In the Senate of the United States,

December 6, 2006.

Resolved, That the bill from the House of Representatives (H.R. 6143) entitled "An Act to amend title XXVI of the Public Health Service Act to revise and extend the program for providing life-saving care for those with HIV/AIDS.", do pass with the following

AMENDMENT:

Strike out all after the enacting clause and insert:

- 1 SECTION 1. SHORT TITLE; TABLE OF CONTENTS.
- 2 (a) Short Title.—This Act may be cited as the
- 3 "Ryan White HIV/AIDS Treatment Modernization Act of
- 4 2006".

1 (b) Table of Contents of this

2 Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—EMERGENCY RELIEF FOR ELIGIBLE AREAS

- Sec. 101. Establishment of program; general eligibility for grants.
- Sec. 102. Type and distribution of grants; formula grants.
- Sec. 103. Type and distribution of grants; supplemental grants.
- Sec. 104. Timeframe for obligation and expenditure of grant funds.
- Sec. 105. Use of amounts.
- Sec. 106. Additional amendments to part A.
- Sec. 107. New program in part A; transitional grants for certain areas ineligible under section 2601.
- Sec. 108. Authorization of appropriations for part A.

TITLE II—CARE GRANTS

- Sec. 201. General use of grants.
- Sec. 202. AIDS Drug Assistance Program.
- Sec. 203. Distribution of funds.
- Sec. 204. Additional amendments to subpart I of part B.
- Sec. 205. Supplemental grants on basis of demonstrated need.
- Sec. 206. Emerging communities.
- Sec. 207. Timeframe for obligation and expenditure of grant funds.
- Sec. 208. Authorization of appropriations for subpart I of part B.
- Sec. 209. Early diagnosis grant program.
- Sec. 210. Certain partner notification programs; authorization of appropriations.

TITLE III—EARLY INTERVENTION SERVICES

- Sec. 301. Establishment of program; core medical services.
- Sec. 302. Eligible entities; preferences; planning and development grants.
- Sec. 303. Authorization of appropriations.
- Sec. 304. Confidentiality and informed consent.
- Sec. 305. Provision of certain counseling services.
- Sec. 306. General provisions.

TITLE IV—WOMEN, INFANTS, CHILDREN, AND YOUTH

- Sec. 401. Women, infants, children, and youth.
- Sec. 402. GAO Report.

TITLE V—GENERAL PROVISIONS

Sec. 501. General provisions.

TITLE VI—DEMONSTRATION AND TRAINING

- Sec. 601. Demonstration and training.
- Sec. 602. AIDS education and training centers.
- Sec. 603. Codification of minority AIDS initiative.

TITLE VII—MISCELLANEOUS PROVISIONS

Sec. 701. Hepatitis; use of funds.

Sec. 702. Certain references. Sec. 703. Repeal.

1 TITLE I—EMERGENCY RELIEF 2 FOR ELIGIBLE AREAS

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3	SEC. 101. ESTABLISHMENT OF PROGRAM; GENERAL ELIGI-
4	BILITY FOR GRANTS.
5	(a) In General.—Section 2601 of the Public Health
6	Service Act (42 U.S.C. 300ff-11) is amended by striking
7	subsections (b) through (d) and inserting the following:
8	"(b) Continued Status as Eligible Area.—Not-
9	withstanding any other provision of this section, a metro-
10	politan area that is an eligible area for a fiscal year con-
11	tinues to be an eligible area until the metropolitan area
12	fails, for three consecutive fiscal years—
13	"(1) to meet the requirements of subsection (a);
14	and
15	"(2) to have a cumulative total of 3,000 or more
16	living cases of AIDS (reported to and confirmed by
17	the Director of the Centers for Disease Control and
18	Prevention) as of December 31 of the most recent cal-
19	endar year for which such data is available.
20	"(c) Boundaries.—For purposes of determining eligi-
21	bility under this part—
22	"(1) with respect to a metropolitan area that re-
23	ceived funding under this part in fiscal year 2006,
24	the boundaries of such metropolitan area shall be the

1	boundaries that were in effect for such area for fiscal
2	year 1994; or
3	"(2) with respect to a metropolitan area that be-
4	comes eligible to receive funding under this part in
5	any fiscal year after fiscal year 2006, the boundaries
6	of such metropolitan area shall be the boundaries that
7	are in effect for such area when such area initially
8	receives funding under this part.".
9	(b) Technical and Conforming Amendments.—
10	Section 2601(a) of the Public Health Service Act (42 U.S.C.
11	300ff-11(a)) is amended—
12	(1) by striking "through (d)" and inserting
13	"through (c)"; and
14	(2) by inserting "and confirmed by" after "re-
15	ported to".
16	(c) Definition of Metropolitan Area.—Section
17	2607(2) of the Public Health Service Act (42 U.S.C. 300ff-
18	17(2)) is amended—
19	(1) by striking "area referred" and inserting
20	"area that is referred"; and
21	(2) by inserting before the period the following:
22	", and that has a population of 50,000 or more indi-
23	viduals".

1	SEC. 102. TYPE AND DISTRIBUTION OF GRANTS; FORMULA
2	GRANTS.
3	(a) DISTRIBUTION PERCENTAGES.—Section
4	2603(a)(2) of the Public Health Service Act (42 U.S.C.
5	300ff-13(a)(2)) is amended—
6	(1) in the first sentence—
7	(A) by striking "50 percent of the amount
8	appropriated under section 2677" and inserting
9	"662/3 percent of the amount made available
10	under section 2610(b) for carrying out this sub-
11	part"; and
12	(B) by striking "paragraph (3)" and insert-
13	ing "paragraphs (3) and (4)".
14	(2) by striking the last sentence.
15	(b) Distribution Based on Living Cases of HIV/
16	AIDS.—Section 2603(a)(3) of the Public Health Service
17	Act (42 U.S.C. 300ff-13(a)(3)) is amended—
8	(1) in subparagraph (B), by striking "estimated
19	living cases of acquired immune deficiency syndrome"
20	and inserting "living cases of HIV/AIDS (reported to
21	and confirmed by the Director of the Centers for Dis-
22	ease Control and Prevention)"; and
23	(2) by striking subparagraphs (C) through (E)
24	and inserting the following:
25	"(C) Living cases of hiv/aids.—

1	"(i) Requirement of names-based
2	REPORTING.—Except as provided in clause
3	(ii), the number determined under this sub-
4	paragraph for an eligible area for a fiscal
5	year for purposes of subparagraph (B) is
6	the number of living names-based cases of
7	HIV/AIDS that, as of December 31 of the
8	most recent calendar year for which such
9	data is available, have been reported to and
10	confirmed by the Director of the Centers for
11	Disease Control and Prevention.
12	"(ii) Transition period; exemption
13	REGARDING NON-AIDS CASES.—For each of
14	the fiscal years 2007 through 2009, an eligi-
15	ble area is, subject to clauses (iii) through
16	(v), exempt from the requirement under
17	clause (i) that living names-based non-
18	AIDS cases of HIV be reported unless—
19	"(I) a system was in operation as
20	of December 31, 2005, that provides
21	sufficiently accurate and reliable
22	names-based reporting of such cases
23	throughout the State in which the area
24	is located, subject to clause (viii); or

1	"(II) no later than the beginning
2	of fiscal year 2008 or 2009, the Sec-
3	retary, in consultation with the chief
4	executive of the State in which the area
5	is located, determines that a system
6	has become operational in the State
7	that provides sufficiently accurate and
8	reliable names-based reporting of such
9	cases throughout the State.
10	"(iii) Requirements for exemption
11	FOR FISCAL YEAR 2007.—For fiscal year
12	2007, an exemption under clause (ii) for an
13	eligible area applies only if, by October 1,
14	2006—
15	"(I)(aa) the State in which the
16	area is located had submitted to the
17	Secretary a plan for making the tran-
18	sition to sufficiently accurate and reli-
19	able names-based reporting of living
20	non-AIDS cases of HIV; or
21	"(bb) all statutory changes nec-
22	essary to provide for sufficiently accu-
23	rate and reliable reporting of such
24	cases had been made; and

"(II) the State had agreed that, by April 1, 2008, the State will begin accurate and reliable names-based re-porting of such cases, except that such agreement is not required to provide that, as of such date, the system for such reporting be fully sufficient with respect to accuracy and reliability throughout the area. "(iv) REQUIREMENT FOR EXEMPTION

"(iv) REQUIREMENT FOR EXEMPTION
AS OF FISCAL YEAR 2008.—For each of the
fiscal years 2008 through 2010, an exemption under clause (ii) for an eligible area
applies only if, as of April 1, 2008, the
State in which the area is located is substantially in compliance with the agreement
under clause (iii)(II).

"(v) Progress toward names-based retary may terminate an exemption under clause (ii) for an eligible area if the State in which the area is located submitted a plan under clause (iii)(I)(aa) and the Secretary determines that the State is not substantially following the plan.

1	"(vi) Counting of cases in areas
2	WITH EXEMPTIONS.—
3	"(I) In General.—With respect
4	to an eligible area that is under a re-
5	porting system for living non-AIDS
6	cases of HIV that is not names-based
7	(referred to in this subparagraph as
8	'code-based reporting'), the Secretary
9	shall, for purposes of this subpara-
10	graph, modify the number of such cases
11	reported for the eligible area in order
12	to adjust for duplicative reporting in
13	and among systems that use code-based
14	reporting.
15	"(II) Adjustment rate.—The
16	adjustment rate under subclause (I) for
17	an eligible area shall be a reduction of
18	5 percent in the number of living non-
19	AIDS cases of HIV reported for the
20	area.
21	"(vii) Multiple political jurisdic-
22	Tions.—With respect to living non-AIDS
23	cases of HIV, if an eligible area is not en-
24	tirely within one political jurisdiction and
25	as a result is subject to more than one re-

1	porting system for purposes of this subpara-
2	graph:
3	"(I) Names-based reporting under
4	clause (i) applies in a jurisdictional
5	portion of the area, or an exemption
6	under clause (ii) applies in such por-
7	tion (subject to applicable provisions of
8	this subparagraph), according to
9	whether names-based reporting or code-
10	based reporting is used in such por-
11	tion.
12	"(II) If under subclause (I) both
13	names-based reporting and code-based
14	reporting apply in the area, the num-
15	ber of code-based cases shall be reduced
16	under clause (vi).
17	"(viii) List of eligible areas
18	MEETING STANDARD REGARDING DECEMBER
19	31, 2005.—
20	"(I) In general.—If an eligible
21	area or portion thereof is in a State
22	specified in subclause (II), the eligible
23	area or portion shall be considered to
24	meet the standard described in clause
25	(ii)(I). No other eligible area or por-

1	tion thereof may be considered to meet
2	such standard.
3	"(II) Relevant states.—For
4	purposes of subclause (I), the States
5	specified in this subclause are the fol-
6	lowing: Alaska, Alabama, Arkansas,
7	Arizona, Colorado, Florida, Indiana,
8	Iowa, Idaho, Kansas, Louisiana,
9	Michigan, Minnesota, Missouri, Mis-
10	sissippi, North Carolina, North Da-
11	kota, Nebraska, New Jersey, New Mex-
12	ico, New York, Nevada, Ohio, Okla-
13	homa, South Carolina, South Dakota,
14	Tennessee, Texas, Utah, Virginia, Wis-
15	consin, West Virginia, Wyoming,
16	Guam, and the Virgin Islands.
17	"(ix) Rules of construction re-
18	GARDING ACCEPTANCE OF REPORTS.—
19	"(I) Cases of Aids.—With re-
20	spect to an eligible area that is subject
21	to the requirement under clause (i) and
22	is not in compliance with the require-
23	ment for names-based reporting of liv-
24	ing non-AIDS cases of HIV, the Sec-
25	retary shall, notwithstanding such

1	noncompliance, accept reports of living
2	cases of AIDS that are in accordance
3	with such clause.
4	"(II) Applicability of exemp-
5	TION REQUIREMENTS.—The provisions
6	of clauses (ii) through (viii) may not
7	be construed as having any legal effect
8	for fiscal year 2010 or any subsequent
9	fiscal year, and accordingly, the status
10	of a State for purposes of such clauses
11	may not be considered after fiscal year
12	2009.
13	"(x) Program for detecting inac-
14	CURATE OR FRAUDULENT COUNTING.—The
15	Secretary shall carry out a program to
16	monitor the reporting of names-based cases
17	for purposes of this subparagraph and to
18	detect instances of inaccurate reporting, in-
19	cluding fraudulent reporting.".
20	(c) Code-Based Areas; Limitation on Increase in
21	GRANT.—Section 2603(a)(3) of the Public Health Service
22	Act (42 U.S.C. 300ff-13(a)), as amended by subsection
23	(b)(2) of this section, is amended by adding at the end the
24	following subparagraph:

1	"(D) Code-based areas; limitation on
2	INCREASE IN GRANT .—
3	"(i) In general.—For each of the fis-
4	cal years 2007 through 2009, if code-based
5	reporting (within the meaning of subpara-
6	graph (C)(vi)) applies in an eligible area or
7	any portion thereof as of the beginning of
8	the fiscal year involved, then notwith-
9	standing any other provision of this para-
10	graph, the amount of the grant pursuant to
11	this paragraph for such area for such fiscal
12	year may not—
13	"(I) for fiscal year 2007, exceed
14	by more than 5 percent the amount of
15	the grant for the area that would have
16	been made pursuant to this paragraph
17	and paragraph (4) for fiscal year 2006
18	(as such paragraphs were in effect for
19	such fiscal year) if paragraph (2) (as
20	so in effect) had been applied by sub-
21	stituting '662/3 percent' for '50 per-
22	cent'; and
23	"(II) for each of the fiscal years
24	2008 and 2009, exceed by more than 5
25	percent the amount of the grant pursu-

1	ant to this paragraph and paragraph
2	(4) for the area for the preceding fiscal
3	year.
4	"(ii) Use of amounts involved.—
5	For each of the fiscal years 2007 through
6	2009, amounts available as a result of the
7	limitation under clause (i) shall be made
8	available by the Secretary as additional
9	amounts for grants pursuant to subsection
10	(b) for the fiscal year involved, subject to
11	paragraph (4) and section 2610(d)(2).".
12	(d) Hold Harmless.—Section 2603(a) of the Public
13	Health Service Act (42 U.S.C. 300ff–13(a)) is amended—
14	(1) in paragraph $(3)(A)$ —
15	(A) in clause (ii), by striking the period at
16	the end and inserting a semicolon; and
17	(B) by inserting after and below clause (ii)
18	$the\ following:$
19	"which product shall then, as applicable, be in-
20	creased under paragraph (4).".
21	(2) by amending paragraph (4) to read as fol-
22	lows:
23	"(4) Increases in grant.—
24	"(A) In General.—For each eligible area
25	that received a grant pursuant to this subsection

1	for fiscal year 2006, the Secretary shall, for each
2	of the fiscal years 2007 through 2009, increase
3	the amount of the grant made pursuant to para-
4	graph (3) for the area to ensure that the amount
5	of the grant for the fiscal year involved is not
6	less than the following amount, as applicable to
7	such fiscal year:
8	"(i) For fiscal year 2007, an amount
9	equal to 95 percent of the amount of the
10	grant that would have been made pursuant
11	to paragraph (3) and this paragraph for
12	fiscal year 2006 (as such paragraphs were
13	in effect for such fiscal year) if paragraph
14	(2) (as so in effect) had been applied by
15	substituting '662/3 percent' for '50 percent'.
16	"(ii) For each of the fiscal years 2008
17	and 2009, an amount equal to 100 percent
18	of the amount of the grant made pursuant
19	to paragraph (3) and this paragraph for
20	fiscal year 2007.
21	"(B) Source of funds for increase.—
22	"(i) In general.—From the amounts
23	available for carrying out the single pro-
24	gram referred to in section $2609(d)(2)(C)$

 $for \ a \ fiscal \ year \ (relating \ to \ supplemental$

grants), the Secretary shall make available

such amounts as may be necessary to com
ply with subparagraph (A), subject to sec
tion 2610(d)(2).

"(ii) PRO RATA REDUCTION.—If the amounts referred to in clause (i) for a fiscal year are insufficient to fully comply with subparagraph (A) for the year, the Secretary, in order to provide the additional funds necessary for such compliance, shall reduce on a pro rata basis the amount of each grant pursuant to this subsection for the fiscal year, other than grants for eligible areas for which increases under subparagraph (A) apply. A reduction under the preceding sentence may not be made in an amount that would result in the eligible area involved becoming eligible for such an increase.

"(C) Limitation.—This paragraph may not be construed as having any applicability after fiscal year 2009.".

1	SEC. 103. TYPE AND DISTRIBUTION OF GRANTS; SUPPLE-
2	MENTAL GRANTS.
3	Section 2603(b) of the Public Health Service Act (42
4	U.S.C. 300ff-13(b)) is amended—
5	(1) in paragraph (1)—
6	(A) in the matter preceding subparagraph
7	(A), by striking "Not later than" and all that
8	follows through "the Secretary shall" and insert-
9	ing the following: "Subject to subsection
10	(a)(4)(B)(i) and section 2610(d), the Secretary
11	shall";
12	(B) in subparagraph (B), by striking "dem-
13	onstrates the severe need in such area" and in-
14	serting "demonstrates the need in such area, on
15	an objective and quantified basis,";
16	(C) by striking subparagraph (F) and in-
17	serting the following:
18	"(F) demonstrates the inclusiveness of af-
19	fected communities and individuals with HIV/
20	AIDS;";
21	(D) in subparagraph (G), by striking the
22	period and inserting "; and"; and
23	(E) by adding at the end the following:
24	"(H) demonstrates the ability of the appli-
25	cant to expend funds efficiently by not having
26	had, for the most recent grant year under sub-

1	section (a) for which data is available, more
2	than 2 percent of grant funds under such sub-
3	section canceled or covered by any waivers under
4	subsection $(c)(3)$."; and
5	(2) in paragraph (2)—
6	(A) in subparagraph (A), by striking "se-
7	vere need" and inserting "demonstrated need";
8	(B) by striking subparagraph (B) and in-
9	serting the following:
10	"(B) Demonstrated need.—The factors
11	considered by the Secretary in determining
12	whether an eligible area has a demonstrated need
13	for purposes of paragraph (1)(B) may include
14	any or all of the following:
15	"(i) The unmet need for such services,
16	as determined under section 2602(b)(4) or
17	other community input process as defined
18	under section $2609(d)(1)(A)$.
19	"(ii) An increasing need for HIV/
20	AIDS-related services, including relative
21	rates of increase in the number of cases of
22	HIV/AIDS.
23	"(iii) The relative rates of increase in
24	the number of cases of HIV/AIDS within
25	new or emerging subpopulations.

