Calendar No. 214

103d CONGRESS 1ST SESSION S. 732

A BILL

To provide for the immunization of all children in the United States against vaccine-preventable diseases, and for other purposes.

SEPTEMBER 28 (legislative day, SEPTEMBER 27), 1993

Reported with an amendment

Calendar No. 214

103D CONGRESS 1ST SESSION

S. 732

To provide for the immunization of all children in the United States against vaccine-preventable diseases, and for other purposes.

IN THE SENATE OF THE UNITED STATES

APRIL 1 (legislative day, MARCH 3), 1993

Mr. KENNEDY (for himself, Mr. RIEGLE, Mr. SIMON, Mr. WELLSTONE, Mr. METZENBAUM, Ms. MIKULSKI, Mr. PELL, Mr. DORGAN, Mr. BINGAMAN, Mr. HARKIN, Mr. WOFFORD, Mr. DODD, Mrs. KASSEBAUM, Mr. JEFFORDS, and Mr. CAMPBELL) introduced the following bill; which was read twice and referred to the Committee on Labor and Human Resources

SEPTEMBER 28 (legislative day, SEPTEMBER 27), 1993 Reported by Mr. KENNEDY, with an amendment [Strike out all after the enacting clause and insert the part printed in italic]

A BILL

- To provide for the immunization of all children in the United States against vaccine-preventable diseases, and for other purposes.
 - 1 Be it enacted by the Senate and House of Representa-
 - 2 tives of the United States of America in Congress assembled,

3 SECTION 1. SHORT TITLE AND REFERENCES.

- 4 (a) SHORT TITLE.—This Act may be cited as the
- 5 "Comprehensive Child Immunization Act of 1993".

1 (b) REFERENCES. Except as otherwise expressly 2 provided, whenever in this Act an amendment or repeal 3 is expressed in terms of an amendment to, or repeal of, 4 a section or other provision, the reference shall be consid-5 ered to be made to a section or other provision of the Pub-6 lie Health Service Act (42 U.S.C. 201 et seq.).

7 SEC. 2. FINDINGS AND PURPOSE.

8 (a) FINDINGS.

9 (1) CURRENT CIRCUMSTANCES. Congress 10 finds the following:

11 (A) Immunizations are among the most
 12 cost-effective means of preventing disease.

(B) Although Federal support for child-13 14 hood immunizations has been in existence since 15 1962, the full potential of immunizations remains to be achieved. Enactment and enforce-16 17 ment of school immunization requirements have 18 resulted in excellent immunization levels (96 19 percent or greater) in school children. However, approximately 80 percent of vaccine doses 20 21 should be received before the second birthday in 22 order to protect children during their most vulnerable periods. Many children do not receive 23 24 their basic immunizations by that time, and in some inner cities as few as 10 percent of 2-25

1	year-olds have received a complete series. This
2	low level of immunizations has been reflected in
3	recent years by outbreaks of measles among in-
4	adequately immunized preschool children.
5	(C) The immunization services delivery in-
6	frastructure to immunize children is both public
7	and private. There is considerable evidence to
8	suggest that the private infrastructure has been
9	eroded over the past decade as a result of the
10	significantly increased cost of privately pur-
11	chased vaccines.
12	(D) Prices for privately purchased vaccines
13	exceed the prices paid for like vaccines in some
14	other industrialized nations by over 2500 per-
15	cent.
16	(E) High vaccine costs, coupled with the
17	growing number of uninsured and underinsured
18	families, has resulted in private physicians in-
19	creasingly referring their private-pay patients to
20	overburdened public clinics for vaccinations.
21	(F) Eleven States now have programs that
22	provide vaccines without charge to both public
23	and private health care providers. Other States
24	that have sought to establish such programs

have been denied additional discounted vaccines by manufacturers.

3 (C) There is no evidence to suggest that a negotiated price that takes into account the rea-4 sonable cost of production, marketing, research 5 and development, and distribution will not fairly 6 compensate vaccine manufacturers. Indeed, a 7 recent report by the Congressional Office of 8 9 Technology Assessment supports the propo-10 sition that negotiated rates can assure fair com-11 pensation while holding down costs.

12 (H) The Secretary of Health and Human
 13 Services has experience negotiating vaccine pur 14 chase through the Federal contract system.

15(I) The National Vaccine Injury Com-16pensation Program is an essential element in a17comprehensive immunization program and18should be strengthened and applied to addi-19tional vaccines recommended for universal use20in children.

21 (2) NEEDED ACTIONS. With respect to actions
22 necessary to ensure the full immunization of children
23 at the earliest possible age, Congress finds the fol24 lowing:

4

1

1 (A) The Federal Government should pur-2 chase and provide free of charge to health care 3 providers vaccines recommended for universal 4 use in children. This action will not only remove 5 financial barriers to immunization that impede children from being vaccinated at the appro-6 7 priate time, but will also facilitate the development of an immunization tracking system. 8

9 (B) The Federal Government and the 10 States should develop linked registries to track 11 the immunization status of the Nation's chil-12 dren. The registry system should have the capa-13 bility to notify parents of inadequately immu-14 nized children of the need to protect their chil-15 dren with specific vaccines.

(C) The coordinated national information 16 17 and education outreach initiative operated 18 through the Department of Health and Human 19 Services should be sustained to bring needed information to parents and health care providers 20 and focus their attention on the importance of 21 22 achieving the full and timely immunization of 23 children at the earliest appropriate age.

24 (D) Private and public health insurers
25 should be encouraged to provide adequate reim-

1bursement for the administration of childhood2vaccines.

3 (E) Volunteer community activities to pro-4 mote the full immunization of children at the 5 earliest appropriate age should be encouraged. (F) The National Vaccine Injury Com-6 7 pensation Program should be extended and im-8 proved. Vaccine information materials should be 9 simplified to ensure that parents can under-10 stand the benefits and risks of vaccines.

(b) PURPOSE. It is the purpose of this Act to ensure
that all children in the United States are fully immunized
against vaccine preventable infectious diseases at the earliest appropriate age.

15 SEC. 3. NATIONAL IMMUNIZATION TRACKING SYSTEM.

16 (a) IN GENERAL. Title XXI of the Public Health
17 Service Act (42 U.S.C. 300aa-1 et seq.) is amended by
18 adding at the end thereof the following new subtitle:

19 "Subtitle 3—Improved Immuniza-

20 tion and National Tracking Sys-

21 **tem**

22 "SEC. 2141. RECOMMENDED CHILDHOOD VACCINES.

23 "Not later than October 1, 1994, (and periodically
24 thereafter as the Secretary determines appropriate in view
25 of advances in scientific understanding in the areas of im-

munization and disease control) the Secretary shall pro-1 mulgate a list of vaccines that provide immunization 2 against naturally occurring infectious diseases and are 3 4 recommended for universal use in children. The Secretary shall concurrently promulgate recommendations regarding 5 the appropriate dosage for each such vaccine, and the age 6 7 or ages of children at which each vaccine should be admin-8 istered.

9 "SEC. 2142. TRACKING OF CHILDHOOD IMMUNIZATIONS.

10 <u>"(a) NATIONAL TRACKING SYSTEM.</u>

11 <u>"(1) ESTABLISHMENT. The Secretary shall es-</u>
12 tablish a national system to track the immunization
13 status of children.

14 <u>"(2)</u> SYSTEM DESIGN. The system established
 15 under paragraph (1) shall be designed to—

16 <u>"(A) provide accurate and up to date sur-</u>
17 <u>veillance data regarding immunization rates at</u>
18 <u>the local and State levels;</u>

19 <u>"(B)</u> assist in identifying localities with in20 adequate immunization rates to target for nec21 essary remedial actions;

22 "(C) be used to identify unvaccinated chil 23 dren and trigger a notification system for the
 24 parents or legal guardians and health care pro 25 viders of such children;

"(D) be used to assist in the effective ad-1 2 ministration and management of immunization 3 programs at State and local levels by providing 4 data to guide immunization program efforts; 5 "(E) assist States and localities in tracking 6 the immunization status of children who move 7 across geographic boundaries that are covered by different State or local registries; and 8 9 "(F) monitor the safety and effectiveness of vaccines by linking vaccine dosage informa-10 11 tion with adverse events reporting under section 12 2125(b) and disease outbreak patterns. 13 (3) NOTIFICATION OF PARENTS.—The Sec-14 retary is authorized, in the case of inadequately im-15 munized children in States not receiving grants 16 under subsection (b), to notify the parents or guard-17 ians of those children receiving services through 18 paragraphs (1), (2) or (3) of section 2143(a) of the 19 need to protect their children with specific vaccine. 20 ((b) STATE REGISTRY GRANTS.—

21 <u>''(1) IN GENERAL.</u> The Secretary may award
22 grants to States to enable such States to establish
23 and operate State immunization tracking registries.
24 A State receiving a grant under this section shall

1	maintain a registry that includes the following infor-
2	mation for each child living within the State:
3	''(A) The type and lot number of each rec-
4	ommended childhood vaccine administered after
5	September 30, 1996.
6	"(B) An identification of the health care
7	provider administering such vaccine.
8	''(C) The address and other demographic
9	data needed to find the child.
10	''(D) Notations of any adverse events asso-
11	ciated with each immunization.
12	···(E) Special religious considerations or
13	medical conditions that are contraindications
14	for immunizations.
15	"(F) Such other information as the Sec-
16	retary may prescribe.
17	''(2) Grant conditions.—A State, as a condi-
18	tion of receiving a grant under this subsection, shall
19	comply with the following requirements:
20	''(A) The State registry shall provide for
21	entry of the birth of each infant within the
22	state within six weeks following the birth, and
23	for timely entry thereafter of all information re-
24	ceived from health care providers pursuant to
25	section $2143(b)(2)$ or section $2125(b)$.

