equivalent of the Secretary of Transportation in New Zealand when their government underwent a radical transformation. During that time New Zealand's government was decentralized, with most control and money going to local areas. This included the education system.

Rather than having money go directly to the schools, the money followed the children. The government set specific dollar amounts for each child, depending on whether the child had special needs, and that money was given to the school of the child's parents' choice.

This truly radical change caused great uproar at the time, as everyone believed that it would lead to the destruction of the public school system. During the first few years of this new system, enrollment in public schools did decline slightly. However, because each public school was allowed to change and meet the needs of its local students, parents eventually moved back to their home schools.

Now, public school enrollment is at an all-time high in New Zealand. Why? Because schools were forced to compete among themselves without artificial governmental barriers. Parents were allowed to choose the school that best fit their child's needs.

I believe the same thing would happen in the United States if school choice were made available across the country. In fact, two studies by Harvard researchers have shown that, as the voucher program in Milwaukee was expanded, there was a marked improvement in test scores at the public schools most threatened by the program. Students in these public schools have benefited from competition.

In Milwaukee, the choice program caused the public school system to shift power from a centralized administration to each individual school. This shift allowed parents and teachers to make decisions, including who could teach at the school.

Elementary and secondary education is one of the few sectors in this country that does not have open competition. By contrast, our higher education system has flourished because of competition.

The purpose of this legislation is to provide low-income children who are in schools that have consistently not met adequate yearly progress benchmarks, and have not improved student academic achievement, with other options.

This legislation would provide low-income students and their parents with two options. First, these students would have the option of a \$4,000 scholarship that would be applied to the cost of tuition at the private school of their parent's choice. If parents decide not to take the scholarship, their child would be eligible for up to \$3,000 of intensive, sustained supplemental educational services. Supplemental educational services are services that are provided outside of the regular school day, such as after or before school, that are designed to improve academic achievement.

I believe that this legislation is the next step toward bringing true competition to elementary and secondary education.

I hope that my colleagues will join Senator ALEXANDER and me in supporting this legislation.

By Mr. ALLEN (for himself, Mr. BINGAMAN, and Mrs. BOXER):

S. 3684. A bill to study and promote the use of energy efficient computer servers in the United States; to the Committee on Energy and Natural Resources.

Mr. BINGAMAN. Mr. President, I am pleased to join the Senator from Virginia as an original cosponsor of legislation to study and promote the use of energy efficient computer servers in the United States. The growth of the Internet and online applications and the strong demand for electronic transactions are creating a growing need for data centers. Most data center equipment is composed of servers, which are computers that share resources with other computers on a network.

The average annual power and cooling bill for 100 servers is about \$40,000—from Computer World, February 6, 2006. The U.S. server market is expected to grow from 2.8 billion servers in 2005 to 4.9 billion in 2009. Without improved efficiency, data center power costs could easily overtake hardware costs in the next few years—A. Fanara, EPA, technical workshop on server benchmarking, March 27, 2006.

Our bill would require the Administrator of EPA to study and analyze the growth and energy consumption of computer data centers. A critical goal

of the study is to develop a standard way to measure server efficiency. Energy efficient servers and data center designs are currently available. This analysis would help promote the use of efficient server technology through the Energy Star Program or the Department of Energy's buildings standards program and allow consumers to compare products on the basis of efficiency.

This legislation has broad support from the information technology sector and energy efficiency advocates, including the Alliance to Save Energy, the American Electronics Association, the American Council for an Energy Efficient Economy, the Electronic Industries Alliance, the Information Technology Industry Council, the Semiconductor Association, and leading companies such as Intel, AMD, Sun, and HP.

Mr. President, under the bipartisan leadership of Representative ESHOO, and Representative ROGERS, the House approved identical legislation last week. I hope that the Senate will also pass this needed legislation as soon as possible.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 534—CONDEMNING HEZBOLLAH AND HAMAS AND THEIR STATE SPONSORS AND SUPPORTING ISRAEL'S EXERCISE OF ITS RIGHT TO SELF-DEFENSE

Mr. FRIST (for himself, Mr. REID, Mr. BIDEN, Mr. SANTORUM, Mr. NELSON of Florida, Mr. KYL, Mr. BOND, Mrs. HUTCHISON, Mr. LEVIN, Mrs. DOLE, Mr. GRASSLEY, Mr. BUNNING, Mr. SMITH, Mr. TALENT, Mr. ROBERTS, Mr. VITTER, Mr. CORNYN, Mr. VOINOVICH, Mr. ALLEN, Mr. COLEMAN, Mr. MCCONNELL, Mr. BROWNBACK, Mr. AKAKA, Mr. BAUCUS, Mr. BAYH, Mr. BINGAMAN, Mrs. BOXER, Ms. CANTWELL, Mr. CARPER, Mrs. CLINTON, Mr. CONRAD, Mr. DAYTON, Mr. DODD, Mr. DORGAN, Mr. DURBIN, Mr. FEINGOLD, Mrs. FEINSTEIN, Mr. HARKIN, Mr. INOUE, Mr. JOHNSON, Mr. KENNEDY, Mr. KERRY, Mr. KOHL, Ms. LANDRIEU, Mr. LAUTENBERG, Mr. LEAHY, Mr. LIEBERMAN, Mrs. LINCOLN, Mr. MENENDEZ, Ms. MIKULSKI, Mrs. MURRAY, Mr. NELSON of Nebraska, Mr. OBAMA, Mr. PRYOR, Mr. REED, Mr. ROCKEFELLER, Mr. SALAZAR, Mr. SARBANES, Mr. SCHUMER, Ms. STABENOW, Mr. WYDEN, and Mr. MCCAIN) submitted the following resolution; which was considered and agreed to:

S. RES. 534

Whereas Israel fully complied with United Nations Security Council Resolution 425 (adopted March 19, 1978) by completely withdrawing its forces from Lebanon, as certified by the United Nations Security Council and affirmed by United Nations Secretary General Kofi Annan on June 16, 2000, when he said, "Israel has withdrawn from [Lebanon] in full compliance with Security Council Resolution 425.":

Whereas United Nations Security Council Resolution 1559 (adopted September 2, 2004)