1	"(iv) The current prevalence of HIV/
2	AIDS.
3	"(v) Relevant factors related to the cost
4	and complexity of delivering health care to
5	individuals with HIV/AIDS in the eligible
6	area.
7	"(vi) The impact of co-morbid factors,
8	including co-occurring conditions, deter-
9	mined relevant by the Secretary.
10	"(vii) The prevalence of homelessness.
11	"(viii) The prevalence of individuals
12	described under section $2602(b)(2)(M)$.
13	"(ix) The relevant factors that limit
14	access to health care, including geographic
15	variation, adequacy of health insurance cov-
16	erage, and language barriers.
17	"(x) The impact of a decline in the
18	amount received pursuant to subsection (a)
19	on services available to all individuals with
20	HIV/AIDS identified and eligible under this
21	title."; and
22	(C) by striking subparagraphs (C) and (D)
23	and inserting the following:
24	"(C) Priority in making grants.—The
25	Secretary shall provide funds under this sub-

1	section to an eligible area to address the decline
2	or disruption of all EMA-provided services re-
3	lated to the decline in the amounts received pur-
4	suant to subsection (a) consistent with the grant
5	award for the eligible area for fiscal year 2006,
6	to the extent that the factor under subparagraph
7	(B)(x) (relating to a decline in funding) applies
8	to the eligible area.".
9	SEC. 104. TIMEFRAME FOR OBLIGATION AND EXPENDITURE
10	OF GRANT FUNDS.
11	Section 2603 of the Public Health Service Act (42
12	U.S.C. 300ff–13) is amended—
13	(1) by redesignating subsection (c) as subsection
14	(d);
15	(2) by inserting after subsection (b) the fol-
16	lowing:
17	"(c) Timeframe for Obligation and Expenditure
18	OF GRANT FUNDS.—
19	"(1) Obligation by end of grant year.—Ef-
20	fective for fiscal year 2007 and subsequent fiscal
21	years, funds from a grant award made pursuant to
22	subsection (a) or (b) for a fiscal year are available for
23	obligation by the eligible area involved through the
24	end of the one-year period beginning on the date in
25	such fiscal year on which funds from the award first

	become available to the area (referred to in this sub-
2	section as the 'grant year for the award'), except as
3	provided in paragraph (3)(A).

- "(2) Supplemental grants; cancellation of unobligated balance of grant award made pursuant to subsection (b) for an eligible area for a fiscal year has an unobligated balance as of the end of the grant year for the award—
 - "(A) the Secretary shall cancel that unobligated balance of the award, and shall require the eligible area to return any amounts from such balance that have been disbursed to the area; and

"(B) the funds involved shall be made available by the Secretary as additional amounts for grants pursuant to subsection (b) for the first fiscal year beginning after the fiscal year in which the Secretary obtains the information necessary for determining that the balance is required under subparagraph (A) to be canceled, except that the availability of the funds for such grants is subject to subsection (a)(4) and section 2610(d)(2) as applied for such year.

1	"(3) Formula grants; cancellation of un-
2	OBLIGATED BALANCE OF GRANT AWARD; WAIVER PER-
3	MITTING CARRYOVER.—
4	"(A) In general.—Effective for fiscal year
5	2007 and subsequent fiscal years, if a grant
6	award made pursuant to subsection (a) for an
7	eligible area for a fiscal year has an unobligated
8	balance as of the end of the grant year for the
9	award, the Secretary shall cancel that unobli-
10	gated balance of the award, and shall require the
11	eligible area to return any amounts from such
12	balance that have been disbursed to the area,
13	unless—
14	"(i) before the end of the grant year,
15	the chief elected official of the area submits
16	to the Secretary a written application for a
17	waiver of the cancellation, which applica-
18	tion includes a description of the purposes
19	for which the area intends to expend the
20	funds involved; and
21	"(ii) the Secretary approves the waiv-
22	er.
23	"(B) Expenditure by end of carryover
24	YEAR.—With respect to a waiver under subpara-
25	graph (A) that is approved for a balance that is

unobligated as of the end of a grant year for an
award:

"(i) The unobligated funds are available for expenditure by the eligible area involved for the one-year period beginning upon the expiration of the grant year (referred to in this subsection as the 'carryover year').

"(ii) If the funds are not expended by the end of the carryover year, the Secretary shall cancel that unexpended balance of the award, and shall require the eligible area to return any amounts from such balance that have been disbursed to the area.

"(C) USE OF CANCELLED BALANCES.—In the case of any balance of a grant award that is cancelled under subparagraph (A) or (B)(ii), the grant funds involved shall be made available by the Secretary as additional amounts for grants pursuant to subsection (b) for the first fiscal year beginning after the fiscal year in which the Secretary obtains the information necessary for determining that the balance is required under such subparagraph to be canceled, except that the availability of the funds for such grants is sub-

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1	ject to subsection $(a)(4)$ and section $2610(d)(2)$
2	as applied for such year.
3	"(D) Corresponding reduction in fu-
4	TURE GRANT.—
5	"(i) In general.—In the case of an
6	eligible area for which a balance from a
7	grant award under subsection (a) is unobli-
8	gated as of the end of the grant year for the
9	award—
10	"(I) the Secretary shall reduce, by
11	the same amount as such unobligated
12	balance, the amount of the grant under
13	such subsection for the first fiscal year
14	beginning after the fiscal year in which
15	the Secretary obtains the information
16	necessary for determining that such
17	balance was unobligated as of the end
18	of the grant year (which requirement
19	for a reduction applies without regard
20	to whether a waiver under subpara-
21	graph (A) has been approved with re-
22	spect to such balance); and
23	"(II) the grant funds involved in
24	such reduction shall be made available
25	by the Secretary as additional funds

1	for grants pursuant to subsection (b)
2	for such first fiscal year, subject to sub-
3	section (a)(4) and section $2610(d)(2)$;
4	except that this clause does not apply to the
5	eligible area if the amount of the unobli-
6	gated balance was 2 percent or less.
7	"(ii) Relation to increases in
8	GRANT.—A reduction under clause (i) for
9	an eligible area for a fiscal year may not
10	be taken into account in applying sub-
11	section (a)(4) with respect to the area for
12	the subsequent fiscal year."; and
13	(3) by adding at the end the following:
14	"(e) Report on the Awarding of Supplemental
15	Funds.—Not later than 45 days after the awarding of sup-
16	plemental funds under this section, the Secretary shall sub-
17	mit to Congress a report concerning such funds. Such report
18	shall include information detailing—
19	"(1) the total amount of supplemental funds
20	available under this section for the year involved;
21	"(2) the amount of supplemental funds used in
22	accordance with the hold harmless provisions of sub-
23	section (a)(4);
24	"(3) the amount of supplemental funds disbursed
25	mursuant to subsection $(b)(2)(C)$.

1	"(4) the disbursement of the remainder of the
2	supplemental funds after taking into account the uses
3	described in paragraphs (2) and (3); and
4	"(5) the rationale used for the amount of funds
5	disbursed as described under paragraphs (2), (3), and
6	(4).".
7	SEC. 105. USE OF AMOUNTS.
8	Section 2604 of the Public Health Service Act (42
9	U.S.C. 300ff-14) is amended to read as follows:
0	"SEC. 2604. USE OF AMOUNTS.
11	"(a) Requirements.—The Secretary may not make
12	a grant under section 2601(a) to the chief elected official
13	of an eligible area unless such political subdivision agrees
14	that—
15	"(1) subject to paragraph (2), the allocation of
16	funds and services within the eligible area will be
17	made in accordance with the priorities established,
18	pursuant to section 2602(b)(4)(C), by the HIV health
19	services planning council that serves such eligible
20	area;
21	"(2) funds provided under section 2601 will be
22	expended only for—
23	"(A) core medical services described in sub-
24	section (c);

1	"(B) support services described in sub-
2	section (d); and
3	"(C) administrative expenses described in
4	subsection (h); and
5	"(3) the use of such funds will comply with the
6	requirements of this section.
7	"(b) Direct Financial Assistance to Appropriate
8	Entities.—
9	"(1) In general.—The chief elected official of
10	an eligible area shall use amounts from a grant under
11	section 2601 to provide direct financial assistance to
12	entities described in paragraph (2) for the purpose of
13	providing core medical services and support services.
14	"(2) Appropriate entities.—Direct financial
15	assistance may be provided under paragraph (1) to
16	public or nonprofit private entities, or private for-
17	profit entities if such entities are the only available
18	provider of quality HIV care in the area.
19	"(c) Required Funding for Core Medical Serv-
20	ICES.—
21	"(1) In general.—With respect to a grant
22	under section 2601 for an eligible area for a grant
23	year, the chief elected official of the area shall, of the
24	portion of the grant remaining after reserving
25	amounts for purposes of paragraphs (1) and (5)(B)(i)

1 of subsection (h), use not less than 75 percent to pro-2 vide core medical services that are needed in the eligi-3 ble area for individuals with HIV/AIDS who are 4 identified and eligible under this title (including serv-5 ices regarding the co-occurring conditions of the indi-6 viduals). 7 "(2) WAIVER.— "(A) In General.—The Secretary shall 8 waive the application of paragraph (1) with re-9 10 spect to a chief elected official for a grant year 11 if the Secretary determines that, within the eligi-12 ble area involved— 13 "(i) there are no waiting lists for 14 AIDS Drug Assistance Program services 15 under section 2616; and 16 "(ii) core medical services are available 17 to all individuals with HIV/AIDS identi-18 fied and eligible under this title. 19 "(B) Notification of Waiver Status.— 20 When informing the chief elected official of an el-21 igible area that a grant under section 2601 is 22 being made for the area for a grant year, the 23 Secretary shall inform the official whether a 24 waiver under subparagraph (A) is in effect for 25 such year.

1	"(3) Core medical services.—For purposes of
2	this subsection, the term 'core medical services', with
3	respect to an individual with HIV/AIDS (including
4	the co-occurring conditions of the individual), means
5	the following services:
6	"(A) Outpatient and ambulatory health
7	services.
8	"(B) AIDS Drug Assistance Program treat-
9	ments in accordance with section 2616.
10	"(C) AIDS pharmaceutical assistance.
11	"(D) Oral health care.
12	"(E) Early intervention services described
13	in subsection (e).
14	"(F) Health insurance premium and cost
15	sharing assistance for low-income individuals in
16	accordance with section 2615.
17	"(G) Home health care.
18	"(H) Medical nutrition therapy.
19	"(I) Hospice services.
20	"(J) Home and community-based health
21	services as defined under section $2614(c)$.
22	"(K) Mental health services.
23	"(L) Substance abuse outpatient care.
24	"(M) Medical case management, including
25	treatment adherence services.

"(d) Support Services.—

"(1) IN GENERAL.—For purposes of this section, the term 'support services' means services, subject to the approval of the Secretary, that are needed for individuals with HIV/AIDS to achieve their medical outcomes (such as respite care for persons caring for individuals with HIV/AIDS, outreach services, medical transportation, linguistic services, and referrals for health care and support services).

"(2) Medical outcomes.—In this subsection, the term 'medical outcomes' means those outcomes affecting the HIV-related clinical status of an individual with HIV/AIDS.

"(e) Early Intervention Services.—

"(1) In General.—For purposes of this section, the term 'early intervention services' means HIV/AIDS early intervention services described in section 2651(e), with follow-up referral provided for the purpose of facilitating the access of individuals receiving the services to HIV-related health services. The entities through which such services may be provided under the grant include public health departments, emergency rooms, substance abuse and mental health treatment programs, detoxification centers, detention facilities, clinics regarding sexually transmitted dis-

1	eases, homeless shelters, HIV/AIDS counseling and
2	testing sites, health care points of entry specified by
3	eligible areas, federally qualified health centers, and
4	entities described in section 2652(a) that constitute a
5	point of access to services by maintaining referral re-
6	lation ships.
7	"(2) Conditions.—With respect to an entity
8	that proposes to provide early intervention services
9	under paragraph (1), such paragraph shall apply
10	only if the entity demonstrates to the satisfaction of
11	the chief elected official for the eligible area involved
12	that—
13	"(A) Federal, State, or local funds are oth-
14	erwise inadequate for the early intervention serv-
15	ices the entity proposes to provide; and
16	"(B) the entity will expend funds pursuant
17	to such paragraph to supplement and not sup-
18	plant other funds available to the entity for the
19	provision of early intervention services for the
20	fiscal year involved.
21	"(f) Priority for Women, Infants, Children, and
22	Youth.—
23	"(1) In general.—For the purpose of providing
24	health and support services to infants, children,
25	youth, and women with HIV/AIDS, including treat-

ment measures to prevent the perinatal transmission of HIV, the chief elected official of an eligible area, in accordance with the established priorities of the planning council, shall for each of such populations in the eligible area use, from the grants made for the area under section 2601(a) for a fiscal year, not less than the percentage constituted by the ratio of the population involved (infants, children, youth, or women in such area) with HIV/AIDS to the general population in such area of individuals with HIV/AIDS.

- "(2) WAIVER.—With respect to the population involved, the Secretary may provide to the chief elected official of an eligible area a waiver of the requirement of paragraph (1) if such official demonstrates to the satisfaction of the Secretary that the population is receiving HIV-related health services through the State medicaid program under title XIX of the Social Security Act, the State children's health insurance program under title XXI of such Act, or other Federal or State programs.
- 22 "(g) Requirement of Status as Medicaid Pro-23 vider.—
- 24 "(1) Provision of Service.—Subject to para-25 graph (2), the Secretary may not make a grant under

section 2601(a) for the provision of services under this section in a State unless, in the case of any such service that is available pursuant to the State plan approved under title XIX of the Social Security Act for the State—

"(A) the political subdivision involved will provide the service directly, and the political subdivision has entered into a participation agreement under the State plan and is qualified to receive payments under such plan; or

"(B) the political subdivision will enter into an agreement with a public or nonprofit private entity under which the entity will provide the service, and the entity has entered into such a participation agreement and is qualified to receive such payments.

"(2) Waiver.—

"(A) In GENERAL.—In the case of an entity making an agreement pursuant to paragraph (1)(B) regarding the provision of services, the requirement established in such paragraph shall be waived by the HIV health services planning council for the eligible area if the entity does not, in providing health care services, impose a charge or accept reimbursement available from

any third-party payor, including reimbursement under any insurance policy or under any Federal or State health benefits program.

> "(B) Determination.—A determination by the HIV health services planning council of whether an entity referred to in subparagraph (A) meets the criteria for a waiver under such subparagraph shall be made without regard to whether the entity accepts voluntary donations for the purpose of providing services to the public.

"(h) Administration.—

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- "(1) LIMITATION.—The chief elected official of an eligible area shall not use in excess of 10 percent of amounts received under a grant under this part for administrative expenses.
- "(2) ALLOCATIONS BY CHIEF ELECTED OFFI-CIAL.—In the case of entities and subcontractors to which the chief elected official of an eligible area allocates amounts received by the official under a grant under this part, the official shall ensure that, of the aggregate amount so allocated, the total of the expenditures by such entities for administrative expenses does not exceed 10 percent (without regard to whether

particular entities expend more than 10 percent for
 such expenses).

"(3) ADMINISTRATIVE ACTIVITIES.—For purposes of paragraph (1), amounts may be used for administrative activities that include—

"(A) routine grant administration and monitoring activities, including the development of applications for part A funds, the receipt and disbursal of program funds, the development and establishment of reimbursement and accounting systems, the development of a clinical quality management program as described in paragraph (5), the preparation of routine programmatic and financial reports, and compliance with grant conditions and audit requirements; and

"(B) all activities associated with the grantee's contract award procedures, including the activities carried out by the HIV health services planning council as established under section 2602(b), the development of requests for proposals, contract proposal review activities, negotiation and awarding of contracts, monitoring of contracts through telephone consultation, written documentation or onsite visits, reporting on contracts, and funding reallocation activities.

1	"(4) Subcontractor administrative activi-
2	TIES.—For the purposes of this subsection, subcon-
3	tractor administrative activities include—
4	"(A) usual and recognized overhead activi-
5	ties, including established indirect rates for agen-
6	cies;
7	"(B) management oversight of specific pro-
8	grams funded under this title; and
9	"(C) other types of program support such as
10	quality assurance, quality control, and related
11	activities.
12	"(5) Clinical quality management.—
13	"(A) REQUIREMENT.—The chief elected offi-
14	cial of an eligible area that receives a grant
15	under this part shall provide for the establish-
16	ment of a clinical quality management program
17	to assess the extent to which HIV health services
18	provided to patients under the grant are con-
19	sistent with the most recent Public Health Serv-
20	ice guidelines for the treatment of HIV/AIDS
21	and related opportunistic infection, and as ap-
22	plicable, to develop strategies for ensuring that
23	such services are consistent with the guidelines
24	for improvement in the access to and quality of
25	HIV health services.