1 "(B) Subject to subsection (c), the State 2 shall provide for the sharing of appropriate in-3 formation from the State's registry, including 4 immunization status and reports of adverse reactions, with health care providers who offer 5 immunizations for the purpose of achieving the 6 7 full immunization of all children in accordance with the recommendations of the Secretary 8 9 under section 2141. "(C) The State shall provide for notifica-10

10 -(C) The State shall provide for notifica-11 tion to the parents or guardian of an inad-12 equately immunized child of the need to protect 13 the child with specific vaccine, except as pro-14 vided in paragraph (1)(E).

15 "(D) Subject to subsection (c), the State
16 shall provide for the coordination and exchange
17 of information with other State registries to
18 allow the tracking of the immunization status
19 of children changing State of residence.

20 "(E) The State shall periodically furnish to
21 the Secretary, at such times and in such form
22 as the Secretary may prescribe, information
23 contained in the State registry.

24 <u>"(F) In designing its registry, the State</u>
25 shall adhere to tracking models and systems

1

2

3

4

5

6

specifications prescribed by the Secretary for the purpose of ensuring the mutual compatibility of the data systems and electronic information technology utilized by the Secretary and the various States in carrying out activities under this subtitle.

7 "(C) The State shall monitor and enforce compliance by health care providers with the re-8 quirements of section 2143(b). The State shall 9 establish procedures satisfactory to the Sec-10 retary for terminating from participation in the 11 recommended childhood vaccine distribution 12 13 program any health care provider who fails to 14 comply with the requirements of section 15 2143(b)(1) and for reinstating such provider to 16 program participation upon receiving from such 17 provider-

18 ^{('(i)} the reports necessary to make
19 current and complete the information that
20 would have been furnished to the State
21 registry between the dates of the provider's
22 termination and reinstatement; and
23 ^{('(ii)} satisfactory assurances regarding
24 the provider's future compliance.

<u>"(H) If a State distributes recommended</u> 1 2 childhood vaccines within the State on behalf of 3 the Secretary pursuant to section 2143(a), the 4 State shall compile data, including lot numbers, on the vaccines distributed to each health care 5 6 provider and shall furnish such data to the Sec-7 retary in such form and at such intervals as the Secretary may prescribe. 8 "(3) APPLICATIONS. A State shall prepare 9 and submit to the Secretary an application for a 10 11 grant under subsection (b) in such form and con-12 taining such information as the Secretary may prescribe. The application shall include-13 14 "(A) a description of the methods by which 15 the State will comply with the requirements of 16 paragraph (2); 17 "(B) the assurances required by paragraph 18 (4); and 19 "(C) a description of the expenses that the 20 State will incur in connection with its responsibilities under the grant. 21 22 "(4) Assurances.—A State submitting an ap-23 plication for a grant under this section shall provide 24 assurances satisfactory to the Secretary that—

1	''(A) the State's tracking registry will be
2	fully operational not later than October 1,
3	1996;

^{((B)} the State's tracking registry will adhere to any tracking models and systems specifications prescribed by the Secretary pursuant to paragraph (2)(F); and

8 ^{((C)} as appropriate, the State is making 9 satisfactory and timely progress toward achiev-10 ing the conditions described in subparagraphs 11 (A) and (B).

12 "(5) Allowable uses of grant funds.—A State may use amounts from a grant awarded under 13 14 this subsection for reasonable costs associated with 15 the development and operation of its registry, includ-16 ing computer needs, technical assistance and train-17 ing, education of health care providers, personnel 18 costs, travel expenses, and other appropriate activi-19 ties.

20 <u>"(6) STATE REPORTS TO THE SECRETARY.—A</u>
21 State shall prepare and submit annual reports to the
22 Secretary concerning the operation of the State's
23 registry and other activities under this subtitle. Such
24 reports shall be in such form, contain such informa-

4

5

6

tion, and be submitted at such intervals as the Sec retary may prescribe.

3 <u>"(c) Use and Disclosure of Personal Informa-</u>
4 TION.

<u>"(1) GENERAL RULE. No personally-identifi</u> 5 able information relating to a child who receives rec-6 ommended childhood vaccine under this subtitle or 7 to the parent or guardian of such a child that is col-8 lected or maintained by the National Tracking Sys-9 10 tem established under subsection (a), or a State immunization tracking registry established under sub-11 12 section (b), may be used or disclosed by any holder of such information except as permitted by this sub-13 14 section.

15 <u>"(2) GENERAL PERMISSIBLE USES.</u> Informa-16 tion described in paragraph (1) may be used or dis-17 closed, without the consent of the individual to 18 whom it refers, or of the parent or guardian of such 19 individual, for—

20 "(A) the tracking of children's immuniza21 tion status, and other purposes directly related
22 to the health of the children being tracked and
23 of their families;

24 <u>"(B) oversight, audit, and evaluation of</u>
25 the immunization delivery and tracking activi-

1	ties, and the enforcement of the provisions of
2	this title;
3	''(C) activities relating to establishing and
4	maintaining a safe and effective supply of rec-
5	ommended childhood vaccine (including activi-
6	ties to carry out part C of subtitle 2);
7	''(D) processing of insurance claims for
8	payment for vaccine administration (but only to
9	the extent necessary to process a claim); or
10	''(E) administration of the National Vac-
11	cine Injury Compensation Program under sub-
12	title 2.
13	··(3) Permissible use with written au-
14	THORIZATION. Information described in paragraph
15	(1) may be used or disclosed with the written au-
16	thorization of the individual to whom it refers, or
17	the parent or guardian of such individual, and must,
18	upon the request of such individual, or parent or
19	guardian, be provided in writing to the individual.
20	"(4) Regulations.—The Secretary is author-
21	ized to issue regulations—
22	''(A) governing the use, maintenance, and
23	disclosure, by any holder of information de-
24	scribed in paragraph (1), including appropriate
25	administrative, technical and physical safe-

1	guards to ensure that only authorized persons
2	have access to the information; and
3	''(B) establishing conditions for access by
4	individuals, and their parents or guardians, to
5	such information about themselves.
6	''(5) Violations. Any person who know-
7	ingly—
8	${}$ (A) uses or discloses information in viola-
9	tion of this subsection; or
10	"(B) requests or obtains any information
11	in violation of this subsection, and offers or
12	provides anything of value in exchange for the
13	provision of the information;
14	shall be fined as prescribed by title 18, United
15	States Code, or imprisoned not more than 3 years,
16	or both.
17	"(d) Authority To Use Social Security Num-
18	BERS
19	<u>"(1)</u> IN GENERAL. Notwithstanding section
20	205 of the Social Security Act or any other provision
21	of law, the Secretary and States receiving grants
22	under subsection (b) may utilize the social security
23	number, or other means of identification, of a child
24	or of a parent or guardian of the child for purposes
25	of identification of a child in any registry established

under this section, and may require a child's parent
 or guardian to furnish such number (in any case
 where such a number has been assigned by the So cial Security Administration) as a condition of the
 child receiving recommended childhood vaccine under
 this subtitle.

7 ⁽¹⁾(2) AUTHORITY TO REDISCLOSE. Notwith8 standing section 205(c)(2)(C)(vii)(I) of the Social
9 Security Act, a social security number obtained in
10 connection with activities under this subtitle may be
11 redisclosed if such redisclosure is otherwise in ac12 cordance with subsection (c) of this section.

"(e) REPORTS BY SECRETARY TO THE CONGRESS.
Not later than January 1, 1995, and biennially thereafter,
the Secretary shall prepare and submit to the appropriate
committees of Congress a report concerning the planning,
development and operation of the national tracking system
and the State registries.

19 "SEC. 2143. DISTRIBUTION OF VACCINES.