1	"(B) USE OF FUNDS.—
2	"(i) In general.—From amounts re-
3	ceived under a grant awarded under this
4	subpart for a fiscal year, the chief elected of-
5	ficial of an eligible area may use for activi-
6	ties associated with the clinical quality
7	management program required in subpara-
8	graph (A) not to exceed the lesser of—
9	"(I) 5 percent of amounts received
10	under the grant; or
11	"(II) \$3,000,000.
12	"(ii) Relation to limitation on ad-
13	MINISTRATIVE EXPENSES.—The costs of a
14	clinical quality management program
15	under subparagraph (A) may not be consid-
16	ered administrative expenses for purposes of
17	the limitation established in paragraph (1).
18	"(i) Construction.—A chief elected official may not
19	use amounts received under a grant awarded under this
20	part to purchase or improve land, or to purchase, construct,
21	or permanently improve (other than minor remodeling) any
22	building or other facility, or to make cash payments to in-
23	tended recipients of services.".

1 SEC. 106. ADDITIONAL AMENDMENTS TO PART A.

- 2 (a) Reporting of Cases.—Section 2601(a) of the 3 Public Health Service Act (42 U.S.C. 300ff-11(a)) is 4 amended by striking "for the most recent period" and inserting "during the most recent period".

 (b) Planning Council Representation.—Section 7 2602(b)(2)(G) of the Public Health Service Act (42 U.S.C.
- 8 300ff-12(b)(2)(G)) is amended by inserting ", members of 9 a Federally recognized Indian tribe as represented in the 10 population, individuals co-infected with hepatitis B or C"
- 11 after "disease".
- 12 (c) Application for Grant.—
- 13 (1) PAYER OF LAST RESORT.—Section
 14 2605(a)(6)(A) of the Public Health Service Act (42)
 15 U.S.C. 300ff-15(a)(6)(A)) is amended by inserting
 16 "(except for a program administered by or providing
 17 the services of the Indian Health Service)" before the
 18 semicolon.
- 19 (2) AUDITS.—Section 2605(a) of the Public 20 Health Service Act (42 U.S.C. 300ff-15(a)) is 21 amended—
- 22 (A) in paragraph (8), by striking "and" at the end:
- 24 (B) in paragraph (9), by striking the period 25 and inserting "; and"; and
- 26 (C) by adding at the end the following:

1	"(10) that the chief elected official will submit to
2	the lead State agency under section 2617(b)(4), au-
3	dits, consistent with Office of Management and Budg-
4	et circular A133, regarding funds expended in accord-
5	ance with this part every 2 years and shall include
6	necessary client-based data to compile unmet need
7	calculations and Statewide coordinated statements of
8	need process.".
9	(3) Coordination.—Section 2605(b) of the Pub-
10	lic Health Service Act (42 U.S.C. 300ff–15(b)) is
11	amended—
12	(A) in paragraph (3), by striking "and" at
13	$the\ end;$
14	(B) in paragraph (4), by striking the period
15	and inserting a semicolon; and
16	(C) by adding at the end the following:
17	"(5) the manner in which the expected expendi-
18	tures are related to the planning process for States
19	that receive funding under part B (including the
20	planning process described in section 2617(b)); and
21	"(6) the expected expenditures and how those ex-
22	penditures will improve overall client outcomes, as de-
23	scribed under the State plan under section 2617(b),
24	and through additional outcomes measures as identi-

1	fied by the HIV health services planning council
2	under section 2602(b).".
3	SEC. 107. NEW PROGRAM IN PART A; TRANSITIONAL
4	GRANTS FOR CERTAIN AREAS INELIGIBLE
5	UNDER SECTION 2601.
6	(a) In General.—Part A of title XXVI of the Public
7	Health Service Act (42 U.S.C. 300ff-11) is amended—
8	(1) by inserting after the part heading the fol-
9	lowing:
10	"Subpart I—General Grant Provisions"; and
11	(2) by adding at the end the following:
12	"Subpart II—Transitional Grants
13	"SEC. 2609. ESTABLISHMENT OF PROGRAM.
14	"(a) In General.—The Secretary, acting through the
15	Administrator of the Health Resources and Services Admin-
16	istration, shall make grants for the purpose of providing
17	services described in section 2604 in transitional areas, sub-
18	ject to the same provisions regarding the allocation of grant
19	funds as apply under subsection (c) of such section.
20	"(b) Transitional Areas.—For purposes of this sec-
21	tion, the term 'transitional area' means, subject to sub-
22	section (c), a metropolitan area for which there has been
23	reported to and confirmed by the Director of the Centers
24	for Disease Control and Prevention a cumulative total of
25	at least 1,000, but fewer than 2,000, cases of AIDS during

1	the most recent period of 5 calendar years for which such
2	data are available.
3	"(c) Certain Eligibility Rules.—
4	"(1) Fiscal year 2007.—With respect to grants
5	under subsection (a) for fiscal year 2007, a metropoli-
6	tan area that received funding under subpart I for
7	fiscal year 2006 but does not for fiscal year 2007
8	qualify under such subpart as an eligible area and
9	does not qualify under subsection (b) as a transitional
10	area shall, notwithstanding subsection (b), be consid-
11	ered a transitional area.
12	"(2) Continued status as transitional
13	AREA.—
14	"(A) In General.—Notwithstanding sub-
15	section (b), a metropolitan area that is a transi-
16	tional area for a fiscal year continues, except as
17	provided in subparagraph (B), to be a transi-
18	tional area until the metropolitan area fails, for
19	three consecutive fiscal years—
20	"(i) to qualify under such subsection as
21	a transitional area; and
22	"(ii) to have a cumulative total of
23	1,500 or more living cases of AIDS (re-
24	ported to and confirmed by the Director of
25	the Centers for Disease Control and Preven-

1	tion) as of December 31 of the most recent
2	calendar year for which such data is avail-
3	able.
4	"(B) Exception regarding status as
5	ELIGIBLE AREA.—Subparagraph (A) does not
6	apply for a fiscal year if the metropolitan area
7	involved qualifies under subpart I as an eligible
8	area.
9	"(d) Application of Certain Provisions of Sub-
10	PART I.—
11	"(1) Administration; planning council.—
12	"(A) In General.—The provisions of sec-
13	tion 2602 apply with respect to a grant under
14	subsection (a) for a transitional area to the same
15	extent and in the same manner as such provi-
16	sions apply with respect to a grant under sub-
17	part I for an eligible area, except that, subject to
18	subparagraph (B), the chief elected official of the
19	transitional area may elect not to comply with
20	the provisions of section 2602(b) if the official
21	provides documentation to the Secretary that de-
22	tails the process used to obtain community input
23	(particularly from those with HIV) in the tran-

sitional area for formulating the overall plan for

1	priority setting and allocating funds from the
2	grant under subsection (a).
3	"(B) Exception.—For each of the fiscal
4	years 2007 through 2009, the exception described
5	in subparagraph (A) does not apply if the tran-
6	sitional area involved received funding under
7	$subpart\ I\ for\ fiscal\ year\ 2006.$
8	"(2) Type and distribution of grants; time-
9	FRAME FOR OBLIGATION AND EXPENDITURE OF
10	GRANT FUNDS.—
11	"(A) FORMULA GRANTS; SUPPLEMENTAL
12	GRANTS.—The provisions of section 2603 apply
13	with respect to grants under subsection (a) to the
14	same extent and in the same manner as such
15	provisions apply with respect to grants under
16	subpart I, subject to subparagraphs (B) and (C).
17	"(B) Formula grants; increase in
18	GRANT.—For purposes of subparagraph (A), sec-
19	$tion\ 2603(a)(4)\ does\ not\ apply.$
20	"(C) Supplemental grants; single pro-
21	GRAM WITH SUBPART I PROGRAM.—With respect
22	to section 2603(b) as applied for purposes of sub-
23	paragraph (A):
24	"(i) The Secretary shall combine
25	amounts available pursuant to such sub-

1	paragraph with amounts available for car-
2	rying out section 2603(b) and shall admin-
3	ister the two programs as a single program.
4	"(ii) In the single program, the Sec-
5	retary has discretion in allocating amounts
6	between eligible areas under subpart I and
7	transitional areas under this section, subject
8	to the eligibility criteria that apply under
9	such section, and subject to section
10	2603(b)(2)(C) (relating to priority in mak-
11	$ing\ grants).$
12	"(iii) Pursuant to section 2603(b)(1),
13	amounts for the single program are subject
14	to use under sections $2603(a)(4)$ and
15	2610(d)(1).
16	"(3) Application; technical assistance;
17	DEFINITIONS.—The provisions of sections 2605, 2606,
18	and 2607 apply with respect to grants under sub-
19	section (a) to the same extent and in the same man-
20	ner as such provisions apply with respect to grants
21	under subpart I.".
22	(b) Conforming Amendments.—Subpart I of part A
23	of title XXVI of the Public Health Service Act, as designated
24	by subsection (a)(1) of this section, is amended by striking

1	"this part" each place such term appears and inserting
2	"this subpart".
3	SEC. 108. AUTHORIZATION OF APPROPRIATIONS FOR PART
4	$oldsymbol{A}$.
5	Part A of title XXVI of the Public Health Service Act,
6	as amended by section 106(a), is amended by adding at
7	the end the following:
8	"Subpart III—General Provisions
9	"SEC. 2610. AUTHORIZATION OF APPROPRIATIONS.
10	"(a) In General.—For the purpose of carrying out
11	this part, there are authorized to be appropriated
12	\$604,000,000 for fiscal year 2007, \$626,300,000 for fiscal
13	year 2008, and \$649,500,000 for fiscal year 2009. Amounts
14	appropriated under the preceding sentence for a fiscal year
15	are available for obligation by the Secretary until the end
16	of the second succeeding fiscal year.
17	"(b) Reservation of Amounts.—
18	"(1) Fiscal year 2007.—Of the amount appro-
19	priated under subsection (a) for fiscal year 2007, the
20	Secretary shall reserve—
21	"(A) \$458,310,000 for grants under subpart
22	I; and
23	"(B) \$145,690,000 for grants under section
24	2609.

1	"(2) Subsequent fiscal years.—Of the
2	amount appropriated under subsection (a) for fiscal
3	year 2008 and each subsequent fiscal year—
4	"(A) the Secretary shall reserve an amount
5	for grants under subpart I; and
6	"(B) the Secretary shall reserve an amount
7	for grants under section 2609.
8	"(c) Transfer of Certain Amounts; Change in
9	Status as Eligible Area or Transitional Area.—
10	Notwithstanding subsection (b):
11	"(1) If a metropolitan area is an eligible area
12	under subpart I for a fiscal year, but for a subsequent
13	fiscal year ceases to be an eligible area by reason of
14	section 2601(b)—
15	"(A)(i) the amount reserved under para-
16	$graph \ (1)(A) \ or \ (2)(A) \ of \ subsection \ (b) \ of \ this$
17	section for the first such subsequent year of not
18	being an eligible area is deemed to be reduced by
19	an amount equal to the amount of the grant
20	made pursuant to section 2603(a) for the metro-
21	politan area for the preceding fiscal year; and
22	"(ii)(I) if the metropolitan area qualifies
23	for such first subsequent fiscal year as a transi-
24	tional area under 2609, the amount reserved
25	under paragraph $(1)(B)$ or $(2)(B)$ of subsection

1	(b) for such fiscal year is deemed to be increased
2	by an amount equal to the amount of the reduc-
3	tion under subparagraph (A) for such year; or
4	"(II) if the metropolitan area does not qual-
5	ify for such first subsequent fiscal year as a
6	transitional area under 2609, an amount equal
7	to the amount of such reduction is, notwith-
8	standing subsection (a), transferred and made
9	available for grants pursuant to section
10	2618(a)(1), in addition to amounts available for
11	such grants under section 2623; and
12	"(B) if a transfer under subparagraph
13	(A)(ii)(II) is made with respect to the metropoli-
14	tan area for such first subsequent fiscal year,
15	then—
16	"(i) the amount reserved under para-
17	$graph \ (1)(A) \ or \ (2)(A) \ of \ subsection \ (b) \ of$
18	this section for such year is deemed to be re-
19	duced by an additional \$500,000; and
20	"(ii) an amount equal to the amount
21	of such additional reduction is, notwith-
22	standing subsection (a), transferred and
23	made available for grants pursuant to sec-
24	tion 2618(a)(1), in addition to amounts

1	available for such grants under section
2	2623.
3	"(2) If a metropolitan area is a transitional
4	area under section 2609 for a fiscal year, but for a
5	subsequent fiscal year ceases to be a transitional area
6	by reason of section $2609(c)(2)$ (and does not qualify
7	for such subsequent fiscal year as an eligible area
8	under subpart I)—
9	"(A) the amount reserved under subsection
10	(b)(2)(B) of this section for the first such subse-
11	quent fiscal year of not being a transitional area
12	is deemed to be reduced by an amount equal to
13	the total of—
14	"(i) the amount of the grant that, pur-
15	suant to section 2603(a), was made under
16	section $2609(d)(2)(A)$ for the metropolitan
17	area for the preceding fiscal year; and
18	"(ii) \$500,000; and
19	"(B) an amount equal to the amount of the
20	reduction under subparagraph (A) for such year
21	is, notwithstanding subsection (a), transferred
22	and made available for grants pursuant to sec-
23	tion 2618(a)(1), in addition to amounts avail-
24	able for such grants under section 2623.

1	"(3) If a metropolitan area is a transitional
2	area under section 2609 for a fiscal year, but for a
3	subsequent fiscal year qualifies as an eligible area
4	under subpart I—
5	"(A) the amount reserved under subsection
6	(b)(2)(B) of this section for the first such subse-
7	quent fiscal year of becoming an eligible area is
8	deemed to be reduced by an amount equal to the
9	amount of the grant that, pursuant to section
10	2603(a), was made under section $2609(d)(2)(A)$
11	for the metropolitan area for the preceding fiscal
12	year; and
13	"(B) the amount reserved under subsection
14	(b)(2)(A) for such fiscal year is deemed to be in-
15	creased by an amount equal to the amount of the
16	reduction under subparagraph (A) for such year.
17	"(d) Certain Transfers; Allocations Between
18	Programs Under Subpart I.—With respect to para-
19	$graphs\ (1)(B)(i)\ and\ (2)(A)(ii)\ of\ subsection\ (c),\ the\ Sec-$
20	retary shall administer any reductions under such para-
21	graphs for a fiscal year in accordance with the following:
22	"(1) The reductions shall be made from amounts
23	available for the single program referred to in section
24	2609(d)(2)(C) (relating to supplemental grants).

- 1 "(2) The reductions shall be made before the 2 amounts referred to in paragraph (1) are used for 3 purposes of section 2603(a)(4).
- "(3) If the amounts referred to in paragraph (1)

 are not sufficient for making all the reductions, the

 reductions shall be reduced until the total amount of

 the reductions equals the total of the amounts referred

 to in such paragraph.
- "(e) RULES OF CONSTRUCTION REGARDING FIRST

 10 SUBSEQUENT FISCAL YEAR.—Paragraphs (1) and (2) of

 11 subsection (c) apply with respect to each series of fiscal

 12 years during which a metropolitan area is an eligible area

 13 under subpart I or a transitional area under section 2609

 14 for a fiscal year and then for a subsequent fiscal year ceases

 15 to be such an area by reason of section 2601(b) or

 16 2609(c)(2), respectively, rather than applying to a single

 17 such series. Paragraph (3) of subsection (c) applies with

 18 respect to each series of fiscal years during which a metro
 19 politan area is a transitional area under section 2609 for

 20 a fiscal year and then for a subsequent fiscal year becomes

 21 an eligible area under subpart I, rather than applying to

 22 a single such series.".

TITLE II—CARE GRANTS 1 SEC. 201. GENERAL USE OF GRANTS. 3 (a) In General.—Section 2612 of the Public Health Service Act (42 U.S.C. 300ff-22) is amended to read as fol-5 lows: "SEC. 2612. GENERAL USE OF GRANTS. "(a) In General.—A State may use amounts pro-8 vided under grants made under section 2611 for— "(1) core medical services described in subsection 9 10 *(b)*; 11 "(2) support services described in subsection (c): 12 and 13 "(3) administrative expenses described in section 14 2618(b)(3). 15 "(b) Required Funding for Core Medical Serv-16 ICES.— 17 "(1) In General.—With respect to a grant 18 under section 2611 for a State for a grant year, the 19 State shall, of the portion of the grant remaining 20 after reserving amounts for purposes of subpara-21 graphs (A) and (E)(ii)(I) of section 2618(b)(3), use 22 not less than 75 percent to provide core medical serv-

ices that are needed in the State for individuals with

HIV/AIDS who are identified and eligible under this

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1	title (including services regarding the co-occurring
2	conditions of the individuals).
3	"(2) Waiver.—
4	"(A) In General.—The Secretary shall
5	waive the application of paragraph (1) with re-
6	spect to a State for a grant year if the Secretary
7	determines that, within the State—
8	"(i) there are no waiting lists for
9	AIDS Drug Assistance Program services
10	under section 2616; and
11	"(ii) core medical services are available
12	to all individuals with HIV/AIDS identi-
13	fied and eligible under this title.
14	"(B) Notification of waiver status.—
15	When informing a State that a grant under sec-
16	tion 2611 is being made to the State for a fiscal
17	year, the Secretary shall inform the State wheth-
18	er a waiver under subparagraph (A) is in effect
19	for the fiscal year.
20	"(3) Core medical services.—For purposes of
21	this subsection, the term 'core medical services', with
22	respect to an individual infected with HIV/AIDS (in-
23	cluding the co-occurring conditions of the individual)
24	means the following services:

1	"(A) Outpatient and ambulatory health
2	services.
3	"(B) AIDS Drug Assistance Program treat-
4	ments in accordance with section 2616.
5	"(C) AIDS pharmaceutical assistance.
6	"(D) Oral health care.
7	"(E) Early intervention services described
8	$in \ subsection \ (d).$
9	"(F) Health insurance premium and cost
10	sharing assistance for low-income individuals in
11	accordance with section 2615.
12	"(G) Home health care.
13	"(H) Medical nutrition therapy.
14	"(I) Hospice services.
15	"(J) Home and community-based health
16	services as defined under section $2614(c)$.
17	"(K) Mental health services.
18	"(L) Substance abuse outpatient care.
19	"(M) Medical case management, including
20	treatment adherence services.
21	"(c) Support Services.—
22	"(1) In general.—For purposes of this sub-
23	section, the term 'support services' means services,
24	subject to the approval of the Secretary, that are need-
25	ed for individuals with HIV/AIDS to achieve their

- 1 medical outcomes (such as respite care for persons 2 caring for individuals with HIV/AIDS, outreach serv-3 ices, medical transportation, linguistic services, and 4 referrals for health care and support services).
 - "(2) Definition of Medical Outcomes.—In this subsection, the term 'medical outcomes' means those outcomes affecting the HIV-related clinical status of an individual with HIV/AIDS.