20 "(a) IN GENERAL. The Secretary shall provide for
21 the distribution without charge of recommended childhood
22 vaccines purchased by the Secretary under the Social Se23 curity Act to health care providers who serve children and
24 who—

1 "(1) are members of a uniformed service, or are 2 officers or employees of the United States; 3 "(2) are health centers (as defined in section 4 2144(2); 5 "(3) provide services under section 503 of the 6 Indian Health Care Improvement Act or pursuant to 7 a contract under section 102 of the Indian Self De-8 termination Act; or "(4) are located in a State receiving a grant 9 10 under section 2142(b). 11 The Secretary may provide for such distribution through any State that receives a grant under section 2142(b). 12 "(b) DUTIES OF HEALTH CARE PROVIDERS. 13 14 "(1) FREE PROVISION TO CHILDREN.—A health 15 care provider receiving vaccine under this section 16 may use such vaccine only for administration to chil-17 dren and may not impose a charge for such vaccine. 18 A provider may impose a fee for the administration 19 of such vaccine, except that a provider may not deny 20 a child a vaccination due to the inability of the 21 child's parent or guardian to pay an administration 22 fee. 23 <u>(2) Reporting requirements.</u> A health

care provider receiving vaccine under this section
 shall report to the applicable State registry operated

1	pursuant to a grant under section 2142(b) (or to the
2	Secretary if there is no such State registry) the data
3	described in section 2142(b)(1) for each dose of vac-
4	cine administered to a child. The provider shall addi-
5	tionally report to such State registry any occurrence
6	reported to the Secretary pursuant to section
7	2125(b). The provider shall also provide regular and
8	periodic estimates to the State of the provider's fu-
9	ture dosage needs for recommended childhood vac-
10	cine distributed under this section. All reports shall
11	be made with such frequency and in such detail as
12	the Secretary may prescribe.
13	"SEC. 2144. DEFINITIONS.
13 14	"SEC. 2144. DEFINITIONS. "For purposes of this subtitle
_	
14	<u>"For purposes of this subtitle</u>
14 15	''For purposes of this subtitle— ''(1) Health center.—The term 'health cen-
14 15 16	<u>"For purposes of this subtitle</u> <u>"(1) HEALTH CENTER.—The term 'health cen-</u> ter' means—
14 15 16 17	"For purposes of this subtitle— "(1) HEALTH CENTER.—The term 'health cen- ter' means— "(A) a federally-qualified health center, as
14 15 16 17 18	"For purposes of this subtitle— "(1) HEALTH CENTER.—The term 'health cen- ter' means— "(A) a federally qualified health center, as defined in section 1905(l)(2) of the Social Secu-
14 15 16 17 18 19	<pre>"For purposes of this subtitle— "(1) HEALTH CENTER.—The term 'health cen- ter' means— "(A) a federally-qualified health center, as defined in section 1905(l)(2) of the Social Secu- rity Act; or</pre>
 14 15 16 17 18 19 20 	<pre>"For purposes of this subtitle— "(1) HEALTH CENTER.— The term 'health cen- ter' means— "(A) a federally-qualified health center, as defined in section 1905(l)(2) of the Social Secu- rity Act; or "(B) a public or nonprofit private entity</pre>
 14 15 16 17 18 19 20 21 	<pre>"For purposes of this subtitle— "(1) HEALTH CENTER.—The term 'health cen- ter' means— ""(A) a federally-qualified health center, as defined in section 1905(l)(2) of the Social Secu- rity Act; or ""(B) a public or nonprofit private entity receiving Federal funds under—</pre>
 14 15 16 17 18 19 20 21 22 	"For purposes of this subtitle— "(1) HEALTH CENTER.—The term 'health cen- ter' means— "(A) a federally-qualified health center, as defined in section 1905(1)(2) of the Social Secu- rity Act; or "(B) a public or nonprofit private entity receiving Federal funds under— "(i) section 340A (relating to grants)

1	$\frac{(i)}{(i)}$ section $501(a)(2)$ of the Social
2	Security Act (relating to special projects of
3	regional and national significance).

4 <u>"(2)</u> RECOMMENDED CHILDHOOD VACCINE.
5 The term 'recommended childhood vaccine' is a vac6 cine on the list promulgated by the Secretary pursu7 ant to section 2141.

8 "SEC. 2145. AUTHORIZATION OF APPROPRIATIONS.

9 "For the purpose of awarding grants under section 10 2142 and for the operation of the tracking system author-11 ized by such section, there are authorized to be appro-12 priated \$152,000,000 for fiscal year 1995, \$125,000,000 13 for fiscal year 1996, and \$35,000,000 for each of fiscal 14 years 1997 through 1999.".

15 SEC. 4. GRANTS FOR IMMUNIZATION.

Section 317(j)(1) (42 U.S.C. 247b(j)(1)) is amended
by adding at the end thereof the following new subparagraph:

19 "(C)(i) Funds that are made available for the pur-20 pose of strengthening the public health infrastructure and 21 used in the delivery of childhood immunization services 22 shall be used for activities that are consistent with a stra-23 tegic plan that meets nationally established immunization 24 goals and that was developed by the State in consultation 25 with representatives of health care providers, health cen-

ters (as defined in clause (iii)), State agencies serving
 young children, and other entities involved in the preven tion and control of vaccine-preventable illnesses.

4 "(ii) For purposes of clause (i), activities designed to strengthen the public health infrastructure and used in the 5 delivery of childhood immunization services shall include 6 7 public and provider education, community outreach initiatives, improvements in the capacity of health centers and 8 9 local health departments to provide immunization services (including expansion of the number of hours in which such 10 services are provided), and activities to facilitate the devel-11 opment and operation of State immunization tracking reg-12 13 istries.

14 <u>''(iii)</u> For purposes of this paragraph, the term
15 <u>'health center' means a public or nonprofit private entity</u>
16 receiving Federal funds under—

17 <u>"(I) section 329 (relating to grants for migrant</u>
18 health centers);

19 <u>"(II) section 330 (relating to grants for com-</u>
20 munity health centers);

21 <u>"(III) section 340 (relating to grants for health</u>
22 services for the homeless); or

23 <u>"(IV) section 340A (relating to grants for</u>
24 health services for residents of public housing).".

2 GRAM AMENDMENTS.

3 (a) Amendment of Vaccine Injury Table.

4 (1) ADDITION OF VACCINES. Section 2114 (42
5 U.S.C. 300aa 14) is amended by adding at the end
6 thereof the following new subsection:

7 "(f) Addition of Vaccines to Table.—The Vac-8 cine Injury Table in subsection (a) shall also include any 9 recommended childhood vaccine included in the list promulgated by the Secretary under section 2141. The Sec-10 retary may modify the Table with respect to any vaccine 11 added by operation of the preceding sentence only in ac-12 cordance with subsection (c). For purposes of section 13 2116(b), the addition of a vaccine to the Table by oper-14 ation of this subsection shall constitute a revision of this 15 Table.". 16

17 (2) LIMITATION OF ACTIONS. Section 2116(b) (42
18 U.S.C. 300aa–16(b)) is amended by striking "such person
19 may file" and inserting "or to significantly increase the
20 likelihood of obtaining compensation, such person may,
21 notwithstanding section 2111(b)(2), file".

(b) EXTENSION OF TIME FOR DECISION. Section
23 2112(d)(3)(D) (42 U.S.C. 300aa-12(d)(3)(D)) is amended by striking "540 days" and inserting "30 months (but
for not more than 6 months at a time)".

1	(c) SIMPLIFICATION OF VACCINE INFORMATION MA-
2	TERIALS.
3	(1) INFORMATION. Section 2126(b) (42
4	U.S.C. 300aa-26(b)) is amended—
5	(A) by striking "by rule" in the matter
6	preceding paragraph (1);
7	(B) in paragraph (1), by striking ", oppor-
8	tunity for a public hearing, and 90" and insert-
9	ing "and 30"; and
10	(C) in paragraph (2), by striking ", appro-
11	priate health care providers and parent organi-
12	zations".
13	(2) REQUIREMENTS. Section 2126(c) (42
14	U.S.C. 300aa-26(c)) is amended—
15	(A) in the matter preceding paragraph (1) ,
16	by inserting "shall be based on available data
17	and information," after "such materials"; and
18	(B) by striking out paragraphs (1) through
19	(10) and inserting in lieu thereof the following
20	new paragraphs:
21	${}$ (1) a concise description of the benefits of the
22	vaccine;
23	"(2) a concise description of the risks associ-
24	ated with the vaccine; and

1	"(3) a statement of the availability of the Na-
2	tional Vaccine Injury Compensation Program.".
3	(3) OTHER INDIVIDUALS.—Subsections (a) and
4	(d) of section 2126 (42 U.S.C. 300aa-26(a) and
5	(d)) are amended by inserting "or to any other indi-
6	vidual" immediately after "to the legal representa-
7	tive of any child" each place that such occurs.
8	(4) PROVIDER DUTIES. Subsection (d) of sec-
9	tion 2126 (42 U.S.C. 300aa-26(d)) is amended—
10	(A) by striking all after "subsection (a),"
11	the second place it appears in the first sentence
12	and inserting ''supplemented with visual presen-
13	tations or oral explanations, in appropriate
14	cases."; and
15	(B) by striking "or other information" in
16	the last sentence.
17	SECTION 1. SHORT TITLE, REFERENCES AND PURPOSE.
18	(a) SHORT TITLE.—This Act may be cited as the
19	"Comprehensive Child Immunization Act of 1993".
20	(b) References.—Except as otherwise expressly pro-
21	vided, whenever in this Act an amendment or repeal is ex-
22	pressed in terms of an amendment to, or repeal of, a section
23	or other provision, the reference shall be considered to be
24	made to a section or other provision of the Public Health
25	Service Act (42 U.S.C. 201 et seq.).