"(d) Early Intervention Services.—

"(1) In General.—For purposes of this section, the term 'early intervention services' means HIV/AIDS early intervention services described in section 2651(e), with follow-up referral provided for the purpose of facilitating the access of individuals receiving the services to HIV-related health services. The entities through which such services may be provided under the grant include public health departments, emergency rooms, substance abuse and mental health treatment programs, detoxification centers, detention facilities, clinics regarding sexually transmitted diseases, homeless shelters, HIV/AIDS counseling and testing sites, health care points of entry specified by States, federally qualified health centers, and entities described in section 2652(a) that constitute a point of

1	access to services by maintaining referral relation-
2	ships.
3	"(2) Conditions.—With respect to an entity
4	that proposes to provide early intervention services
5	under paragraph (1), such paragraph shall apply
6	only if the entity demonstrates to the satisfaction of
7	the chief elected official for the State involved that—
8	"(A) Federal, State, or local funds are oth-
9	erwise inadequate for the early intervention serv-
10	ices the entity proposes to provide; and
11	"(B) the entity will expend funds pursuant
12	to such subparagraph to supplement and not
13	supplant other funds available to the entity for
14	the provision of early intervention services for
15	the fiscal year involved.
16	"(e) Priority for Women, Infants, Children, and
17	Youth.—
18	"(1) In general.—For the purpose of providing
19	health and support services to infants, children,
20	youth, and women with HIV/AIDS, including treat-
21	ment measures to prevent the perinatal transmission
22	of HIV, a State shall for each of such populations in
23	the eligible area use, from the grants made for the
24	area under section 2601(a) for a fiscal year, not less
25	than the percentage constituted by the ratio of the

1 population involved (infants, children, youth, or 2 women in such area) with HIV/AIDS to the general 3 population in such area of individuals with HIV/ 4 AIDS. 5 "(2) Waiver.—With respect to the population 6 involved, the Secretary may provide to a State a 7 waiver of the requirement of paragraph (1) if such 8 State demonstrates to the satisfaction of the Secretary 9 that the population is receiving HIV-related health 10 services through the State medicaid program under 11 title XIX of the Social Security Act, the State chil-12 dren's health insurance program under title XXI of 13 such Act, or other Federal or State programs. 14 "(f) Construction.—A State may not use amounts received under a grant awarded under section 2611 to purchase or improve land, or to purchase, construct, or permanently improve (other than minor remodeling) any building or other facility, or to make cash payments to intended re-19 cipients of services.". 20 (b) HIV CARE CONSORTIA.—Section 2613 of the Pub-21 lic Health Service Act (42 U.S.C. 300ff-23) is amended— 22 (1) in subsection (a), in the matter preceding 23 paragraph (1)— 24 (A) by striking "may use" and inserting

"may, subject to subsection (f), use"; and

1	(B) by striking "section $2612(a)(1)$ " and
2	inserting "section 2612(a)"; and
3	(2) by adding at the end the following subsection:
4	"(f) Allocation of Funds; Treatment as Support
5	Services.—For purposes of the requirement of section
6	2612(b)(1), expenditures of grants under section 2611 for
7	or through consortia under this section are deemed to be
8	support services, not core medical services. The preceding
9	sentence may not be construed as having any legal effect
10	on the provisions of subsection (a) that relate to authorized
11	expenditures of the grant.".
12	(c) Technical Amendments.—Part B of title XXVI
13	of the Public Health Service Act (42 U.S.C. 300ff-21 et seq.)
14	is amended—
15	(1) in section 2611—
16	(A) in subsection (a), by striking the sub-
17	section designation and heading; and
18	(B) by striking subsection (b);
19	(2) in section 2614—
20	(A) in subsection (a), in the matter pre-
21	ceding paragraph (1), by striking "section
22	2612(a)(2)" and inserting "section"
23	2612(b)(3)(J)"; and
24	(B) in subsection $(c)(2)(B)$, by striking
25	"homemaker or";

1	(3) in section 2615(a) by striking "section
2	2612(a)(3)" and inserting "section $2612(b)(3)(F)$ ";
3	and
4	(4) in section 2616(a) by striking "section
5	2612(a)(5)" and inserting "section $2612(b)(3)(B)$ ".
6	SEC. 202. AIDS DRUG ASSISTANCE PROGRAM.
7	(a) Requirement of Minimum Drug List.—Section
8	2616 of the Public Health Service Act (42 U.S.C. 300ff-
9	26) is amended—
10	(1) in subsection (c), by striking paragraph (1)
11	and inserting the following:
12	"(1) ensure that the therapeutics included on the
13	list of classes of core antiretroviral therapeutics estab-
14	lished by the Secretary under subsection (e) are, at a
15	minimum, the treatments provided by the State pur-
16	suant to this section;";
17	(2) by redesignating subsection (e) as subsection
18	(f); and
19	(3) by inserting after subsection (d) the fol-
20	lowing:
21	"(e) List of Classes of Core Antiretroviral
22	Therapeutics.—For purposes of subsection $(c)(1)$, the
23	Secretary shall develop and maintain a list of classes of
24	core antiretroviral therapeutics, which list shall be based
25	on the therapeutics included in the guidelines of the Sec-

1	retary known as the Clinical Practice Guidelines for Use
2	of HIV/AIDS Drugs, relating to drugs needed to manage
3	symptoms associated with HIV. The preceding sentence does
4	not affect the authority of the Secretary to modify such
5	Guidelines.".
6	(b) Drug Rebate Program.—Section 2616 of the
7	Public Health Service Act, as amended by subsection (a)(2)
8	of this section, is amended by adding at the end the fol-
9	lowing:
0	"(g) Drug Rebate Program.—A State shall ensure
11	that any drug rebates received on drugs purchased from
12	funds provided pursuant to this section are applied to ac-
13	tivities supported under this subpart, with priority given
14	to activities described under this section.".
15	SEC. 203. DISTRIBUTION OF FUNDS.
16	(a) Distribution Based on Living Cases of HIV/
17	AIDS.—
18	(1) State distribution factor.—Section
19	2618(a)(2) of the Public Health Service Act (42
20	U.S.C. 300ff-28(a)(2)) is amended—
21	(A) in subparagraph (B), by striking "esti-
22	mated number of living cases of acquired im-
23	mune deficiency syndrome in the eligible area
24	involved" and inserting "number of living cases
25	of HIV/AIDS in the State involved"; and

1	(B) by amending subparagraph (D) to read
2	as follows:
3	"(D) Living cases of hiv/aids.—
4	"(i) Requirement of names-based
5	REPORTING.—Except as provided in clause
6	(ii), the number determined under this sub-
7	paragraph for a State for a fiscal year for
8	purposes of subparagraph (B) is the number
9	of living names-based cases of HIV/AIDS in
10	the State that, as of December 31 of the
11	most recent calendar year for which such
12	data is available, have been reported to and
13	confirmed by the Director of the Centers for
14	Disease Control and Prevention.
15	"(ii) Transition period; exemption
16	REGARDING NON-AIDS CASES.—For each of
17	the fiscal years 2007 through 2009, a State
18	is, subject to clauses (iii) through (v), ex-
19	empt from the requirement under clause (i)
20	that living non-AIDS names-based cases of
21	HIV be reported unless—
22	"(I) a system was in operation as
23	of December 31, 2005, that provides
24	sufficiently accurate and reliable
25	names-based reporting of such cases

1	throughout the State, subject to clause
2	(vii); or
3	"(II) no later than the beginning
4	of fiscal year 2008 or 2009, the Sec-
5	retary, after consultation with the chief
6	executive of the State, determines that
7	a system has become operational in the
8	State that provides sufficiently accu-
9	rate and reliable names-based report-
10	ing of such cases throughout the State.
11	"(iii) Requirements for exemption
12	FOR FISCAL YEAR 2007.—For fiscal year
13	2007, an exemption under clause (ii) for a
14	State applies only if, by October 1, 2006—
15	"(I)(aa) the State had submitted
16	to the Secretary a plan for making the
17	transition to sufficiently accurate and
18	reliable names-based reporting of living
19	non-AIDS cases of HIV; or
20	"(bb) all statutory changes nec-
21	essary to provide for sufficiently accu-
22	rate and reliable reporting of such
23	cases had been made; and
24	"(II) the State had agreed that,
25	by April 1, 2008, the State will begin

1	accurate and reliable names-based re-
2	porting of such cases, except that such
3	agreement is not required to provide
4	that, as of such date, the system for
5	such reporting be fully sufficient with
6	respect to accuracy and reliability
7	throughout the area.
8	"(iv) Requirement for exemption
9	AS OF FISCAL YEAR 2008.—For each of the
10	fiscal years 2008 through 2010, an exemp-
11	tion under clause (ii) for a State applies
12	only if, as of April 1, 2008, the State is sub-
13	stantially in compliance with the agreement
14	$under\ clause\ (iii)(II).$
15	"(v) Progress toward names-based
16	REPORTING.—For fiscal year 2009, the Sec-
17	retary may terminate an exemption under
18	clause (ii) for a State if the State submitted
19	a plan under clause (iii)(I)(aa) and the
20	Secretary determines that the State is not
21	substantially following the plan.
22	"(vi) Counting of cases in areas
23	WITH EXEMPTIONS.—
24	"(I) In general.—With respect
25	to a State that is under a reporting

1	system for living non-AIDS cases of
2	HIV that is not names-based (referred
3	to in this subparagraph as 'code-based
4	reporting'), the Secretary shall, for
5	purposes of this subparagraph, modify
6	the number of such cases reported for
7	the State in order to adjust for dupli-
8	cative reporting in and among systems
9	that use code-based reporting.
10	"(II) Adjustment rate.—The
11	adjustment rate under subclause (I) for
12	a State shall be a reduction of 5 per-
13	cent in the number of living non-AIDS
14	cases of HIV reported for the State.
15	"(vii) List of states meeting
16	STANDARD REGARDING DECEMBER 31,
17	2005.—
18	"(I) In general.—If a State is
19	specified in subclause (II), the State
20	shall be considered to meet the stand-
21	ard described in clause (ii)(I). No other
22	State may be considered to meet such
23	standard.
24	"(II) RELEVANT STATES.—For
25	purposes of subclause (I), the States

1	specified in this subclause are the fol-
2	lowing: Alaska, Alabama, Arkansas,
3	Arizona, Colorado, Florida, Indiana,
4	Iowa, Idaho, Kansas, Louisiana,
5	Michigan, Minnesota, Missouri, Mis-
6	sissippi, North Carolina, North Da-
7	kota, Nebraska, New Jersey, New Mex-
8	ico, New York, Nevada, Ohio, Okla-
9	homa, South Carolina, South Dakota,
10	Tennessee, Texas, Utah, Virginia, Wis-
11	consin, West Virginia, Wyoming,
12	Guam, and the Virgin Islands.
13	"(viii) Rules of construction re-
14	GARDING ACCEPTANCE OF REPORTS.—
15	"(I) Cases of Aids.—With re-
16	spect to a State that is subject to the
17	requirement under clause (i) and is
18	not in compliance with the require-
19	ment for names-based reporting of liv-
20	ing non-AIDS cases of HIV, the Sec-
21	retary shall, notwithstanding such
22	noncompliance, accept reports of living
23	cases of AIDS that are in accordance
24	with such clause.

1	"(II) APPLICABILITY OF EXEMP-
2	TION REQUIREMENTS.—The provisions
3	of clauses (ii) through (vii) may not be
4	construed as having any legal effect for
5	fiscal year 2010 or any subsequent fis-
6	cal year, and accordingly, the status of
7	a State for purposes of such clauses
8	may not be considered after fiscal year
9	2009.
10	"(ix) Program for detecting inac-
11	CURATE OR FRAUDULENT COUNTING.—The
12	Secretary shall carry out a program to
13	monitor the reporting of names-based cases
14	for purposes of this subparagraph and to
15	detect instances of inaccurate reporting, in-
16	cluding fraudulent reporting.".
17	(2) Non-ema distribution factor.—Section
18	2618(a)(2)(C) of the Public Health Service Act (42
19	U.S.C. 300ff-28(a)(2)(C)) is amended—
20	(A) in clause (i), by striking "estimated
21	number of living cases of acquired immune defi-
22	ciency syndrome" each place such term appears
23	and inserting "number of living cases of HIV/
24	AIDS"; and

1	(B) in clause (ii), by amending such clause
2	to read as follows:
3	"(ii) a number equal to the sum of—
4	"(I) the total number of living
5	cases of HIV/AIDS that are within
6	areas in such State that are eligible
7	areas under subpart I of part A for the
8	fiscal year involved, which individual
9	number for an area is the number that
10	applies under section 2601 for the area
11	for such fiscal year; and
12	"(II) the total number of such
13	cases that are within areas in such
14	State that are transitional areas under
15	section 2609 for such fiscal year, which
16	individual number for an area is the
17	number that applies under such section
18	for the fiscal year.".
19	(b) Formula Amendments Generally.—Section
20	2618(a)(2) of the Public Health Service Act (42 U.S.C.
21	300ff-28(a)(2)) is amended—
22	(1) in subparagraph (A)—
23	(A) by striking "The amount referred to" in
24	the matter preceding clause (i) and all that fol-
25	lows through the end of clause (i) and inserting

1	the following: "For purposes of paragraph (1),
2	the amount referred to in this paragraph for a
3	State (including a territory) for a fiscal year is,
4	subject to subparagraphs (E) and (F)—
5	"(i) an amount equal to the amount
6	made available under section 2623 for the
7	fiscal year involved for grants pursuant to
8	paragraph (1), subject to subparagraph (G);
9	and"; and
10	(B) in clause (ii)—
11	(i) in subclause (I)—
12	(I) by striking ".80" and insert-
13	ing "0.75"; and
14	(II) by striking "and" at the end;
15	(ii) in subclause (II)—
16	(I) by inserting "non-EMA" after
17	"respective"; and
18	(II) by striking the period and in-
19	serting "; and"; and
20	(iii) by adding at the end the fol-
21	lowing:
22	"(III) if the State does not for
23	such fiscal year contain any area that
24	is an eligible area under subpart I of
25	part A or any area that is a transi-

1	tional area under section 2609 (re-
2	ferred to in this subclause as a 'no-
3	EMA State'), the product of 0.05 and
4	the ratio of the number of cases that
5	applies for the State under subpara-
6	graph (D) to the sum of the respective
7	numbers of cases that so apply for all
8	no-EMA States.";
9	(2) by striking subparagraphs (E) through (H);
10	(3) by inserting after subparagraph (D) the fol-
11	lowing subparagraphs:
12	"(E) Code-based states; limitation on
13	INCREASE IN GRANT.—
14	"(i) In general.—For each of the fis-
15	cal years 2007 through 2009, if code-based
16	reporting (within the meaning of subpara-
17	graph (D)(vi)) applies in a State as of the
18	beginning of the fiscal year involved, then
19	notwithstanding any other provision of this
20	paragraph, the amount of the grant pursu-
21	ant to paragraph (1) for the State may not
22	for the fiscal year involved exceed by more
23	than 5 percent the amount of the grant pur-
24	suant to this paragraph for the State for the
25	preceding fiscal year, except that the limita-

1	tion under this clause may not result in a
2	grant pursuant to paragraph (1) for a fis-
3	cal year that is less than the minimum
4	amount that applies to the State under such
5	paragraph for such fiscal year.
6	"(ii) Use of amounts involved.—
7	For each of the fiscal years 2007 through
8	2009, amounts available as a result of the
9	limitation under clause (i) shall be made
10	available by the Secretary as additional
11	amounts for grants pursuant to section
12	2620, subject to subparagraph (H)."; and
13	(4) by redesignating subparagraph (I) as sub-
14	paragraph (F).
15	(c) Separate ADAP Grants.—Section
16	2618(a)(2)(G) of the Public Health Service Act (42 U.S.C.
17	300 ff- 28(a)(2)(G)), as redesignated by subsection (b)(4) of
18	this section, is amended—
19	(1) in clause (i)—
20	(A) in the matter preceding subclause (I),
21	by striking "section 2677" and inserting "section
22	2623";
23	(B) in subclause (II), by striking the period
24	at the end and inserting a semicolon; and

1	(C) by adding after and below subclause
2	(II) the following:
3	"which product shall then, as applicable, be
4	increased under subparagraph (H).";
5	(2) in clause (ii)—
6	(A) by striking subclauses (I) through (III)
7	and inserting the following:
8	"(I) IN GENERAL.—From
9	amounts made available under sub-
10	clause (V), the Secretary shall award
11	supplemental grants to States described
12	in subclause (II) to enable such States
13	to purchase and distribute to eligible
14	individuals under section 2616(b)
15	pharmaceutical therapeutics described
16	under subsections (c)(2) and (e) of such
17	section.
18	"(II) Eligible states.—For
19	purposes of subclause (I), a State shall
20	be an eligible State if the State did not
21	have unobligated funds subject to re-
22	allocation under section 2618(d) in the
23	previous fiscal year and, in accordance
24	with criteria established by the Sec-
25	retary, demonstrates a severe need for

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a grant under this clause. For purposes of determining severe need, the Secretary shall consider eligibility standards, formulary composition, the number of eligible individuals to whom a State is unable to provide therapeutics described in section 2616(a), and an unanticipated increase of eligible individuals with HIV/AIDS.

"(III) State requirements.— The Secretary may not make a grant to a State under this clause unless the State agrees that the State will make available (directly or through donations of public or private entities) non-Federal contributions toward the activities to be carried out under the grant in an amount equal to \$1 for each \$4 of Federal funds provided in the grant, except that the Secretary may waive this subclause if the State has otherwise fully complied with section 2617(d) with respect to the grant year involved. The provisions of this subclause shall apply to States that are

1	not required to comply with such sec-
2	$tion\ 2617(d)$.".
3	(B) in subclause (IV), by moving the sub-
4	clause two ems to the left;
5	(C) in subclause (V), by striking "3 per-
6	cent" and inserting "5 percent"; and
7	(D) by striking subclause (VI); and
8	(3) by adding at the end the following clause:
9	"(iii) Code-based states; limita-
10	TION ON INCREASE IN FORMULA GRANT.—
11	The limitation under subparagraph $(E)(i)$
12	applies to grants pursuant to clause (i) of
13	this subparagraph to the same extent and in
14	the same manner as such limitation applies
15	to grants pursuant to paragraph (1), except
16	that the reference to minimum grants does
17	not apply for purposes of this clause.
18	Amounts available as a result of the limita-
19	tion under the preceding sentence shall be
20	made available by the Secretary as addi-
21	tional amounts for grants under clause (ii)
22	of this subparagraph.".
23	(d) Hold Harmless.—Section 2618(a)(2) of the Pub-
24	lic Health Service Act (42 U.S.C. 300ff-28(a)(2)). as

1	amended by subsection (b)(4) of this section, is amended
2	by adding at the end the following subparagraph:
3	"(H) Increase in Formula Grants.—
4	"(i) Assurance of amount.—
5	"(I) General rule.—For fiscal
6	year 2007, the Secretary shall ensure,
7	subject to clauses (ii) through (iv), that
8	the total for a State of the grant pursu-
9	ant to paragraph (1) and the grant
10	pursuant to subparagraph (G) is not
11	less than 95 percent of such total for
12	the State for fiscal year 2006.
13	"(II) Rule of construction.—
14	With respect to the application of sub-
15	clause (I), the 95 percent requirement
16	under such subclause shall apply with
17	respect to each grant awarded under
18	paragraph (1) and with respect to each
19	grant awarded under subparagraph
20	(G).
21	"(ii) Fiscal year 2007.—For pur-
22	poses of clause (i) as applied for fiscal year
23	2007, the references in such clause to sub-
24	paragraph (G) are deemed to be references

1	to subparagraph (I) as such subparagraph
2	was in effect for fiscal year 2006.
3	"(iii) Fiscal years 2008 and 2009.—
4	For each of the fiscal years 2008 and 2009,
5	the Secretary shall ensure that the total for
6	a State of the grant pursuant to paragraph
7	(1) and the grant pursuant to subpara-
8	graph (G) is not less than 100 percent of
9	such total for the State for fiscal year 2007.
10	"(iv) Source of funds for in-
11	CREASE.—
12	"(I) IN GENERAL.—From the
13	amount reserved under section
14	2623(b)(2) for a fiscal year, and from
15	amounts available for such section pur-
16	suant to subsection (d) of this section,
17	the Secretary shall make available such
18	amounts as may be necessary to com-
19	ply with clause (i).
20	"(II) Pro rata reduction.—If
21	the amounts referred to in subclause
22	(I) for a fiscal year are insufficient to
23	fully comply with clause (i) for the
24	year, the Secretary, in order to provide
25	the additional funds necessary for such

1	compliance, shall reduce on a pro rata
2	basis the amount of each grant pursu-
3	ant to paragraph (1) for the fiscal
4	year, other than grants for States for
5	which increases under clause (i) apply
6	and other than States described in
7	paragraph (1)(A)(i)(I). A reduction
8	under the preceding sentence may not
9	be made in an amount that would re-
10	sult in the State involved becoming eli-
11	gible for such an increase.
12	"(v) Applicability.—This paragraph
13	may not be construed as having any appli-
14	cability after fiscal year 2009.".
15	(e) Administrative Expenses; Clinical Quality
16	Management.—Section 2618(b) of the Public Health Serv-
17	ice Act (42 U.S.C. 300ff-28(b)) is amended—
18	(1) by redesignating paragraphs (2) through (7)
19	as paragraphs (1) through (6);
20	(2) in paragraph (2) (as so redesignated)—
21	(A) by striking "paragraph (5)" and insert-
22	ing "paragraph (4)"; and
23	(B) by striking "paragraph (6)" and insert-
24	ing "paragraph (5)";
25	(3) in paragraph (3) (as so redesignated)—

1	(A) by amending subparagraph (A) to read
2	as follows:
3	"(A) In general.—Subject to paragraph
4	(4,) and except as provided in paragraph (5), a
5	State may not use more than 10 percent of
6	amounts received under a grant awarded under
7	section 2611 for administration.";
8	(B) by redesignating subparagraphs (B)
9	and (C) as subparagraphs (C) and (D), respec-
10	tively;
11	(C) by inserting after subparagraph (A) the
12	following:
13	"(B) Allocations.—In the case of entities
14	and subcontractors to which a State allocates
15	amounts received by the State under a grant
16	under section 2611, the State shall ensure that,
17	of the aggregate amount so allocated, the total of
18	the expenditures by such entities for administra-
19	tive expenses does not exceed 10 percent (without
20	regard to whether particular entities expend
21	more than 10 percent for such expenses).";
22	(D) in subparagraph (C) (as so redesig-
23	nated), by inserting before the period the fol-
24	lowing: ", including a clinical quality manage-
25	ment program under subparagraph (E)"; and

1	(E) by adding at the end the following:
2	"(E) CLINICAL QUALITY MANAGEMENT.—
3	"(i) Requirement.—Each State that
4	receives a grant under section 2611 shall
5	provide for the establishment of a clinical
6	quality management program to assess the
7	extent to which HIV health services pro-
8	vided to patients under the grant are con-
9	sistent with the most recent Public Health
10	Service guidelines for the treatment of HIV/
11	AIDS and related opportunistic infection,
12	and as applicable, to develop strategies for
13	ensuring that such services are consistent
14	with the guidelines for improvement in the
15	access to and quality of HIV health services.
16	"(ii) Use of funds.—
17	"(I) IN GENERAL.—From
18	amounts received under a grant
19	awarded under section 2611 for a fis-
20	cal year, a State may use for activities
21	associated with the clinical quality
22	management program required in
23	clause (i) not to exceed the lesser of—
24	"(aa) 5 percent of amounts
25	received under the grant; or

1	"(bb) \$3,000,000.
2	"(II) RELATION TO LIMITATION
3	ON ADMINISTRATIVE EXPENSES.—The
4	costs of a clinical quality management
5	program under clause (i) may not be
6	considered administrative expenses for
7	purposes of the limitation established
8	in subparagraph (A).";
9	(4) in paragraph (4) (as so redesignated)—
10	(A) by striking "paragraph (6)" and insert-
11	ing "paragraph (5)"; and
12	(B) by striking "paragraphs (3) and (4)"
13	and inserting "paragraphs (2) and (3)"; and
14	(5) in paragraph (5) (as so redesignated), by
15	striking "paragraphs (3)" and all that follows
16	through "(5)," and inserting the following: "para-
17	graphs (2) and (3), may, notwithstanding paragraphs
18	(2) through (4),".
19	(f) Reallocation for Supplemental Grants.—
20	Section 2618(d) of the Public Health Service Act (42 U.S.C.
21	300ff-28(d)) is amended to read as follows:
22	"(d) Reallocation.—Any portion of a grant made
23	to a State under section 2611 for a fiscal year that has
24	not been obligated as described in subsection (c) ceases to
25	be available to the State and shall be made available by

1	the Secretary for grants under section 2620, in addition
2	to amounts made available for such grants under section
3	2623(b)(2).".
4	(g) Definitions; Other Technical Amend-
5	MENTS.—Section 2618(a) of the Public Health Service Act
6	(42 U.S.C. 300ff–28(a)) is amended—
7	(1) in paragraph (1), in the matter preceding
8	subparagraph (A), by striking "section 2677" and in-
9	serting "section 2623";
10	(2) in paragraph $(1)(A)$ —
11	(A) in the matter preceding clause (i), by
12	striking "each of the several States and the Dis-
13	trict of Columbia" and inserting "each of the 50
14	States, the District of Columbia, Guam, and the
15	Virgin Islands (referred to in this paragraph as
16	a 'covered State')"; and
17	(B) in clause (i)—
18	(i) in subclause (I), by striking "State
19	or District" and inserting "covered State";
20	and
21	(ii) in subclause (II)—
22	(I) by striking "State or District"
23	and inserting "covered State"; and
24	(II) by inserting "and" after the
25	semicolon; and

1	(3) in paragraph $(1)(B)$, by striking "each terri-
2	tory of the United States, as defined in paragraph
3	(3)," and inserting "each territory other than Guam
4	and the Virgin Islands";
5	(4) in paragraph $(2)(C)(i)$, by striking "or terri-
6	tory"; and
7	(5) by striking paragraph (3).
8	SEC. 204. ADDITIONAL AMENDMENTS TO SUBPART I OF
9	PART B.
10	(a) References to Part B.—Subpart I of part B
11	of title XXVI of the Public Health Service Act (42 U.S.C.
12	300ff-21 et seq.) is amended by striking "this part" each
13	place such term appears and inserting "section 2611".
14	(b) Hepatitis.—Section 2614(a)(3) of the Public
15	Health Service Act (42 U.S.C. 300ff–24(a)(3)) is amended
16	by inserting ", including specialty care and vaccinations
17	for hepatitis co-infection," after "health services".
18	(c) Application for Grant.—
19	(1) Coordination.—Section 2617(b) of the Pub-
20	lic Health Service Act (42 U.S.C. 300ff-27(b)) is
21	amended—
22	(A) by redesignating paragraphs (4)
23	through (6) as paragraphs (5) through (7), re-
24	spectively;

1	(B) by inserting after paragraph (3), the
2	following:
3	"(4) the designation of a lead State agency that
4	shall—
5	"(A) administer all assistance received
6	under this part;
7	"(B) conduct the needs assessment and pre-
8	pare the State plan under paragraph (3);
9	"(C) prepare all applications for assistance
10	under this part;
11	"(D) receive notices with respect to pro-
12	grams under this title;
13	"(E) every 2 years, collect and submit to the
14	Secretary all audits, consistent with Office of
15	Management and Budget circular A133, from
16	grantees within the State, including audits re-
17	garding funds expended in accordance with this
18	part; and
19	"(F) carry out any other duties determined
20	appropriate by the Secretary to facilitate the co-
21	ordination of programs under this title.";
22	(C) in paragraph (5) (as so redesignated)—
23	(i) in subparagraph (E), by striking
24	"and" at the end; and

1	(ii) by inserting after subparagraph
2	(F) the following:
3	"(G) includes key outcomes to be measured
4	by all entities in the State receiving assistance
5	under this title; and"; and
6	(D) in paragraph (7) (as so redesignated),
7	in subparagraph (A)—
8	(i) by striking "paragraph (5)" and
9	inserting "paragraph (6)"; and
10	(ii) by striking "paragraph (4)" and
11	inserting "paragraph (5)".
12	(2) Native american representation.—Sec-
13	tion 2617(b)(6) of the Public Health Service Act, as
14	redesignated by paragraph (1)(A) of this subsection,
15	is amended by inserting before "representatives of
16	grantees" the following: "members of a Federally rec-
17	ognized Indian tribe as represented in the State,".
18	(3) Payer of last resort.—Section
19	2617(b)(7)(F)(ii) of the Public Health Service Act, as
20	redesignated by paragraph (1)(A) of this subsection,
21	is amended by inserting before the semicolon the fol-
22	lowing: "(except for a program administered by or
23	providing the services of the Indian Health Service)".

1	(d) Matching Funds; Applicability of Require-
2	MENT.—Section 2617(d)(3) of the Public Health Service Act
3	(42 U.S.C. 300ff–27(d)(3)) is amended—
4	(1) in subparagraph (A), by striking "acquired
5	immune deficiency syndrome" and inserting "HIV/
6	AIDS"; and
7	(2) in subparagraph (C), by striking "acquired
8	immune deficiency syndrome" and inserting "HIV/
9	AIDS".
10	SEC. 205. SUPPLEMENTAL GRANTS ON BASIS OF DEM-
11	ONSTRATED NEED.
12	Subpart I of part B of title XXVI of the Public Health
13	Service Act (42 U.S.C. 300ff–21 et seq.) is amended—
14	(1) by redesignating section 2620 as section
15	2621; and
16	(2) by inserting after section 2619 the following:
17	"SEC. 2620. SUPPLEMENTAL GRANTS.
18	"(a) In General.—For the purpose of providing serv-
19	ices described in section 2612(a), the Secretary shall make
20	grants to States—
21	"(1) whose applications under section 2617 have
22	demonstrated the need in the State, on an objective
23	and quantified basis, for supplemental financial as-
24	sistance to provide such services; and

1	"(2) that did not, for the most recent grant year
2	pursuant to section $2618(a)(1)$ or $2618(a)(2)(G)(i)$ for
3	which data is available, have more than 2 percent of
4	grant funds under such sections canceled or covered
5	by any waivers under section 2622(c).
6	"(b) Demonstrated Need.—The factors considered
7	by the Secretary in determining whether an eligible area
8	has a demonstrated need for purposes of subsection (a)(1)
9	may include any or all of the following:
10	"(1) The unmet need for such services, as deter-
11	mined under section 2617(b).
12	"(2) An increasing need for HIV/AIDS-related
13	services, including relative rates of increase in the
14	number of cases of HIV/AIDS.
15	"(3) The relative rates of increase in the number
16	of cases of HIV/AIDS within new or emerging sub-
17	populations.
18	"(4) The current prevalence of HIV/AIDS.
19	"(5) Relevant factors related to the cost and com-
20	plexity of delivering health care to individuals with
21	HIV/AIDS in the eligible area.
22	"(6) The impact of co-morbid factors, including
23	co-occurring conditions, determined relevant by the
24	Secretary.
25	"(7) The prevalence of homelessness.

1	"(8) The prevalence of individuals described				
2	under section $2602(b)(2)(M)$.				
3	"(9) The relevant factors that limit access to				
4	health care, including geographic variation, adequacy				
5	of health insurance coverage, and language barriers.				
6	"(10) The impact of a decline in the amount re-				
7	ceived pursuant to section 2618 on services available				
8	to all individuals with HIV/AIDS identified and eli-				
9	gible under this title.				
10	"(c) Priority in Making Grants.—The Secretary				
11	shall provide funds under this section to a State to address				
12	the decline in services related to the decline in the amounts				
13	received pursuant to section 2618 consistent with the grant				
14	award to the State for fiscal year 2006, to the extent that				
15	the factor under subsection (b)(10) (relating to a decline				
16	in funding) applies to the State.				
17	"(d) Report on the Awarding of Supplemental				
18	Funds.—Not later than 45 days after the awarding of sup-				
19	plemental funds under this section, the Secretary shall sub-				
20	mit to Congress a report concerning such funds. Such report				
21	shall include information detailing—				
22	"(1) the total amount of supplemental funds				
23	available under this section for the year involved;				

1	"(2) the amount of supplemental funds used in
2	accordance with the hold harmless provisions of sec-
3	$tion \ 2618(a)(2);$
4	"(3) the amount of supplemental funds disbursed
5	pursuant to subsection (c);
6	"(4) the disbursement of the remainder of the
7	supplemental funds after taking into account the uses
8	described in paragraphs (2) and (3); and
9	"(5) the rationale used for the amount of funds
10	disbursed as described under paragraphs (2), (3), and
11	(4).
12	"(e) Core Medical Services.—The provisions of
13	section 2612(b) apply with respect to a grant under this
14	section to the same extent and in the same manner as such
15	provisions apply with respect to a grant made pursuant
16	to section $2618(a)(1)$.
17	"(f) Applicability of Grant Authority.—The au-
18	thority to make grants under this section applies beginning
19	with the first fiscal year for which amounts are made avail-
20	able for such grants under section $2623(b)(1)$.".
21	SEC. 206. EMERGING COMMUNITIES.
22	Section 2621 of the Public Health Service Act, as re-
23	designated by section 205(1) of this Act, is amended—

1	(1) in the heading for the section, by striking
2	"SUPPLEMENTAL GRANTS" and inserting
3	"EMERGING COMMUNITIES";
4	(2) in subsection (b)—
5	(A) in paragraph (2), by striking "and" at
6	$the\ end;$
7	(B) by redesignating paragraph (3) as
8	paragraph (4); and
9	(C) by inserting after paragraph (2) the fol-
0	lowing:
1	"(3) agree that the grant will be used to provide
12	funds directly to emerging communities in the State,
13	separately from other funds under this title that are
14	provided by the State to such communities; and".
15	(3) by striking subsections (d) and (e) and in-
16	serting the following:
17	"(d) Definitions of Emerging Community.—For
18	purposes of this section, the term 'emerging community'
19	means a metropolitan area (as defined in section 2607) for
20	which there has been reported to and confirmed by the Di-
21	rector of the Centers for Disease Control and Prevention a
22	cumulative total of at least 500, but fewer than 1,000, cases
23	of AIDS during the most recent period of 5 calendar years
24	for which such data are available.