(c) PURPOSE.—It is the purpose of this Act to ensure 1 2 that children in the United States are appropriately immunized against vaccine preventable infectious diseases at the 3 earliest appropriate age. 4 5 SEC. 2. MONITORING OF CHILDHOOD IMMUNIZATIONS. 6 Title XXI of the Public Health Service Act (42 U.S.C. 7 300aa-1 et seq.) is amended by adding at the end thereof 8 the following new subtitle: "Subtitle 3—Improved Immuniza-9 tion Delivery and Monitoring 10 **Systems** 11 12 "Part A—List of Vaccines and Administration 13 "SEC. 2141. LIST OF PEDIATRIC VACCINES: SCHEDULE FOR 14 ADMINISTRATION. "(a) Recommended Pediatric Vaccines.— 15 "(1) IN GENERAL.—The Secretary shall establish 16 17 a list of the vaccines that the Secretary recommends 18 for administration to all children for the purpose of immunizing the children, subject to such contra-19 20 indications for particular medical categories of children as the Secretary may establish under subsection 21 22 (b)(1)(D). The Secretary shall periodically review the *list, and shall revise the list as appropriate.* 23 24 "(2) RULE OF CONSTRUCTION.—

1	"(A) The list of vaccines specified in sub-
2	paragraph (B) is deemed to be the list of vac-
3	cines maintained under paragraph (1).
4	"(B) The list of vaccines specified in this
5	subparagraph is the list of vaccines that, for pur-
6	poses of paragraph (1), is established (and peri-
7	odically reviewed and as appropriate revised) by
8	the Advisory Committee on Immunization Prac-
9	tices, an advisory committee established by the
10	Secretary, acting through the Director of the
11	Centers for Disease Control and Prevention.
12	"(b) Recommended Schedule for Administra-
13	TION.—
13 14	TION.— "(1) IN GENERAL.—Subject to paragraph (2), in
14	"(1) IN GENERAL.—Subject to paragraph (2), in
14 15	"(1) IN GENERAL.—Subject to paragraph (2), in the case of a pediatric vaccine, the Secretary shall es-
14 15 16	"(1) IN GENERAL.—Subject to paragraph (2), in the case of a pediatric vaccine, the Secretary shall es- tablish (and periodically review and as appropriate
14 15 16 17	"(1) IN GENERAL.—Subject to paragraph (2), in the case of a pediatric vaccine, the Secretary shall es- tablish (and periodically review and as appropriate revise) a schedule of nonbinding recommendations for
14 15 16 17 18	"(1) IN GENERAL.—Subject to paragraph (2), in the case of a pediatric vaccine, the Secretary shall es- tablish (and periodically review and as appropriate revise) a schedule of nonbinding recommendations for the following:
14 15 16 17 18 19	"(1) IN GENERAL.—Subject to paragraph (2), in the case of a pediatric vaccine, the Secretary shall es- tablish (and periodically review and as appropriate revise) a schedule of nonbinding recommendations for the following: "(A) The number of immunizations with
14 15 16 17 18 19 20	"(1) IN GENERAL.—Subject to paragraph (2), in the case of a pediatric vaccine, the Secretary shall es- tablish (and periodically review and as appropriate revise) a schedule of nonbinding recommendations for the following: "(A) The number of immunizations with the vaccine that children should receive.
14 15 16 17 18 19 20 21	"(1) IN GENERAL.—Subject to paragraph (2), in the case of a pediatric vaccine, the Secretary shall es- tablish (and periodically review and as appropriate revise) a schedule of nonbinding recommendations for the following: "(A) The number of immunizations with the vaccine that children should receive. "(B) The ages at which children should re-

	~ I
1	"(D) Any contraindications regarding ad-
2	ministration of the vaccine.
3	"(E) Such other guidelines as the Secretary
4	determines to be appropriate with respect to ad-
5	ministering the vaccine to children.
6	"(2) VARIATIONS IN MEDICAL PRACTICE.—In es-
7	tablishing and revising a schedule under paragraph
8	(1), the Secretary shall ensure that, in the case of the
9	pediatric vaccine involved, the schedule provides for
10	the full range of variations in medical judgment re-
11	garding the administration of the vaccine, subject to
12	remaining within medical norms.
13	"(3) Rule of construction.—
14	"(A) The schedule specified in subpara-
15	graph (B) is deemed to be the schedule main-
16	tained under paragraph (1).
17	<i>"(B) The schedule specified in this subpara-</i>
18	graph is the schedule that, for purposes of para-
19	graph (1), is established (and periodically
20	reviewed and as appropriate revised) by the ad-
21	visory committee specified in subsection
22	(a)(2)(B).
23	"(c) Generally Applicable Rules of Construc-
24	TION.—This section does not supersede any State law or
25	requirements with respect to receiving immunizations (in-

cluding any such law relating to religious exemptions or
 other exemptions under such State laws).

3 "(d) ISSUANCE OF LIST AND SCHEDULES.—Not later
4 than 180 days after the date of the enactment of this section,
5 the Secretary shall establish the initial list required in sub6 section (a) and the schedule required in subsection (b).

7 "Part B—State Registry System for Immunization 8 Information

9 *"SEC. 2145. PURPOSE.*

"It is the purpose of this part to authorize the Secretary, in consultation with State public health officials,
to establish State registry systems to monitor the immunization status of all children.

14 "SEC. 2146. GRANTS FOR IMMUNIZATION REGISTRIES.

"(a) IN GENERAL.—For the purpose described in sec-15 tion 2145, the Secretary, acting through the Director of the 16 Centers for Disease Control and Prevention, shall make an 17 allotment each fiscal year for each State in an amount de-18 termined in accordance with section 2151. The Secretary 19 shall make a grant to the State of the allotment made for 20 21 the State for the fiscal year if the State submits to the Sec-22 retary an application in accordance with section 2150 on behalf of the chief executive officer of such State. 23

1	"(b) Design of State Registries.—To carry out
2	the purpose described in section 2145, a State registry es-
3	tablished under this part shall be designed to—
4	"(1) provide accurate and up to date surveil-
5	lance data regarding immunization rates at the State
6	and local levels;
7	"(2) assist in identifying localities with inad-
8	equate immunization rates to target for necessary re-
9	medial assistance;
10	"(3) assist in the effective administration and
11	management of immunization programs at State and
12	local levels by providing data to guide immunization
13	program efforts;
14	"(4) assist the State in providing and receiving
15	information on the immunization status of children
16	who move across geographic boundaries that are cov-
17	ered by different State or local registries; and
18	"(5) facilitate the linkage of vaccine dosage in-
19	formation to adverse events reported to the Centers for
20	Disease Control and Prevention under section 2125(b)
21	and disease outbreak patterns, for the purpose of mon-
22	itoring vaccine safety and effectiveness.
23	"(c) Eligible Use of Funds.—The Secretary may
24	make a grant under subsection (a) only if the State agrees
25	to expend the grant for the purpose of—

1	"(1) collecting the data described in section 2147;
2	"(2) operating registries to maintain the data
3	(and establishing such registries, in the case of a
4	State that is not operating such a registry);
5	"(3) utilizing the data to monitor the extent to
6	which children have received immunizations in ac-
7	cordance with the schedule established under section
8	2141;
9	"(4) notifying parents, as appropriate, if chil-
10	dren have not received immunizations in accordance
11	with such schedule;
12	"(5) coordinating and exchanging information
13	with other State registries to allow the monitoring of
14	the immunization status of children changing State of
15	residence; and
16	"(6) such other activities as the Secretary may
17	authorize with respect to achieving the objectives es-
18	tablished by the Secretary for the year 2000 for the
19	immunization status of children in the United States.
20	"(d) Requirement Regarding State Law.—
21	"(1) In general.—The Secretary may make a
22	grant under subsection (a) only if the State in-
23	volved—
24	"(A) provides assurances satisfactory to the
25	Secretary that, not later than October 1, 1996,

31

1	the State will be operating a registry in accord-
2	ance with this part, including having in effect
3	such laws and regulations as may be necessary
4	to so operate such a registry; and
5	"(B) agrees that, prior to such date, the
6	State will make such efforts to operate a registry
7	in accordance with this part as may be author-
8	ized in the law and regulations of the State.
9	"(2) RULES OF CONSTRUCTION.—
10	"(A) With respect to the agreements made
11	by a State under this part, other than para-
12	graph (1)(B), the Secretary may require compli-
13	ance with the agreements only to the extent con-
14	sistent with such paragraph.
15	"(B) The provisions of this part do not au-
16	thorize the Secretary, as a condition of the re-
17	ceipt of a grant under subsection (a) by a State,
18	to prohibit the State from providing any parent,
19	upon the request of the parent, with an exemp-
20	tion from the requirements established by the
21	State pursuant to this part for the collection of
22	data regarding any child of the parent.
23	"SEC. 2147. REGISTRY DATA.
21	"(a) IN CENERAL For purposes of section

24 "(a) IN GENERAL.—For purposes of section
25 2146(c)(1), the data described in this section are the data

described in subsection (b) and the data described in sub section (c).