1	"(e) Continued Status as Emerging Commu-
2	NITY.—Notwithstanding any other provision of this section,
3	a metropolitan area that is an emerging community for a
4	fiscal year continues to be an emerging community until
5	the metropolitan area fails, for three consecutive fiscal
6	years—
7	"(1) to meet the requirements of subsection (d);
8	and
9	"(2) to have a cumulative total of 750 or more
10	living cases of AIDS (reported to and confirmed by
11	the Director of the Centers for Disease Control and
12	Prevention) as of December 31 of the most recent cal-
13	endar year for which such data is available.
14	"(f) DISTRIBUTION.—The amount of a grant under
15	subsection (a) for a State for a fiscal year shall be an
16	amount equal to the product of—
17	"(1) the amount available under section
18	2623(b)(1) for the fiscal year; and
19	"(2) a percentage equal to the ratio constituted
20	by the number of living cases of HIV/AIDS in emerg-
21	ing communities in the State to the sum of the respec-
22	tive numbers of such cases in such communities for
23	all States.".

1	SEC. 207.	TIMEFRAME	FOR	ORLIGATION	AND	EXPENDITURE
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- 2 **OF GRANT FUNDS.**
- 3 Subpart I of part B of title XXVI of the Public Health
- 4 Service Act (42 U.S.C. 300ff-21 et seq.), as amended by
- 5 section 205, is further amended by adding at the end the
- 6 following:

7 "SEC. 2622. TIMEFRAME FOR OBLIGATION AND EXPENDI-

- 8 TURE OF GRANT FUNDS.
- 9 "(a) Obligation by End of Grant Year.—Effective
- 10 for fiscal year 2007 and subsequent fiscal years, funds from
- 11 a grant award made to a State for a fiscal year pursuant
- 12 to section 2618(a)(1) or 2618(a)(2)(G), or under section
- 13 2620 or 2621, are available for obligation by the State
- 14 through the end of the one-year period beginning on the date
- 15 in such fiscal year on which funds from the award first
- 16 become available to the State (referred to in this section as
- 17 the 'grant year for the award'), except as provided in sub-
- 18 section (c)(1).
- 19 "(b) Supplemental Grants; Cancellation of Un-
- 20 OBLIGATED BALANCE OF GRANT AWARD.—Effective for fis-
- 21 cal year 2007 and subsequent fiscal years, if a grant award
- 22 made to a State for a fiscal year pursuant to section
- 23 2618(a)(2)(G)(ii), or under section 2620 or 2621, has an
- 24 unobligated balance as of the end of the grant year for the
- 25 *award*—

- 1 "(1) the Secretary shall cancel that unobligated 2 balance of the award, and shall require the State to 3 return any amounts from such balance that have been 4 disbursed to the State; and
- 5 "(2) the funds involved shall be made available 6 by the Secretary as additional amounts for grants 7 pursuant to section 2620 for the first fiscal year be-8 ginning after the fiscal year in which the Secretary 9 obtains the information necessary for determining 10 that the balance is required under paragraph (1) to 11 be canceled, except that the availability of the funds 12 for such grants is subject to section 2618(a)(2)(H) as 13 applied for such year.
- 14 "(c) Formula Grants; Cancellation of Unobli-15 gated Balance of Grant Award; Waiver Permitting 16 Carryover.—
- 17 "(1) In General.—Effective for fiscal year 2007 18 and subsequent fiscal years, if a grant award made 19 to a State for a fiscal year pursuant to section 20 2618(a)(1) or 2618(a)(2)(G)(i) has an unobligated 21 balance as of the end of the grant year for the award, 22 the Secretary shall cancel that unobligated balance of 23 the award, and shall require the State to return any 24 amounts from such balance that have been disbursed 25 to the State, unless—

1	"(A) before the end of the grant year, the
2	State submits to the Secretary a written applica-
3	tion for a waiver of the cancellation, which ap-
4	plication includes a description of the purposes
5	for which the State intends to expend the funds
6	involved; and
7	"(B) the Secretary approves the waiver.
8	"(2) Expenditure by end of carryover
9	YEAR.—With respect to a waiver under paragraph (1)
10	that is approved for a balance that is unobligated as
11	of the end of a grant year for an award:
12	"(A) The unobligated funds are available
13	for expenditure by the State involved for the one-
14	year period beginning upon the expiration of the
15	grant year (referred to in this section as the 'car-
16	ryover year').
17	"(B) If the funds are not expended by the
18	end of the carryover year, the Secretary shall
19	cancel that unexpended balance of the award,
20	and shall require the State to return any
21	amounts from such balance that have been dis-
22	bursed to the State.
23	"(3) Use of cancelled balances.—In the
24	case of any balance of a grant award that is cancelled
25	under paragraph (1) or (2)(B), the grant funds in-

volved shall be made available by the Secretary as additional amounts for grants under section 2620 for the first fiscal year beginning after the fiscal year in which the Secretary obtains the information necessary for determining that the balance is required under such paragraph to be canceled, except that the availability of the funds for such grants is subject to section 2618(a)(2)(H) as applied for such year.

"(4) Corresponding reduction in future grant.—

"(A) IN GENERAL.—In the case of a State for which a balance from a grant award made pursuant to section 2618(a)(1) or 2618(a)(2)(G)(i) is unobligated as of the end of the grant year for the award—

"(i) the Secretary shall reduce, by the same amount as such unobligated balance, the amount of the grant under such section for the first fiscal year beginning after the fiscal year in which the Secretary obtains the information necessary for determining that such balance was unobligated as of the end of the grant year (which requirement for a reduction applies without regard to whether a waiver under paragraph (1) has

1	been approved with respect to such balance);
2	and
3	"(ii) the grant funds involved in such
4	reduction shall be made available by the
5	Secretary as additional funds for grants
6	under section 2620 for such first fiscal year,
7	subject to section $2618(a)(2)(H)$;
8	except that this subparagraph does not apply to
9	the State if the amount of the unobligated bal-
10	ance was 2 percent or less.
11	"(B) Relation to increases in grant.—
12	A reduction under subparagraph (A) for a State
13	for a fiscal year may not be taken into account
14	in applying section $2618(a)(2)(H)$ with respect
15	to the State for the subsequent fiscal year.
16	"(d) Treatment of Drug Rebates.—For purposes
17	of this section, funds that are drug rebates referred to in
18	section 2616(g) may not be considered part of any grant
19	award referred to in subsection (a).".
20	SEC. 208. AUTHORIZATION OF APPROPRIATIONS FOR SUB-
21	PART I OF PART B.
22	Subpart I of part B of title XXVI of the Public Health
23	Service Act (42 U.S.C. 300ff-21 et seq.), as amended by
24	section 207, is further amended by adding at the end the
25	following:

1 "SEC. 2623. AUTHORIZATION OF APPROPRIATIONS.

- "(a) IN GENERAL.—For the purpose of carrying out this subpart, there are authorized to be appropriated \$1,195,500,000 for fiscal year 2007, \$1,239,500,000 for fiscal year 2008, and \$1,285,200,000 for fiscal year 2009. Amounts appropriated under the preceding sentence for a fiscal year are available for obligation by the Secretary until the end of the second succeeding fiscal year.
- 9 "(b) Reservation of Amounts.—
- "(1) Emerging communities.—Of the amount appropriated under subsection (a) for a fiscal year, the Secretary shall reserve \$5,000,000 for grants under section 2621.

14 "(2) Supplemental grants.—

"(A) In General.—Of the amount appropriated under subsection (a) for a fiscal year in excess of the 2006 adjusted amount, the Secretary shall reserve 1/3 for grants under section 2620, except that the availability of the reserved funds for such*grants* issubject tosection 2618(a)(2)(H) as applied for such year, and except that any amount appropriated exclusively for carrying out section 2616 (and, accordingly, distributed under section 2618(a)(2)(G) is not subject to this subparagraph.

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- 1 "(B) 2006 ADJUSTED AMOUNT.—For pur-2 poses of subparagraph (A), the term '2006 ad-3 justed amount' means the amount appropriated 4 for fiscal year 2006 under section 2677(b) (as 5 such section was in effect for such fiscal year), 6 excluding any amount appropriated for such 7 year exclusively for carrying out section 2616 (and, accordingly, distributed under section 8 9 2618(a)(2)(I), as so in effect).".
- 10 SEC. 209. EARLY DIAGNOSIS GRANT PROGRAM.
- 11 Section 2625 of the Public Health Service Act (42
- 12 U.S.C. 300ff-33) is amended to read as follows:
- 13 "SEC. 2625. EARLY DIAGNOSIS GRANT PROGRAM.
- 14 "(a) In General.—In the case of States whose laws
- 15 or regulations are in accordance with subsection (b), the
- 16 Secretary, acting through the Centers for Disease Control
- 17 and Prevention, shall make grants to such States for the
- 18 purposes described in subsection (c).
- 19 "(b) Description of Compliant States.—For pur-
- 20 poses of subsection (a), the laws or regulations of a State
- 21 are in accordance with this subsection if, under such laws
- 22 or regulations (including programs carried out pursuant
- 23 to the discretion of State officials), both of the policies de-
- 24 scribed in paragraph (1) are in effect, or both of the policies
- 25 described in paragraph (2) are in effect, as follows:

1	"(1)(A) Voluntary opt-out testing of pregnant
2	women.
3	"(B) Universal testing of newborns.
4	"(2)(A) Voluntary opt-out testing of clients at
5	sexually transmitted disease clinics.
6	"(B) Voluntary opt-out testing of clients at sub-
7	stance abuse treatment centers.
8	The Secretary shall periodically ensure that the applicable
9	policies are being carried out and recertify compliance.
10	"(c) USE OF FUNDS.—A State may use funds provided
11	under subsection (a) for HIV/AIDS testing (including rapid
12	testing), prevention counseling, treatment of newborns ex-
13	posed to HIV/AIDS, treatment of mothers infected with
14	HIV/AIDS, and costs associated with linking those diag-
15	nosed with HIV/AIDS to care and treatment for HIV/
16	AIDS.
17	"(d) APPLICATION.—A State that is eligible for the
18	grant under subsection (a) shall submit an application to
19	the Secretary, in such form, in such manner, and con-
20	taining such information as the Secretary may require.
21	"(e) Limitation on Amount of Grant.—A grant
22	under subsection (a) to a State for a fiscal year may not

23 be made in an amount exceeding \$10,000,000.

1	"(f) Rule of Construction.—Nothing in this sec-
2	tion shall be construed to pre-empt State laws regarding
3	HIV/AIDS counseling and testing.
4	"(g) Definitions.—In this section:
5	"(1) The term 'voluntary opt-out testing' means
6	HIV/AIDS testing—
7	"(A) that is administered to an individual
8	seeking other health care services; and
9	"(B) in which—
10	"(i) pre-test counseling is not required
11	but the individual is informed that the in-
12	dividual will receive an HIV/AIDS test and
13	the individual may opt out of such testing;
14	and
15	"(ii) for those individuals with a posi-
16	tive test result, post-test counseling (includ-
17	ing referrals for care) is provided and con-
18	fidentiality is protected.
19	"(2) The term 'universal testing of newborns'
20	means HIV/AIDS testing that is administered within
21	48 hours of delivery to—
22	"(A) all infants born in the State; or
23	"(B) all infants born in the State whose
24	mother's HIV/AIDS status is unknown at the
25	time of delivery.

1	"(h) Authorization of Appropriations.—Of the
2	funds appropriated annually to the Centers for Disease
3	Control and Prevention for HIV/AIDS prevention activi-
4	ties, \$30,000,000 shall be made available for each of the fis-
5	cal years 2007 through 2009 for grants under subsection
6	(a), of which \$20,000,000 shall be made available for grants
7	to States with the policies described in subsection (b)(1),
8	and \$10,000,000 shall be made available for grants to
9	States with the policies described in subsection (b)(2).
10	Funds provided under this section are available until ex-
11	pended.".
12	SEC. 210. CERTAIN PARTNER NOTIFICATION PROGRAMS,
13	AUTHORIZATION OF APPROPRIATIONS.
14	Section 2631(d) of the Public Health Service Act (42
15	U.S.C. 300ff-38(d)) is amended by striking "there are" and
16	all that follows and inserting the following: "there is author-
17	ized to be appropriated \$10,000,000 for each of the fiscal
18	years 2007 through 2009.".
19	TITLE III—EARLY
20	INTERVENTION SERVICES
21	SEC. 301. ESTABLISHMENT OF PROGRAM; CORE MEDICAL
22	SERVICES.
23	(a) In General.—Section 2651 of the Public Health
24	Service Act (42 U.S.C. 300ff-51) is amended to read as fol-
25	lows:

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1	"SEC. 2651. ESTABLISHMENT OF A PROGRAM.
2	"(a) In General.—For the purposes described in sub-
3	section (b), the Secretary, acting through the Administrator
4	of the Health Resources and Services Administration, may
5	make grants to public and nonprofit private entities speci-
6	fied in section $2652(a)$.
7	"(b) Requirements.—
8	"(1) In general.—The Secretary may not make
9	a grant under subsection (a) unless the applicant for
10	the grant agrees to expend the grant only for—
11	"(A) core medical services described in sub-
12	section (c);
13	"(B) support services described in sub-
14	section (d); and
15	"(C) administrative expenses as described
16	in section $2664(g)(3)$.
17	"(2) Early intervention services.—An ap-
18	plicant for a grant under subsection (a) shall expend
19	not less than 50 percent of the amount received under
20	the grant for the services described in subparagraphs
21	(B) through (E) of subsection (e)(1) for individuals
22.	with HIV/AIDS

25 "(1) IN GENERAL.—With respect to a grant 26 under subsection (a) to an applicant for a fiscal year,

"(c) Required Funding for Core Medical Serv-

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24 *ICES*.—

1	the applicant shall, of the portion of the grant re-
2	maining after reserving amounts for purposes of
3	paragraphs (3) and (5) of section 2664(g), use not
4	less than 75 percent to provide core medical services
5	that are needed in the area involved for individuals
6	with HIV/AIDS who are identified and eligible under
7	this title (including services regarding the co-occur-
8	ring conditions of the individuals).
9	"(2) Waiver.—
10	"(A) The Secretary shall waive the applica-
11	tion of paragraph (1) with respect to an appli-
12	cant for a grant if the Secretary determines that,
13	within the service area of the applicant—
14	"(i) there are no waiting lists for
15	AIDS Drug Assistance Program services
16	under section 2616; and
17	"(ii) core medical services are available
18	to all individuals with HIV/AIDS identi-
19	fied and eligible under this title.
20	"(B) Notification of waiver status.—
21	When informing an applicant that a grant
22	under subsection (a) is being made for a fiscal
23	year, the Secretary shall inform the applicant
24	whether a waiver under subparagraph (A) is in
25	effect for the fiscal year.

1	"(3) Core medical services.—For purposes of
2	this subsection, the term 'core medical services', with
3	respect to an individual with HIV/AIDS (including
4	the co-occurring conditions of the individual) means
5	the following services:
6	"(A) Outpatient and ambulatory health
7	services.
8	"(B) AIDS Drug Assistance Program treat-
9	ments under section 2616.
10	"(C) AIDS pharmaceutical assistance.
11	"(D) Oral health care.
12	"(E) Early intervention services described
13	in subsection (e).
14	"(F) Health insurance premium and cost
15	sharing assistance for low-income individuals in
16	accordance with section 2615.
17	"(G) Home health care.
18	"(H) Medical nutrition therapy.
19	"(I) Hospice services.
20	"(J) Home and community-based health
21	services as defined under section $2614(c)$.
22	"(K) Mental health services.
23	"(L) Substance abuse outpatient care.
24	"(M) Medical case management, including
25	treatment adherence services.