3 "(b) DATA REGARDING BIRTH OF CHILD.—With re-4 spect to the birth of a child, the data described in this sub-5 section is as follows:

6 "(1) The name of each child born in the State 7 involved after the date of the implementation of the 8 registry (in no event shall such date be later than Oc-9 tober 1, 1996).

10 *"(2) Demographic data on the child.*

11 "(3) The name of one or both of the parents of 12 the child. If the child has been given up for adoption, 13 any information regarding the identity of the birth 14 parent or parents of the child may not be entered into 15 the registry, or if entered, shall be deleted.

16 "(4) The address, as of the date of the birth of
17 the child, of each parent whose name is received in
18 the registry pursuant to paragraph (3).

19 "(c) DATA REGARDING INDIVIDUAL IMMUNIZA20 TIONS.—With respect to a child to whom a pediatric vac21 cine is administered in the State involved, the data de22 scribed in this subsection is as follows:

23 "(1) The name, age, and address of the child.
24 "(2) The date on which the vaccine was adminis25 tered to the child.

	33
1	"(3) The name and business address of the health
2	care provider that administered the vaccine.
3	"(4) The address of the facility at which the vac-
4	cine was administered.
5	"(5) The name and address of one or both par-
6	ents of the child as of the date on which the vaccine
7	was administered, if such information is available to
8	the health care provider.
9	"(6) The type of vaccine.
10	"(7) The lot number or other information identi-
11	fying the particular manufacturing batch of the vac-
12	cine.
13	"(8) The dose of vaccine that was administered.
14	"(9) A notation of the presence of any adverse
15	medical reactions that the child experienced in rela-
16	tion to the vaccine and of which the health care pro-
17	vider is aware, in accordance with section 2125.
18	"(10) The presence of contraindications noted by
19	the health care provider with respect to administra-
20	tion of the vaccine to the child.
21	"(11) Such other data regarding immunizations
22	for the child, including identifying data, as the Sec-
23	retary, in consultation with State public health offi-
24	cials, may require consistent with applicable law (in-
25	cluding social security account numbers furnished

pursuant to section 205(c)(2)(E) of the Social Secu rity Act).

3 "(d) LIMITATION.—The Secretary may not establish
4 information reporting requirements in addition to those de5 scribed in subsection (c) if such requirements are unduly
6 burdensome.

7 "(e) DATE CERTAIN FOR SUBMISSION TO REGISTRY.—
8 The Secretary may make a grant under section 2146 only
9 if the State involved agrees to ensure that, with respect to
10 a child—

''(1) the data described in subsection (b) are submitted to the registry under such section as soon as
possible but in no event later than 8 weeks after the
date on which the child is born; and

15 "(2) the data described in subsection (c) with re16 spect to a vaccine are submitted to such registry as
17 soon as possible but in no event later than 4 weeks
18 after the date on which the vaccine is administered to
19 the child.

''(f) UNIFORMITY IN METHODOLOGIES.—The Secretary
shall, in consultation with State public health officials, establish standards regarding the methodologies used in establishing and operating registries under section 2146, and
may make a grant under such section only if the State
agrees to comply with the standards. The Secretary shall

provide maximum flexibility to the States while also retain ing a reasonable degree of uniformity among the States in
 such methodologies for the purpose of ensuring the utility,
 comparability, and exchange of the data maintained in
 such registries.

6 "(g) COORDINATION AMONG STATES.—The Secretary 7 may make a grant under section 2146 to a State only if, 8 with respect to the operation of the registry of the State 9 under such section, the State agrees to transfer that infor-10 mation contained in the State registry pursuant to section 11 2146 to other States upon the request of such States for such 12 information.

13 "SEC. 2148. FEDERAL STANDARDS ON CONFIDENTIALITY.

14 "(a) ESTABLISHMENT.—

15 "(1) IN GENERAL.—The Secretary, in consultation with the States, shall by regulation establish 16 17 standards providing for maintaining the confidentiality of the identity of individuals with respect to 18 19 whom data are maintained in registries under section 20 2146. Such standards shall, with respect to a State, provide that the State is to have in effect laws or reg-21 22 ulations regarding such confidentiality, including ap-23 propriate penalties for violation of the laws. The Secretary may make a grant under such section only if 24
1	the State involved agrees to comply with the stand-
2	ards.
3	"(2) Use of disclosure.—
4	"(A) No personally identifiable information
5	relating to a child or to the parent or guardian
6	of such child that is collected or maintained by
7	the State registry may be used or disclosed by
8	any holder of such information except as per-
9	mitted for—
10	"(i) the monitoring of a child's immu-
11	nization status;
12	"(ii) oversight, audit, and evaluation
13	of the immunization delivery and registry
14	systems;
15	"(iii) activities relating to establishing
16	and maintaining a safe and effective supply
17	of recommended childhood vaccine;
18	"(iv) processing of insurance claims for
19	payment for vaccine administration (but
20	only to the extent necessary for processing
21	claims); and
22	"(v) administration of the National
23	Vaccine Injury Compensation Program
24	under subtitle 2.

"(B) Information regarding immunizations 1 2 provided as described in subparagraph (A)(i)may be used or disclosed only with the written 3 authorization of the individual to whom it refers 4 or to the parent with custody of such individual. 5 "(b) Use of Social Security Account Numbers.— 6 Any usage or disclosure of data in registries under section 7 2146 that consists of social security account numbers and 8 related information which is otherwise permitted under this 9 part may be exercised only to the extent permitted under 10 section 205(c)(2)(E) of the Social Security Act. For pur-11 poses of the preceding sentence, the term 'related informa-12 tion' has the meaning given such term in clause (iv)(II) 13 of such section. 14

15 "SEC. 2149. PROVIDER PARTICIPATION.

16 "(a) IN GENERAL.—The State shall monitor and enforce compliance by health care providers with the require-17 ments of sections 2147 and 2148 and section 2155(b) for 18 all doses of pediatric vaccine administered in the State. The 19 State shall establish procedures satisfactory to the Secretary 20 for discontinuing the distribution of federally purchased or 21 State purchased vaccine for any health care provider who 22 fails to comply with the requirements of section 2147 and 23 for reinstating such vaccine supply to such provider upon 24 receiving from such provider— 25

1

"(1) the reports necessary to make current and

2 complete the information that would have been furnished to the State registry between the dates of the 3 4 provider's termination and reinstatement; and "(2) satisfactory assurances regarding the pro-5 6 vider's future compliance. 7 "(b) Reports to Secretary.—The Secretary may make a grant under section 2146 only if the State involved 8 agrees to submit to the Secretary such reports as the Sec-9 retary determines to be appropriate with respect to the ac-10 tivities of the State under this part. 11 12 "SEC. 2150. APPLICATION FOR GRANT. "An application by a State for a grant under section 13 *2146 is in accordance with this section if the application—* 14 "(1) is submitted not later than the date speci-15 fied by the Secretary; 16 "(2) contains each agreement required in this 17 18 part; "(3) contains any information required in this 19 20 part to be submitted to the Secretary; and 21 "(4) is in such form, is made in such manner, 22 and contains such agreements, assurances, and information as the Secretary determines to be necessary to 23

carry out this part.

2 "The Secretary shall determine the amount of the allot3 ments required in section 2146 for States for a fiscal year
4 in accordance with a formula established by the Secretary
5 that allots the amounts appropriated under section 2152
6 for the fiscal year on the basis of the costs of the States
7 in establishing and operating registries under section 2146.

8 *"SEC. 2152. AUTHORIZATION OF APPROPRIATIONS.*

9 *"For the purpose of carrying out this part, other than* 10 section 2153, there are authorized to be appropriated 11 \$152,000,000 for fiscal year 1994, \$125,000,000 for fiscal 12 year 1995, and \$35,000,000 for each of the fiscal years 1996 13 through 1999.

14 "SEC. 2153. NATIONAL IMMUNIZATION SURVEILLANCE PRO15 GRAM.