1	"(d) Support Services.—
2	"(1) In general.—For purposes of this section,
3	the term 'support services' means services, subject to
4	the approval of the Secretary, that are needed for in-
5	dividuals with HIV/AIDS to achieve their medical
6	outcomes (such as respite care for persons caring for
7	individuals with HIV/AIDS, outreach services, med-
8	ical transportation, linguistic services, and referrals
9	for health care and support services).
10	"(2) Definition of medical outcomes.—In
11	this section, the term 'medical outcomes' means those
12	outcomes affecting the HIV-related clinical status of
13	an individual with HIV/AIDS.
14	"(e) Specification of Early Intervention Serv-
15	ICES.—
16	"(1) In General.—The early intervention serv-
17	ices referred to in this section are—
18	"(A) counseling individuals with respect to
19	HIV/AIDS in accordance with section 2662;
20	"(B) testing individuals with respect to
21	HIV/AIDS, including tests to confirm the pres-
22	ence of the disease, tests to diagnose the extent of
23	the deficiency in the immune system, and tests
24	to provide information on appropriate thera-
25	neutic measures for preventing and treating the

1	deterioration of the immune system and for pre-
2	venting and treating conditions arising from
3	HIV/AIDS;
4	"(C) referrals described in paragraph (2);
5	"(D) other clinical and diagnostic services
6	regarding HIV/AIDS, and periodic medical eval-
7	uations of individuals with HIV/AIDS; and
8	"(E) providing the therapeutic measures de-
9	scribed in subparagraph (B).
10	"(2) Referrals.—The services referred to in
11	paragraph (1)(C) are referrals of individuals with
12	HIV/AIDS to appropriate providers of health and
13	support services, including, as appropriate—
14	"(A) to entities receiving amounts under
15	part A or B for the provision of such services;
16	"(B) to biomedical research facilities of in-
17	stitutions of higher education that offer experi-
18	mental treatment for such disease, or to commu-
19	nity-based organizations or other entities that
20	provide such treatment; or
21	"(C) to grantees under section 2671, in the
22	case of a pregnant woman.
23	"(3) Requirement of availability of all
24	EARLY INTERVENTION SERVICES THROUGH EACH
25	GRANTEE —

1	"(A) In General.—The Secretary may not
2	make a grant under subsection (a) unless the ap-
3	plicant for the grant agrees that each of the early
4	intervention services specified in paragraph (2)
5	will be available through the grantee. With re-
6	spect to compliance with such agreement, such a
7	grantee may expend the grant to provide the
8	early intervention services directly, and may ex-
9	pend the grant to enter into agreements with
10	public or nonprofit private entities, or private
11	for-profit entities if such entities are the only
12	available provider of quality HIV care in the
13	area, under which the entities provide the serv-
14	ices.
15	"(B) Other requirements.—Grantees de-
16	scribed in—
17	"(i) subparagraphs (A), (D), (E), and
18	(F) of section 2652(a)(1) shall use not less
19	than 50 percent of the amount of such a
20	grant to provide the services described in
21	subparagraphs (A), (B), (D), and (E) of
22	paragraph (1) directly and on-site or at
23	sites where other primary care services are

rendered; and

24

1	"(ii) subparagraphs (B) and (C) of
2	section 2652(a)(1) shall ensure the avail-
3	ability of early intervention services through
4	a system of linkages to community-based
5	primary care providers, and to establish
6	mechanisms for the referrals described in
7	paragraph (1)(C), and for follow-up con-
8	cerning such referrals.".
9	(b) Administrative Expenses; Clinical Quality
10	Management Program.—Section 2664(g) of the Public
11	Health Service Act (42 U.S.C. 300ff-64(g)) is amended—
12	(1) in paragraph (3), by amending the para-
13	graph to read as follows:
14	"(3) the applicant will not expend more than 10
15	percent of the grant for administrative expenses with
16	respect to the grant, including planning and evalua-
17	tion, except that the costs of a clinical quality man-
18	agement program under paragraph (5) may not be
19	considered administrative expenses for purposes of
20	such limitation;"; and
21	(2) in paragraph (5), by inserting "clinical" be-
22	fore "quality management".

1	SEC. 302. ELIGIBLE ENTITIES; PREFERENCES; PLANNING
2	AND DEVELOPMENT GRANTS.
3	(a) Minimum Qualification of Grantees.—Section
4	2652(a) of the Public Health Service Act (42 U.S.C. 300ff-
5	52(a)) is amended to read as follows:
6	"(a) Eligible Entities.—
7	"(1) In general.—The entities referred to in
8	section 2651(a) are public entities and nonprofit pri-
9	vate entities that are—
0	"(A) federally-qualified health centers under
11	section $1905(l)(2)(B)$ of the Social Security Act;
12	"(B) grantees under section 1001 (regarding
13	family planning) other than States;
14	"(C) comprehensive hemophilia diagnostic
15	and treatment centers;
16	"(D) rural health clinics;
17	"(E) health facilities operated by or pursu-
18	ant to a contract with the Indian Health Serv-
19	ice;
20	$``(F)\ community\mbox{-}based\ organizations,\ clin-$
21	ics, hospitals and other health facilities that pro-
22	vide early intervention services to those persons
23	infected with HIV/AIDS through intravenous
24	drug use; or
25	"(G) nonprofit private entities that provide
26	comprehensive primary care services to popu-

1	lations at risk of HIV/AIDS, including faith-
2	based and community-based organizations.
3	"(2) Underserved populations.—Entities de-
4	scribed in paragraph (1) shall serve underserved pop-
5	ulations which may include minority populations
6	and Native American populations, ex-offenders, indi-
7	viduals $with$ $comorbidities$ $including$ $hepatitis$ B or
8	C, mental illness, or substance abuse, low-income pop-
9	ulations, inner city populations, and rural popu-
10	lations.".
11	(b) Preferences in Making Grants.—Section 2653
12	of the Public Health Service Act (42 U.S.C. 300ff-53) is
13	amended—
14	(1) in subsection (b)(1)—
15	(A) in subparagraph (A), by striking "ac-
16	quired immune deficiency syndrome" and insert-
17	ing "HIV/AIDS"; and
18	(B) in subparagraph (D), by inserting be-
19	fore the semicolon the following: "and the num-
20	ber of cases of individuals co-infected with HIV/
21	AIDS and hepatitis B or C"; and
22	(2) in subsection (d)(2), by striking "special con-
23	sideration" and inserting "preference".

1	(c) Planning and Development Grants.—Section
2	2654(c) of the Public Health Service Act (42 U.S.C. 300ff-
3	54(c)) is amended—
4	(1) in paragraph (1)—
5	(A) in subparagraph (A), by striking
6	"HIV"; and
7	(B) in subparagraph (B), by striking
8	"HIV" and inserting "HIV/AIDS"; and
9	(2) in paragraph (3), by striking "or under-
10	served communities" and inserting "areas or to un-
11	derserved populations".
12	SEC. 303. AUTHORIZATION OF APPROPRIATIONS.
13	Section 2655 of the Public Health Service Act (42
14	U.S.C. 300ff-55) is amended by striking "such sums" and
15	all that follows through "2005" and inserting ",
16	\$218,600,000 for fiscal year 2007, \$226,700,000 for fiscal
17	year 2008, and \$235,100,000 for fiscal year 2009".
18	SEC. 304. CONFIDENTIALITY AND INFORMED CONSENT.
19	Section 2661 of the Public Health Service Act (42
20	U.S.C. 300ff-61) is amended to read as follows:
21	"SEC. 2661. CONFIDENTIALITY AND INFORMED CONSENT.
22	"(a) Confidentiality.—The Secretary may not make
23	a grant under this part unless, in the case of any entity
24	applying for a grant under section 2651, the entity agrees
25	to ensure that information regarding the receipt of early

- 1 intervention services pursuant to the grant is maintained
- 2 confidentially in a manner not inconsistent with applicable
- 3 *law*.
- 4 "(b) Informed Consent.—The Secretary may not
- 5 make a grant under this part unless the applicant for the
- 6 grant agrees that, in testing an individual for HIV/AIDS,
- 7 the applicant will test an individual only after the indi-
- 8 vidual confirms that the decision of the individual with re-
- 9 spect to undergoing such testing is voluntarily made.".
- 10 SEC. 305. PROVISION OF CERTAIN COUNSELING SERVICES.
- 11 Section 2662 of the Public Health Service Act (42
- 12 U.S.C. 300ff-62) is amended to read as follows:
- 13 "SEC. 2662. PROVISION OF CERTAIN COUNSELING SERV-
- 14 *ICES*.
- 15 "(a) Counseling of Individuals With Negative
- 16 Test Results.—The Secretary may not make a grant
- 17 under this part unless the applicant for the grant agrees
- 18 that, if the results of testing conducted for HIV/AIDS indi-
- 19 cate that an individual does not have such condition, the
- 20 applicant will provide the individual information,
- 21 including—
- 22 "(1) measures for prevention of, exposure to, and
- 23 transmission of HIV/AIDS, hepatitis B, hepatitis C,
- 24 and other sexually transmitted diseases;

1	"(2) the accuracy and reliability of results of
2	testing for HIV/AIDS, hepatitis B, and hepatitis C;
3	"(3) the significance of the results of such testing,
4	including the potential for developing AIDS, hepatitis
5	B, or hepatitis C;
6	"(4) the appropriateness of further counseling,
7	testing, and education of the individual regarding
8	HIV/AIDS and other sexually transmitted diseases;
9	"(5) if diagnosed with chronic hepatitis B or
10	hepatitis C co-infection, the potential of developing
11	hepatitis-related liver disease and its impact on HIV/
12	AIDS; and
13	"(6) information regarding the availability of
14	hepatitis B vaccine and information about hepatitis
15	treatments.
16	"(b) Counseling of Individuals With Positive
17	Test Results.—The Secretary may not make a grant
18	under this part unless the applicant for the grant agrees
19	that, if the results of testing for HIV/AIDS indicate that
20	the individual has such condition, the applicant will pro-
21	vide to the individual appropriate counseling regarding the
22	condition, including—
23	"(1) information regarding—

1	"(A) measures for prevention of, exposure
2	to, and transmission of HIV/AIDS, hepatitis B,
3	and hepatitis C;
4	"(B) the accuracy and reliability of results
5	of testing for HIV/AIDS, hepatitis B, and hepa-
6	titis C; and
7	"(C) the significance of the results of such
8	testing, including the potential for developing
9	AIDS, hepatitis B, or hepatitis C;
10	"(2) reviewing the appropriateness of further
11	counseling, testing, and education of the individual
12	regarding HIV/AIDS and other sexually transmitted
13	diseases; and
14	"(3) providing counseling—
15	"(A) on the availability, through the appli-
16	cant, of early intervention services;
17	"(B) on the availability in the geographic
18	area of appropriate health care, mental health
19	care, and social and support services, including
20	providing referrals for such services, as appro-
21	priate;
22	" $(C)(i)$ that explains the benefits of locating
23	and counseling any individual by whom the in-
24	fected individual may have been exposed to HIV/
25	AIDS, hepatitis B, or hepatitis C and any indi-

1	vidual whom the infected individual may have
2	exposed to HIV/AIDS, hepatitis B, or hepatitis
3	C; and
4	"(ii) that emphasizes it is the duty of in-
5	fected individuals to disclose their infected status
6	to their sexual partners and their partners in the
7	sharing of hypodermic needles; that provides ad-
8	vice to infected individuals on the manner in
9	which such disclosures can be made; and that
10	emphasizes that it is the continuing duty of the
11	individuals to avoid any behaviors that will ex-
12	pose others to HIV/AIDS, hepatitis B, or hepa-
13	titis C; and
14	"(D) on the availability of the services of
15	public health authorities with respect to locating
16	and counseling any individual described in sub-
17	paragraph (C);
18	"(4) if diagnosed with chronic hepatitis B or
19	hepatitis C co-infection, the potential of developing
20	hepatitis-related liver disease and its impact on HIV/
21	AIDS; and
22	"(5) information regarding the availability of
23	$hepatitis\ B\ vaccine.$
24	"(c) Additional Requirements Regarding Appro-
25	PRIATE COUNSELING.—The Secretary may not make a

- 1 grant under this part unless the applicant for the grant
- 2 agrees that, in counseling individuals with respect to HIV/
- 3 AIDS, the applicant will ensure that the counseling is pro-
- 4 vided under conditions appropriate to the needs of the indi-
- 5 viduals.
- 6 "(d) Counseling of Emergency Response Em-
- 7 PLOYEES.—The Secretary may not make a grant under this
- 8 part to a State unless the State agrees that, in counseling
- 9 individuals with respect to HIV/AIDS, the State will ensure
- 10 that, in the case of emergency response employees, the coun-
- 11 seling is provided to such employees under conditions ap-
- 12 propriate to the needs of the employees regarding the coun-
- 13 seling.
- 14 "(e) Rule of Construction Regarding Coun-
- 15 Seling Without Testing.—Agreements made pursuant to
- 16 this section may not be construed to prohibit any grantee
- 17 under this part from expending the grant for the purpose
- 18 of providing counseling services described in this section to
- 19 an individual who does not undergo testing for HIV/AIDS
- 20 as a result of the grantee or the individual determining that
- 21 such testing of the individual is not appropriate.".
- 22 SEC. 306. GENERAL PROVISIONS.
- 23 (a) Applicability of Certain Requirements.—
- 24 Section 2663 of the Public Health Service Act (42 U.S.C.
- 25 300ff-63) is amended by striking "will, without" and all

1	that follows through "be carried" and inserting "with funds
2	appropriated through this Act will be carried".
3	(b) Additional Required Agreements.—Section
4	2664(a) of the Public Health Service Act (42 U.S.C. 300ff-
5	64(a)) is amended—
6	(1) in paragraph (1)—
7	(A) in subparagraph (A), by striking "and"
8	at the end;
9	(B) in subparagraph (B), by striking "and"
10	at the end; and
11	(C) by adding at the end the following:
12	"(C) information regarding how the ex-
13	pected expenditures of the grant are related to
14	the planning process for localities funded under
15	part A (including the planning process described
16	in section 2602) and for States funded under
17	part B (including the planning process described
18	in section 2617(b)); and
19	"(D) a specification of the expected expendi-
20	tures and how those expenditures will improve
21	overall client outcomes, as described in the State
22	plan under section 2617(b);";
23	(2) in paragraph (2), by striking the period and
24	inserting a semicolon; and
25	(3) by adding at the end the following:

1	"(3) the applicant agrees to provide additional
2	documentation to the Secretary regarding the process
3	used to obtain community input into the design and
4	implementation of activities related to such grant;
5	and
6	"(4) the applicant agrees to submit, every 2
7	years, to the lead State agency under section
8	2617(b)(4) audits, consistent with Office of Manage-
9	ment and Budget circular A133, regarding funds ex-
10	pended in accordance with this title and shall include
11	necessary client level data to complete unmet need
12	calculations and Statewide coordinated statements of
13	need process.".
14	(c) Payer of Last Resort.—Section 2664(f)(1)(A)
15	of the Public Health Service Act (42 U.S.C. 300ff-
16	64(f)(1)(A)) is amended by inserting "(except for a program
17	administered by or providing the services of the Indian
18	Health Service)" before the semicolon.
19	TITLE IV—WOMEN, INFANTS,
20	CHILDREN, AND YOUTH
21	SEC. 401. WOMEN, INFANTS, CHILDREN, AND YOUTH.
22	Part D of title XXVI of the Public Health Service Act
23	(42 U.S.C. 300ff-71 et seq.) is amended to read as follows:

1	"PART D—WOMEN, INFANTS, CHILDREN, AND
2	YOUTH
3	"SEC. 2671. GRANTS FOR COORDINATED SERVICES AND AC-
4	CESS TO RESEARCH FOR WOMEN, INFANTS,
5	CHILDREN, AND YOUTH.
6	"(a) In General.—The Secretary, acting through the
7	Administrator of the Health Resources and Services Admin-
8	istration, shall award grants to public and nonprofit pri-
9	vate entities (including a health facility operated by or pur-
10	suant to a contract with the Indian Health Service) for the
11	purpose of providing family-centered care involving out-
12	patient or ambulatory care (directly or through contracts)
13	for women, infants, children, and youth with HIV/AIDS.
14	"(b) Additional Services for Patients and Fami-
15	LIES.—Funds provided under grants awarded under sub-
16	section (a) may be used for the following support services:
17	"(1) Family-centered care including case man-
18	agement.
19	"(2) Referrals for additional services including—
20	"(A) referrals for inpatient hospital serv-
21	ices, treatment for substance abuse, and mental
22	health services; and
23	"(B) referrals for other social and support
24	services, as appropriate.
25	"(3) Additional services necessary to enable the
26	patient and the family to participate in the program

1	established by the applicant pursuant to such sub-
2	section including services designed to recruit and re-
3	tain youth with HIV.
4	"(4) The provision of information and education
5	on opportunities to participate in HIV/AIDS-related
6	clinical research.
7	"(c) Coordination With Other Entities.—A
8	grant awarded under subsection (a) may be made only if
9	the applicant provides an agreement that includes the fol-
10	lowing:
11	"(1) The applicant will coordinate activities
12	under the grant with other providers of health care
13	services under this Act, and under title V of the So-
14	cial Security Act, including programs promoting the
15	reduction and elimination of risk of HIV/AIDS for
16	youth.
17	"(2) The applicant will participate in the state-
18	$wide\ coordinated\ statement\ of\ need\ under\ part\ B$
19	(where it has been initiated by the public health agen-
20	cy responsible for administering grants under part B)
21	and in revisions of such statement.
22	"(3) The applicant will every 2 years submit to
23	the lead State agency under section 2617(b)(4) audits
24	regarding funds expended in accordance with this

title and shall include necessary client-level data to

25

1	complete unmet need calculations and Statewide co-
2	ordinated statements of need process.
3	"(d) Administration; Application.—A grant may
4	only be awarded to an entity under subsection (a) if an
5	application for the grant is submitted to the Secretary and
6	the application is in such form, is made in such manner,
7	and contains such agreements, assurances, and information
8	as the Secretary determines to be necessary to carry out
9	this section. Such application shall include the following:
10	"(1) Information regarding how the expected ex-
11	penditures of the grant are related to the planning
12	process for localities funded under part A (including
13	the planning process outlined in section 2602) and for
14	States funded under part B (including the planning
15	process outlined in section 2617(b)).
16	"(2) A specification of the expected expenditures
17	and how those expenditures will improve overall pa-
18	tient outcomes, as outlined as part of the State plan
19	(under section 2617(b)) or through additional out-
20	come measures.
21	"(e) Annual Review of Programs; Evaluations.—
22	"(1) Review regarding access to and par-
23	TICIPATION IN PROGRAMS.—With respect to a grant
24	under subsection (a) for an entity for a fiscal year,
25	the Secretary shall, not later than 180 days after the

1	end of the fiscal year, provide for the conduct and
2	completion of a review of the operation during the
3	year of the program carried out under such subsection
4	by the entity. The purpose of such review shall be the
5	development of recommendations, as appropriate, for
6	improvements in the following:
7	"(A) Procedures used by the entity to allo-
8	cate opportunities and services under subsection
9	(a) among patients of the entity who are women,
10	infants, children, or youth.
11	"(B) Other procedures or policies of the en-
12	tity regarding the participation of such individ-
13	uals in such program.
14	"(2) Evaluations.——The Secretary shall, di-
15	rectly or through contracts with public and private
16	entities, provide for evaluations of programs carried
17	out pursuant to subsection (a).
18	"(f) Administrative Expenses.—
19	"(1) Limitation.—A grantee may not use more
20	than 10 percent of amounts received under a grant
21	awarded under this section for administrative ex-
22	penses.
23	"(2) CLINICAL QUALITY MANAGEMENT PRO-
24	GRAM.—A grantee under this section shall implement
25	a clinical quality management program to assess the

- 1 extent to which HIV health services provided to pa-2 tients under the grant are consistent with the most re-3 cent Public Health Service guidelines for the treat-4 ment of HIV/AIDS and related opportunistic infec-5 tion, and as applicable, to develop strategies for ensuring that such services are consistent with the 6 7 quidelines for improvement in the access to and qual-8 ity of HIV health services.
- "(g) Training and Technical Assistance.—From the amounts appropriated under subsection (i) for a fiscal year, the Secretary may use not more than 5 percent to provide, directly or through contracts with public and private entities (which may include grantees under subsection (a)), training and technical assistance to assist applicants and grantees under subsection (a) in complying with the requirements of this section.
- 17 "(h) Definitions.—In this section:
- "(1) ADMINISTRATIVE EXPENSES.—The term

 'administrative expenses' means funds that are to be

 used by grantees for grant management and monitoring activities, including costs related to any staff

 or activity unrelated to services or indirect costs.
- "(2) Indirect costs.—The term 'indirect costs'
 means costs included in a Federally negotiated indi rect rate.