"(a) IN GENERAL.—The Secretary shall establish a na-16 17 tional immunization surveillance program for the purpose 18 of assessing the effects of the programs and activities pro-19 vided for in this subtitle towards appropriately immuniz-20 ing children and facilitating State immunization registries. 21 The national immunization surveillance program shall— 22 "(1) provide technical assistance to States for the development of vaccination registries and monitoring 23 24 systems; and "(2) receive aggregate epidemiologic data (that is 25 26 in a format that is not person specific) collected by States as provided for in section 2147 at intervals de termined appropriate by the Secretary for the purpose
 of—

4 "(A) compiling accurate and up-to-date
5 surveillance data regarding immunization rates
6 at the State level in order to assess the progress
7 made towards achieving nationally established
8 immunization goals;

9 "(B) assisting in the effective administra-10 tion and management of immunization pro-11 grams at the State level by providing technical 12 assistance to guide immunization program ef-13 forts at the request of the State;

''(C) providing technical assistance to
States and localities to facilitate monitoring the
immunization status of children who move across
geographic boundaries that are covered by different State or local registries at the request of
such States or localities; and

20 "(D) monitoring the safety and effectiveness
21 of vaccines by linking vaccine dosage informa22 tion with adverse events reporting under section
23 2125(b) and disease outbreak patterns.

24 "(b) RULE OF CONSTRUCTION.—Nothing in this sub25 title shall be construed to authorize the release of person

specific information to the Secretary for the purpose of im munization surveillance.

3 "(c) AUTHORIZATION OF APPROPRIATIONS.—There are
4 authorized to be appropriated such sums as may be nec5 essary to carry out this section in each of the fiscal years
6 1994 through 1999.

7 *"SEC. 2154. REPORT.*

8 "Not later than January 1, 1995, and biennially there-9 after, the Secretary shall prepare and submit to the appro-10 priate committees of Congress a report concerning the plan-11 ning, development, operation and effectiveness of the na-12 tional immunization surveillance program and the State 13 immunization registries.

14 *"Part C—Distribution of Vaccines, Public Outreach*

15

and Education

16 "SEC. 2155. DISTRIBUTION OF VACCINES.

17 *"(a) IN GENERAL.*—

18 "(1) HEALTH CARE PROVIDERS.—The Secretary
19 shall provide for the distribution, without charge, of
20 recommended pediatric vaccines (in accordance with
21 section 2141) purchased by the Secretary to health
22 care providers who serve children and who—
23 "(A) are members of a uniformed service, or

24 *are officers or employees of the United States;*

1	"(B) are health centers (as defined in sec-
2	tion 2162(2)); or
3	"(C) provide services under section 503 of
4	the Indian Health Care Improvement Act or
5	pursuant to a contract under section 102 of the
6	Indian Self Determination Act.
7	"(2) States.—The Secretary shall provide for
8	the distribution, without charge, of those rec-
9	ommended pediatric vaccines that are purchased by
10	the Secretary and provided to States for the purposes
11	of immunizing medicaid-eligible children, and addi-
12	tional vaccines that may be purchased by the Sec-
13	retary for children within those States.
14	"(b) Duties of Health Care Providers.—
15	"(1) Free provision to children.—A health
16	care provider or entity receiving vaccine under this
17	section may use such vaccine only for administration
18	to children and may not impose a charge for such
19	vaccine. A provider or health care entity may impose
20	a fee that reflects actual regional costs as determined
21	by the Secretary for the administration of such vac-
22	cine, except that a provider may not deny a child a
23	vaccination due to the inability of the child's parent
24	to pay an administration fee.

1	"(2) Reporting requirements.—A health care
2	provider receiving vaccine under this section shall re-
3	port the information required under section 2147 to
4	the applicable State registry operated pursuant to a
5	grant under section 2146 if such State registry exists.
6	The provider shall additionally report to such State
7	registry any occurrence reported to the Secretary pur-
8	suant to section 2125(b). The provider shall also pro-
9	vide regular and periodic estimates to the State of the
10	provider's future dosage needs for recommended child-
11	hood vaccines distributed under this section. All re-
12	ports shall be made with such frequency and in such
13	detail as the Secretary, in consultation with State
14	public health officials, may prescribe.

15"SEC. 2156. IMPROVED IMMUNIZATION DELIVERY, OUT-16REACH AND EDUCATION.

17 "(a) FEDERAL EFFORTS.—The Secretary, acting
18 through the Centers for Disease Control and Prevention and
19 in conjunction with State health officials and other appro20 priate public and private organizations, shall conduct the
21 following activities to improve Federal, State and local vac22 cine delivery systems and immunization outreach and edu23 cation efforts:

24 "(1) NATIONAL PUBLIC AWARENESS CAMPAIGN.—

"(A) IN GENERAL.—The Secretary, in con-1 junction with State health officials and other ap-2 propriate public and private organizations, shall 3 develop and implement a National Immuniza-4 tion Public Awareness Campaign to assist fami-5 lies (through bilingual means if necessary) of 6 children under the age of 2 years, and expectant 7 parents, in obtaining knowledge concerning the 8 importance of having their children immunized 9 10 and in identifying the vaccines, schedules for immunization, and vaccine provider locations, ap-11 propriate with respect to their children. 12 13 "(B) Implementation.—In implementing 14 the Campaign under subparagraph (A), the Secretary shall ensure that— 15 "(i) new and innovative methods are 16 17 developed and utilized to publicly advertise 18 the need to have children immunized in a 19 timely manner; "(ii) print, radio and television media 20 are utilized to convey immunization infor-21 22 mation to the public; and 23 "(iii) with respect to immunization in-

24 formation, efforts are made to target preg-

	10
1	nant women and the parents of children
2	under the age of 2.
3	<i>"(2) Interagency committee on immuniza-</i>
4	TION.—The Secretary, in conjunction with the Sec-
5	retary of Agriculture, the Secretary of Housing and
6	Urban Development, and the Secretary of Education,
7	shall carry out activities through the Interagency
8	Committee on Immunization to incorporate immuni-
9	zation status assessments and referral services as an
10	integral part of the process by which individuals
11	apply for assistance under—
12	''(A) the food stamp program under the
13	Food Stamp Act of 1977;
14	"(B) section 17 of the Child Nutrition Act
15	of 1966;
16	"(C) the Head Start Act;
17	"(D) part A of title IV of the Social Secu-
18	rity Act;
19	"(E) title XIX of the Social Security Act;
20	"(F) any of the housing assistance laws of
21	the United States; and
22	"(G) other programs determined appro-
23	priate by any of the Secretaries described in this
24	paragraph.

1	"(3) Expanded opportunity for national
2	SERVICE.—The Secretary, in conjunction with the
3	Commission on National and Community Service
4	and other independent agencies, is encouraged to de-
5	velop opportunities for participants in national and
6	community service programs to contribute to local
7	initiatives for the improvement of immunization serv-
8	ices, including public outreach and education efforts.
9	"(b) GRANTS TO STATES.—
10	"(1) IN GENERAL.—
11	"(A) The Secretary may award grants to
12	States to enable such State to develop, revise and
13	implement immunization improvement plans as
14	described in paragraph (2).
15	"(B) To be eligible to receive a grant under
16	subparagraph (A), a State shall prepare and
17	submit to the Secretary an application at such
18	time, in such manner, and containing such in-
19	formation as the Secretary may require.
20	"(2) DESIGN.—A State immunization improve-
21	ment plan shall be designed to improve immunization
22	delivery, outreach, education and coordination within
23	the State. Such plan shall provide for the creation
24	of—

1	"(A) a vaccine provider education cam-
2	paign and the distribution of any other mate-
3	rials determined to be appropriate by State
4	health officials—
5	"(i) to enable such providers to make
6	the best use of vaccination opportunities;
7	and
8	"(ii) to educate such providers concern-
9	ing their obligation to report immunization
10	information with respect to their patients to
11	State registries;
12	"(B) expanded capacity for the delivery of
13	immunizations through—
14	"(i) increasing the number or type of
15	facilities through which vaccines may be
16	made available and the capacity of such fa-
17	cilities to immunize more children;
18	"(ii) developing alternative methods of
19	delivering vaccines, such as mobile health
20	clinics;
21	"(iii) increasing the number of hours
22	during which vaccines are made available
23	by providers within the State; or
24	"(iv) coordinating with federally quali-
25	fied health centers to reach and immunize

48

1

2

underserved children through education,

outreach, tracking, and the provision of

3	services;
4	except that, the Secretary may waive any spe-
5	cific requirement of this subparagraph if the Sec-
6	retary determines that State immunization de-
7	livery efforts are sufficient without the imposi-
8	tion of such requirement;
9	"(C) population-based assessment criteria
10	through which the State is able to assess the ef-
11	fectiveness of immunization activities in the
12	State, which may be fulfilled through the imple-
13	mentation of a State immunization registry
14	under section 2146;
15	''(D) a public awareness campaign, in con-
16	junction with the National Campaign established
17	under subsection (a)(1), to provide parents with
18	information about the importance of immuniza-
19	tion, the types and schedules for the administra-
20	tion of vaccines, and the locations of vaccines
21	providers;
22	"(E) coordinated community outreach ac-
23	tivities among public or private health pro-
24	grams, including local health departments and
25	health centers, and other public or private enti-
	•S 732 RS

1	ties, to encourage and facilitate the ability of
2	parents to obtain immunization services for their
3	children; and
4	"(F) other activities that are not inconsist-
5	ent with the purposes of this subtitle, subject to
6	the approval of the Secretary.
7	"(3) Immunization improvement plan ap-
8	PROVAL.—
9	"(A) GOALS.—As part of the immunization
10	improvement plan of a State, the State shall es-
11	tablish immunization rate goals for children re-
12	siding within the State.
13	"(B) APPROVAL.—The immunization im-
14	provement plan developed by a State under this
15	subsection shall be submitted to the Secretary for
16	approval prior to the distribution of grant funds
17	to the States under this subsection. The Secretary
18	shall periodically review the progress that the
19	State has made under such plan in achieving the
20	goals established under subparagraph (A).
21	"(C) Distribution of grants.—In
22	awarding grants under this section, the Sec-
23	retary shall ensure that grant awards will be eq-
24	uitably distributed between rural and urban
25	areas. In determining such distribution, the Sec-

retary shall take into account the added costs of supporting the health care delivery infrastructure in sparsely populated areas.

"(D) REPORTING.—A State shall annually 4 prepare and submit to the Director of the Cen-5 ters for Disease Control and Prevention a report 6 concerning the implementation of the State im-7 munization improvement plan. If the Director or 8 the Secretary, in reviewing the reports submitted 9 under this subparagraph determine that the 10 State has exceeded the goals established under 11 subparagraph (A), the Secretary may award a 12 13 bonus to the State in an amount not to exceed 5 percent of the amount the State received under 14 the grant for the purposes of the grant. 15

16 "(c) AUTHORIZATION OF APPROPRIATIONS.—There are
17 authorized to be appropriated to carry out this section,
18 \$250,000,000 for fiscal year 1994, and such sums as may
19 be necessary for each of the fiscal years 1995 through 1999.

20

1

2

3

"Part D—General Provisions

21 *"SEC. 2161. REPORT.*

"Not later than October 1, 1995, and biennially thereafter, the Secretary shall prepare and submit to the appropriate committees of Congress a report concerning the costs,

efficiency, and effectiveness of procedures established to de liver vaccine to health care providers.

3 "SEC. 2162. NATIONAL VACCINE PROGRAM.

4 "The Secretary shall authorize a report to be prepared 5 by the National Academy of Sciences concerning the role 6 of the National Vaccine Program established under this title 7 in achieving progress towards the nationally established im-8 munization goals for the year 2000, and recommendations 9 with respect to the changes in such Program that would 10 facilitate greater progress towards achieving such goals.

11 "SEC. 2163. DEFINITIONS.

12 *"For purposes of this subtitle—*

13 "(1) HEALTH CARE PROVIDER.—The term
14 'health care provider', with respect to the administra15 tion of vaccines to children, means an entity that is
16 licensed or otherwise authorized for such administra17 tion under the law of the State in which the entity
18 administers the vaccine, subject to section 333(e).

19 *"(2) HEALTH CENTER.—The term 'health center'*20 means—

21 "(A) a federally qualified health center, as
22 defined in section 1905(l)(2) of the Social Secu23 rity Act; or

24 "(B) a public or nonprofit private entity
25 receiving Federal funds under—

52

24	(a) Amendment of Vaccine Injury Table.—
23	GRAM AMENDMENTS.
22	SEC. 3. NATIONAL VACCINE INJURY COMPENSATION PRO-
21	Palau.''.
20	Micronesia, the Northern Mariana Islands, and
19	Virgin Islands, the Republic of the Marshall Islands,
18	of Puerto Rico, Guam, American Samoa, the U.S.
17	States, the District of Columbia, the Commonwealth
16	"(6) State.—The term 'State' means the 50
15	lished under section 2141.
14	vaccine' means a vaccine included on the list estab-
13	''(5) Pediatric vaccine.—The term 'pediatric
12	to a child, means a legal guardian of the child.
11	"(4) PARENT.—The term 'parent', with respect
10	able disease.
9	means an immunization against a vaccine-prevent-
8	"(3) Immunization.—The term 'immunization'
7	regional and national significance).
6	Security Act (relating to special projects of
5	"(iii) section 501(a)(2) of the Social
4	housing); or
3	for health services for residents of public
2	''(ii) section 340A (relating to grants
1	''(i) section 329, 330 or 340;
	52

1	(1) Addition of vaccines.—Section 2114 (42
2	U.S.C. 300aa–14) is amended by adding at the end
3	thereof the following new subsection:
4	"(f) Addition of Vaccines to Table.—
5	"(1) IN GENERAL.—The Vaccine Injury table
6	contained in subsection (a) shall also include any rec-
7	ommended childhood vaccine included in the list pro-
8	mulgated by the Secretary under section 2141.
9	"(2) Review of information and revision.—
10	Not later than 2 years after the addition of a new
11	vaccine to the table contained in subsection (a), and
12	on a regular basis thereafter, the Secretary shall re-
13	view information obtained under sections 2125 and
14	part B of subtitle 3, and based on such review (and
15	other relevant information) shall, as appropriate, de-
16	velop with respect to such new vaccine—
17	"(A) revisions with respect to illnesses, dis-
18	abilities, injuries or conditions covered by such
19	table;
20	"(B) appropriate specifications of the time
21	period for the first symptom or manifestation of
22	onset or of significant aggravation of such ill-
23	nesses, disabilities, injuries or condition after
24	vaccine administration, for purposes of receiving
25	compensation under the Program; and

"(C) recommendations as to the amount of 1 tax that should be imposed under section 4131 of 2 the Internal Revenue Code of 1986 for each dose 3 of vaccine. 4 "(3) LIMITATION.—The Secretary may modify 5 the table contained in subsection (a) pursuant to 6 paragraphs (1) and (2) only in accordance with sub-7 8 section (c). *"(4)* 9 REVISION.—For purposes of section 2116(b), the addition of vaccine to the table contained 10 in subsection (a) by operation of this subsection shall 11 constitute a revision of the table.". 12 (2) ATTORNEYS' FEES.—Section 2115(e) (42 13 14 U.S.C. 300aa-15(e)) is amended by adding at the end 15 thereof the following new paragraph: "(4) The special master may award reasonable 16 17 attorneys' fees whether or not an election has been 18 made under section 2121(a) to file a civil action con-19 cerning such petition.". (3) CONSENT FOR ANNUITY.—Subparagraphs (A) 20 and (B) of section 2115(f)(4) are amended by striking 21 ", with the consent of the petitioner," each place that 22 such appears. 23

24 (4) TIME PERIODS FOR FEES AND COSTS.—

1	(A) IN GENERAL.—Section 2115(e) (42
2	U.S.C. 300aa–15(e)) (as amended by paragraph
3	(3)) is further amended by adding at the end
4	thereof the following new paragraph:
5	"(5) With respect to a petitioners' application
6	for attorneys' fees and costs—
7	"(A) if the respondent enters no objection to
8	such application within 21 days of the date on
9	which the application was filed (unless such time
10	period is extended by the special master with the
11	consent of the petitioner) the special master shall
12	enter a decision on such application within 30
13	days of such filing;
14	''(B) if the respondent files an objection to
15	such application and the special master does not
16	enter a decision with respect to the application
17	within 60 days after the date on which the objec-
18	tion is filed, the special master involved shall,
19	upon the written request of the petitioner, enter
20	a decision within 15 days after the filing of such
21	request; and
22	"(C) if the respondent files an objection to
23	such application and the petitioner moves to re-
24	duce costs and fees as provided for in the objec-
25	tion, the special master shall enter a decision

within 5 days after the receipt of the petitioner's
motion.
The chief special master, upon the request of a special
master, may waive the time limitations applicable to
the special master under this paragraph if the special
master demonstrates that complicating factors exist
with respect to the issues involved to which the time
limitation applies.".
(B) Application.—The amendment made
by subparagraph (A) shall apply to all petition-
ers' applications for attorneys' fees and costs
filed under section 2115(e) of the Public Health
Service Act which are pending on the date of en-
actment of this Act.
(5) Authorization of Appropriations.—Sec-
tion 2115(j) (42 U.S.C. 300aa–15(j)) is amended by
striking ''\$80,000,000 for each succeeding fiscal year''
and inserting in lieu thereof ''\$110,000,000 for each

succeeding fiscal year''.

(6) LIMITATION OF ACTIONS.—Section 2116(b)
(42 U.S.C. 300aa-16(b)) is amended by striking
"such person may file" and inserting "or to significantly increase the likelihood of obtaining compensation, such person may, notwithstanding section
21 21 211(b)(2), file".

(b) Extension of Time for Decision.—
(1) JURISDICTION.—Section $2112(d)(3)(D)$ (42)
U.S.C. 300aa–12(d)(3)(D)) is amended by striking
"540 days" and inserting "30 months (but for not
more than 6 months at a time)".
(2) Report on collections.—Section 2117
(42 U.S.C. 300aa–17) is amended by adding at the
end thereof the following new subsection:
"(c) REPORT.—The Attorney General shall, on Janu-
ary 1 of each year, prepare and submit to the appropriate
committees of Congress a report concerning amounts col-
lected under this section.".
(3) Increased responsibilities of commis-
SION.—Section 2119(f) (42 U.S.C. 300aa-19(f)) is
amended—
(A) by striking ''and'' at the end of para-
graph (4);
(B) by striking the period at the end of
paragraph (5) and inserting '', and''; and
(C) by adding at the end thereof the follow-
ing new paragraph:
"(6) monitor the balance of the Vaccine Injury
"(6) monitor the balance of the Vaccine Injury Trust Fund established by section 9510 of the Inter-

1	changes in the tax per dose of vaccine imposed under
2	section 4131 of such Code.".
3	(c) Simplification of Vaccine Information Mate-
4	RIALS.—
5	(1) INFORMATION.—Section 2126(b) (42 U.S.C.
6	300aa–26(b)) is amended—
7	(A) by striking ''by rule'' in the matter pre-
8	ceding paragraph (1);
9	(B) in paragraph (1), by striking ''90'' and
10	inserting ''30''; and
11	(C) in paragraph (2), by striking '', appro-
12	priate health care providers and parent organi-
13	zations".
14	(2) Requirements.—Section 2126(c) (42
15	U.S.C. 300aa–26(c)) is amended—
16	(A) in the matter preceding paragraph (1),
17	by inserting ''shall be based on available data
18	and information," after "such materials"; and
19	(B) by striking out paragraphs (1) through
20	(10) and inserting in lieu thereof the following
21	new paragraphs:
22	"(1) a concise description of the benefits of the
23	vaccine;
24	"(2) a concise description of the risks associated
25	with the vaccine;

 "(3) a statement of the availability of the National Vaccine Injury Compensation Program; "(4) a statement of the availability from the Secretary of more detailed written information concerning the information required under paragraphs (1), (2), and (3), that shall be made available to the parent, legal guardian, or other responsible person upon request; and
"(4) a statement of the availability from the Sec- retary of more detailed written information concern- ing the information required under paragraphs (1), (2), and (3), that shall be made available to the par- ent, legal guardian, or other responsible person upon
retary of more detailed written information concern- ing the information required under paragraphs (1), (2), and (3), that shall be made available to the par- ent, legal guardian, or other responsible person upon
ing the information required under paragraphs (1), (2), and (3), that shall be made available to the par- ent, legal guardian, or other responsible person upon
(2), and (3), that shall be made available to the par- ent, legal guardian, or other responsible person upon
ent, legal guardian, or other responsible person upon
request: and
"(5) such other relevant information as deter-
mined appropriate by the Secretary.".
(3) OTHER INDIVIDUALS.—Subsections (a) and
(d) of section 2126 (42 U.S.C. 300aa–26 (a) and (d))
are amended by inserting ''or to any other individ-
ual" immediately after "to the legal representative of
any child'' each place that such occurs.
(4) Provider duties.—Subsection (d) of sec-
tion 2126 (42 U.S.C. 300aa–26(d)) is amended—
(A) by striking all after ''subsection (a),''
the second place it appears in the first sentence
and inserting ''supplemented with visual presen-
tations or oral explanations, in appropriate
cases."; and
(B) by striking "or other information" in
the last sentence.

(d) AUTHORIZATION OF APPROPRIATIONS.—Part A of
 subtitle 2 of title XXI (42 U.S.C. 300aa-10 et seq.) is
 amended by adding at the end thereof the following new
 section:

5 *"AUTHORIZATION OF APPROPRIATIONS*

6 "SEC. 2120. (a) SECRETARY.—For purposes of admin-7 istering this part, there are authorized to be appropriated 8 from the Vaccine Injury Compensation Trust Fund estab-9 lished under section 9510(c) of the Internal Revenue Code 10 of 1986, to the Secretary, \$3,000,000 for each of the fiscal 11 years 1994, 1995, and 1996.

''(b) ATTORNEY GENERAL.—For purposes of administering this part, there are authorized to be appropriated
from the Vaccine Injury Compensation Trust Fund described in subsection (a), to the Attorney General,
\$3,000,000 for each of the fiscal years 1994, 1995, and 1996.

17 "(c) COURT OF FEDERAL CLAIMS.—For purposes of
18 administering this part, there are authorized to be appro19 priated from the Vaccine Injury Compensation Trust Fund
20 described in subsection (a), to the Court of Federal Claims,
21 \$3,000,000 for each of the fiscal years 1994, 1995, and
22 1996.".

23 SEC. 4. MISCELLANEOUS PROVISIONS.

24 Section 317(k) (42 U.S.C. 247b(k)) is amended—

25 (1) by striking out paragraph (1); and

(2) by redesignating paragraphs (2) through (5)
 as paragraphs (1) and (4), respectively.

3 SEC. 5. FEDERAL TORT CLAIMS AMENDMENTS.

4 (a) CLARIFICATION OF COVERAGE OF OFFICERS AND
5 EMPLOYEES OF CLINICS.—The first sentence of section
6 224(g)(1) of the Public Health Service Act (42 U.S.C.
7 233(g)(1)) is amended by striking "officer, employee, or
8 contractor" and inserting the following: "officer or employee
9 of such an entity, and any contractor".

(b) Coverage for Services Furnished to IndividUALS OTHER THAN PATIENTS OF CLINIC.—Section 224(g)
of such Act (42 U.S.C. 233(g)(1)), as amended by paragraph (1), is further amended—

(1) in the first sentence of paragraph (1), by inserting after "Service" the following: "with respect to
services provided to patients of the entity and (subject
to paragraph (7)) to certain other individuals"; and
(2) by adding at the end the following new paragraph:

20 "(7) For purposes of paragraph (1), an officer, em-21 ployee, or contractor described in such paragraph may be 22 deemed to be an employee of the Public Health Service with 23 respect to services provided to individuals who are not pa-24 tients of an entity described in paragraph (4) only if the 25 Secretary determines—

1	"(A) that the provision of the services to such in-
2	dividuals benefits health center patients and general
3	populations that could be served by the health center
4	through community-wide intervention efforts within
5	the communities served by such health center, and fa-
6	cilitates the provision of services to health center pa-
7	tients; or
8	"(B) that such services are otherwise required to
9	be provided to such individuals under an employment
10	contract (or other similar arrangement) between the
11	individual and the entity.".
12	(c) Determining Compliance of Entity with Re-
13	quirements for Coverage.—
13 14	QUIREMENTS FOR COVERAGE.— (1) IN GENERAL.—Section 224(h) of such Act (42
14	
	(1) IN GENERAL.—Section 224(h) of such Act (42
14 15	(1) IN GENERAL.—Section 224(h) of such Act (42 U.S.C. 233(h)), as added by section 2(b) of the Feder-
14 15 16	(1) IN GENERAL.—Section 224(h) of such Act (42 U.S.C. 233(h)), as added by section 2(b) of the Feder- ally Supported Health Centers Assistance Act of 1992,
14 15 16 17	(1) IN GENERAL.—Section 224(h) of such Act (42 U.S.C. 233(h)), as added by section 2(b) of the Feder- ally Supported Health Centers Assistance Act of 1992, is amended by striking "the entity—" and inserting
14 15 16 17 18	(1) IN GENERAL.—Section 224(h) of such Act (42 U.S.C. 233(h)), as added by section 2(b) of the Feder- ally Supported Health Centers Assistance Act of 1992, is amended by striking "the entity—" and inserting the following: "the Secretary, after receiving such as-
14 15 16 17 18 19	(1) IN GENERAL.—Section 224(h) of such Act (42 U.S.C. 233(h)), as added by section 2(b) of the Feder- ally Supported Health Centers Assistance Act of 1992, is amended by striking "the entity—" and inserting the following: "the Secretary, after receiving such as- surances and conducting such investigation as the
 14 15 16 17 18 19 20 	(1) IN GENERAL.—Section 224(h) of such Act (42 U.S.C. 233(h)), as added by section 2(b) of the Feder- ally Supported Health Centers Assistance Act of 1992, is amended by striking "the entity—" and inserting the following: "the Secretary, after receiving such as- surances and conducting such investigation as the Secretary considers necessary, finds that the en-
 14 15 16 17 18 19 20 21 	(1) IN GENERAL.—Section 224(h) of such Act (42 U.S.C. 233(h)), as added by section 2(b) of the Feder- ally Supported Health Centers Assistance Act of 1992, is amended by striking "the entity—" and inserting the following: "the Secretary, after receiving such as- surances and conducting such investigation as the Secretary considers necessary, finds that the en- tity—".

"(1) With respect to subsection (h), the finding of the
 Secretary that an entity meets all of the requirements under
 such subsection shall apply for the period specified by the
 Secretary, and shall be binding for all parties unless the
 Secretary reverses such finding for good cause shown at a
 later date.".

7 (d) EFFECTIVE DATE.—The amendments made by this
8 section shall take effect as if included in the enactment of
9 the Federally Supported Health Centers Assistance Act of
10 1992.

- S 732 RS—2
- S 732 RS----3