1	"(3) Services.—The term 'services' means—
2	"(A) services that are provided to clients to
3	meet the goals and objectives of the program
4	under this section, including the provision of
5	professional, diagnostic, and therapeutic services
6	by a primary care provider or a referral to and
7	provision of specialty care; and
8	"(B) services that sustain program activity
9	and contribute to or help improve services under
10	subparagraph (A).
11	"(i) Authorization of Appropriations.—For the
12	purpose of carrying out this section, there are authorized
13	to be appropriated, \$71,800,000 for each of the fiscal years
14	2007 through 2009.".
15	SEC. 402. GAO REPORT.
16	Not later than 24 months after the date of enactment
17	of this Act, the Comptroller General of the Government Ac-
18	countability Office shall conduct an evaluation, and submit
19	to Congress a report, concerning the funding provided for
20	under part D of title XXVI of the Public Health Service
21	Act to determine—
22	(1) how funds are used to provide the adminis-
23	trative expenses, indirect costs, and services, as de-
24	fined in section 2671(h) of such title, for individuals
25	with HIV/AIDS;

1	(2) how funds are used to provide the adminis-
2	trative expenses, indirect costs, and services, as de-
3	fined in section 2671(h) of such title, to family mem-
4	bers of women, infants, children, and youth infected
5	with HIV/AIDS;
6	(3) how funds are used to provide family-cen-
7	tered care involving outpatient or ambulatory care
8	authorized under section 2671(a) of such title;
9	(4) how funds are used to provide additional
10	services authorized under section 2671(b) of such title;
11	and
12	(5) how funds are used to help identify HIV-
13	positive pregnant women and their children who are
14	exposed to HIV and connect them with care that can
15	improve their health and prevent perinatal trans-
16	mission.
17	TITLE V—GENERAL PROVISIONS
18	SEC. 501. GENERAL PROVISIONS.
19	Part E of title XXVI of the Public Health Service Act
20	(42 U.S.C. 300ff–80 et seq.) is amended to read as follows:
21	"PART E—GENERAL PROVISIONS
22	"SEC. 2681. COORDINATION.
23	"(a) Requirement.—The Secretary shall ensure that
24	the Health Resources and Services Administration, the Cen-
25	ters for Disease Control and Prevention, the Substance

- 1 Abuse and Mental Health Services Administration, and the
- 2 Centers for Medicare & Medicaid Services coordinate the
- 3 planning, funding, and implementation of Federal HIV
- 4 programs (including all minority AIDS initiatives of the
- 5 Public Health Service, including under section 2693) to en-
- 6 hance the continuity of care and prevention services for in-
- 7 dividuals with HIV/AIDS or those at risk of such disease.
- 8 The Secretary shall consult with other Federal agencies, in-
- 9 cluding the Department of Veterans Affairs, as needed and
- 10 utilize planning information submitted to such agencies by
- 11 the States and entities eligible for assistance under this
- 12 title.
- 13 "(b) Report.—The Secretary shall biennially prepare
- 14 and submit to the appropriate committees of the Congress
- 15 a report concerning the coordination efforts at the Federal,
- 16 State, and local levels described in this section, including
- 17 a description of Federal barriers to HIV program integra-
- 18 tion and a strategy for eliminating such barriers and en-
- 19 hancing the continuity of care and prevention services for
- 20 individuals with HIV/AIDS or those at risk of such disease.
- 21 "(c) Integration by State.—As a condition of re-
- 22 ceipt of funds under this title, a State shall provide assur-
- 23 ances to the Secretary that health support services funded
- 24 under this title will be integrated with other such services,
- 25 that programs will be coordinated with other available pro-

- 1 grams (including Medicaid), and that the continuity of care
- 2 and prevention services of individuals with HIV/AIDS is
- 3 enhanced.
- 4 "(d) Integration by Local or Private Enti-
- 5 TIES.—As a condition of receipt of funds under this title,
- 6 a local government or private nonprofit entity shall provide
- 7 assurances to the Secretary that services funded under this
- 8 title will be integrated with other such services, that pro-
- 9 grams will be coordinated with other available programs
- 10 (including Medicaid), and that the continuity of care and
- 11 prevention services of individuals with HIV is enhanced.
- 12 "SEC. 2682. AUDITS.
- "(a) In General.—For fiscal year 2009, and each
- 14 subsequent fiscal year, the Secretary may reduce the
- 15 amounts of grants under this title to a State or political
- 16 subdivision of a State for a fiscal year if, with respect to
- 17 such grants for the second preceding fiscal year, the State
- 18 or subdivision fails to prepare audits in accordance with
- 19 the procedures of section 7502 of title 31, United States
- 20 Code. The Secretary shall annually select representative
- 21 samples of such audits, prepare summaries of the selected
- 22 audits, and submit the summaries to the Congress.
- 23 "(b) Posting on the Internet.—All audits that the
- 24 Secretary receives from the State lead agency under section
- 25 2617(b)(4) shall be posted, in their entirety, on the Internet

1	website of the Health Resources and Services Administra-
2	tion.
3	"SEC. 2683. PUBLIC HEALTH EMERGENCY.
4	"(a) In General.—In an emergency area and during
5	an emergency period, the Secretary shall have the authority
6	to waive such requirements of this title to improve the
7	health and safety of those receiving care under this title and
8	the general public, except that the Secretary may not ex-
9	pend more than 5 percent of the funds allocated under this
0	title for sections 2620 and section 2603(b).
11	"(b) Emergency Area and Emergency Period.—
12	In this section:
13	"(1) Emergency area.—The term 'emergency
14	area' means a geographic area in which there exists—
15	"(A) an emergency or disaster declared by
16	the President pursuant to the National Emer-
17	gencies Act or the Robert T. Stafford Disaster
18	Relief and Emergency Assistance Act; or
19	"(B) a public health emergency declared by
20	the Secretary pursuant to section 319.
21	"(2) Emergency period.—The term 'emergency
22	period' means the period in which there exists—
23	"(A) an emergency or disaster declared by
24	the President pursuant to the National Emer-

1	gencies Act or the Robert T. Stafford Disaster
2	Relief and Emergency Assistance Act; or
3	"(B) a public health emergency declared by
4	the Secretary pursuant to section 319.
5	"(c) Unobligated Funds.—If funds under a grant
6	under this section are not expended for an emergency in
7	the fiscal year in which the emergency is declared, such
8	funds shall be returned to the Secretary for reallocation
9	under sections 2603(b) and 2620.
10	"SEC. 2684. PROHIBITION ON PROMOTION OF CERTAIN AC-
11	TIVITIES.
12	"None of the funds appropriated under this title shall
13	be used to fund AIDS programs, or to develop materials,
14	designed to promote or encourage, directly, intravenous
15	drug use or sexual activity, whether homosexual or hetero-
16	sexual. Funds authorized under this title may be used to
17	provide medical treatment and support services for individ-
18	uals with HIV.
19	"SEC. 2685. PRIVACY PROTECTIONS.
20	"(a) In General.—The Secretary shall ensure that
21	any information submitted to, or collected by, the Secretary
22	under this title excludes any personally identifiable infor-
23	mation.
24	"(b) Definition.—In this section, the term 'person-
25	ally identifiable information' has the meaning given such

- 1 term under the regulations promulgated under section
- 2 264(c) of the Health Insurance Portability and Account-
- 3 ability Act of 1996.
- 4 "SEC. 2686. GAO REPORT.
- 5 "The Comptroller General of the Government Account-
- 6 ability Office shall biennially submit to the appropriate
- 7 committees of Congress a report that includes a description
- 8 of Federal, State, and local barriers to HIV program inte-
- 9 gration, particularly for racial and ethnic minorities, in-
- 10 cluding activities carried out under subpart III of part F,
- 11 and recommendations for enhancing the continuity of care
- 12 and the provision of prevention services for individuals
- 13 with HIV/AIDS or those at risk for such disease. Such re-
- 14 port shall include a demonstration of the manner in which
- 15 funds under this subpart are being expended and to what
- 16 extent the services provided with such funds increase access
- 17 to prevention and care services for individuals with HIV/
- 18 AIDS and build stronger community linkages to address
- 19 HIV prevention and care for racial and ethnic minority
- 20 communities.
- 21 "SEC. 2687. SEVERITY OF NEED INDEX.
- 22 "(a) Development of Index.—Not later than Sep-
- 23 tember 30, 2008, the Secretary shall develop and submit to
- 24 the appropriate committees of Congress a severity of need
- 25 index in accordance with subsection (c).

1	"(b) DEFINITION OF SEVERITY OF NEED INDEX.—In
2	this section, the term 'severity of need index' means the
3	index of the relative needs of individuals within a State
4	or area, as identified by a number of different factors, and
5	is a factor or set of factors that is multiplied by the number
6	of living HIV/AIDS cases in a State or area, providing dif-
7	ferent weights to those cases based on needs. Such factors
8	or set of factors may be different for different components
9	of the provisions under this title.
10	"(c) Requirements for Secretarial Submis-
11	SION.—When the Secretary submits to the appropriate com-
12	mittees of Congress the severity of need index under sub-
13	section (a), the Secretary shall provide the following:
14	"(1) Methodology for and rationale behind devel-
15	oping the severity of need index, including informa-
16	tion related to the field testing of the severity of need
17	index.
18	"(2) An independent contractor analysis of ac-
19	tivities carried out under paragraph (1).
20	"(3) Information regarding the process by which
21	the Secretary received community input regarding the
22	application and development of the severity of need
23	index.
24	"(d) Annual Reports.—If the Secretary fails to sub-
25	mit the severity of need index under subsection (a) in either

1	of fiscal years 2007 or 2008, the Secretary shall prepare
2	and submit to the appropriate committees of Congress a re-
3	port for such fiscal year—
4	"(1) that updates progress toward having client
5	level data;
6	"(2) that updates the progress toward having a
7	severity of need index, including information related
8	to the methodology and process for obtaining commu-
9	nity input; and
0	"(3) that, as applicable, states whether the Sec-
11	retary could develop a severity of need index before
12	fiscal year 2009.
13	"SEC. 2688. DEFINITIONS.
14	"For purposes of this title:
15	"(1) AIDS.—The term 'AIDS' means acquired
16	immune deficiency syndrome.
17	"(2) Co-occurring conditions.—The term 'co-
18	occurring conditions' means one or more adverse
19	health conditions in an individual with HIV/AIDS,
20	without regard to whether the individual has AIDS
21	and without regard to whether the conditions arise
22	from HIV.
23	"(3) Counseling.—The term 'counseling' means
24	such counseling provided by an individual trained to
25	provide such counselina.

1	"(4) FAMILY-CENTERED CARE.—The term fam-
2	ily-centered care' means the system of services de-
3	scribed in this title that is targeted specifically to the
4	special needs of infants, children, women and fami-
5	lies. Family-centered care shall be based on a partner-
6	ship between parents, professionals, and the commu-
7	nity designed to ensure an integrated, coordinated,
8	culturally sensitive, and community-based continuum
9	of care for children, women, and families with HIV/
10	AIDS.
11	"(5) Families with hiv/aids.—The term 'fami-
12	lies with HIV/AIDS' means families in which one or
13	more members have HIV/AIDS.
14	"(6) HIV.—The term 'HIV' means infection
15	with the human immunodeficiency virus.
16	"(7) HIV/AIDS.—
17	"(A) In General.—The term 'HIV/AIDS'
18	means HIV, and includes AIDS and any condi-
19	tion arising from AIDS.
20	"(B) Counting of cases.—The term liv-
21	ing cases of HIV/AIDS', with respect to the
22	counting of cases in a geographic area during a
23	period of time, means the sum of—
24	"(i) the number of living non-AIDS
25	cases of HIV in the area; and

1	"(ii) the number of living cases of
2	AIDS in the area.
3	"(C) Non-Aids cases.—The term 'non-
4	AIDS', with respect to a case of HIV, means that
5	the individual involved has HIV but does not
6	$have\ AIDS.$
7	"(8) Human immunodeficiency virus.—The
8	term 'human immunodeficiency virus' means the etio-
9	logic agent for AIDS.
10	"(9) Official poverty line.—The term 'offi-
11	cial poverty line' means the poverty line established
12	by the Director of the Office of Management and
13	Budget and revised by the Secretary in accordance
14	with section 673(2) of the Omnibus Budget Reconcili-
15	ation Act of 1981.
16	"(10) Person.—The term 'person' includes one
17	or more individuals, governments (including the Fed-
18	eral Government and the governments of the States),
19	governmental agencies, political subdivisions, labor
20	unions, partnerships, associations, corporations, legal
21	representatives, mutual companies, joint-stock compa-
22	nies, trusts, unincorporated organizations, receivers,
23	trustees, and trustees in cases under title 11, United
24	States Code.
25	"(11) State.—

1	"(A) In General.—The term 'State' means
2	each of the 50 States, the District of Columbia,
3	and each of the territories.
4	"(B) Territories.—The term 'territory'
5	means each of American Samoa, Guam, the
6	Commonwealth of Puerto Rico, the Common-
7	wealth of the Northern Mariana Islands, the Vir-
8	gin Islands, the Republic of the Marshall Islands,
9	the Federated States of Micronesia, and Palau.
10	"(12) Youth with Hiv.—The term 'youth with
11	HIV' means individuals who are 13 through 24 years
12	old and who have HIV/AIDS.".
13	TITLE VI—DEMONSTRATION AND
14	TRAINING
15	SEC. 601. DEMONSTRATION AND TRAINING.
15 16	SEC. 601. DEMONSTRATION AND TRAINING. Subpart I of part F of title XXVI of the Public Health
16	
16 17	Subpart I of part F of title XXVI of the Public Health
16 17 18	Subpart I of part F of title XXVI of the Public Health Service Act (42 U.S.C. 300ff–101 et seq.) is amended to read
16 17 18 19	Subpart I of part F of title XXVI of the Public Health Service Act (42 U.S.C. 300ff–101 et seq.) is amended to read as follows:
16 17 18 19	Subpart I of part F of title XXVI of the Public Health Service Act (42 U.S.C. 300ff-101 et seq.) is amended to read as follows: "Subpart I—Special Projects of National Significance
16 17 18 19 20	Subpart I of part F of title XXVI of the Public Health Service Act (42 U.S.C. 300ff-101 et seq.) is amended to read as follows: "Subpart I—Special Projects of National Significance "SEC. 2691. SPECIAL PROJECTS OF NATIONAL SIGNIFI-
16 17 18 19 20 21 22	Subpart I of part F of title XXVI of the Public Health Service Act (42 U.S.C. 300ff-101 et seq.) is amended to read as follows: "Subpart I—Special Projects of National Significance "SEC. 2691. SPECIAL PROJECTS OF NATIONAL SIGNIFICANCE.
16 17 18 19 20 21 22 23	Subpart I of part F of title XXVI of the Public Health Service Act (42 U.S.C. 300ff-101 et seq.) is amended to read as follows: "Subpart I—Special Projects of National Significance "SEC. 2691. SPECIAL PROJECTS OF NATIONAL SIGNIFI- CANCE. "(a) IN GENERAL.—Of the amount appropriated

1	under each such part, but not to exceed \$25,000,000, to ad-
2	minister special projects of national significance to—
3	"(1) quickly respond to emerging needs of indi-
4	viduals receiving assistance under this title; and
5	"(2) to fund special programs to develop a
6	standard electronic client information data system to
7	improve the ability of grantees under this title to re-
8	port client-level data to the Secretary.
9	"(b) Grants.—The Secretary shall award grants
10	under subsection (a) to entities eligible for funding under
11	parts A, B, C, and D based on—
12	"(1) whether the funding will promote obtaining
13	client level data as it relates to the creation of a sever-
14	ity of need index, including funds to facilitate the
15	purchase and enhance the utilization of qualified
16	$health\ information\ technology\ systems;$
17	"(2) demonstrated ability to create and main-
18	tain a qualified health information technology system;
19	"(3) the potential replicability of the proposed
20	activity in other similar localities or nationally;
21	"(4) the demonstrated reliability of the proposed
22	qualified health information technology system across
23	a variety of providers, geographic regions, and clients;
24	and

1	"(5) the demonstrated ability to maintain a safe
2	and secure qualified health information system; or
3	"(6) newly emerging needs of individuals receiv-
4	ing assistance under this title.
5	"(c) Coordination.—The Secretary may not make a
6	grant under this section unless the applicant submits evi-
7	dence that the proposed program is consistent with the
8	statewide coordinated statement of need, and the applicant
9	agrees to participate in the ongoing revision process of such
10	statement of need.
11	"(d) Privacy Protection.—The Secretary may not
12	make a grant under this section for the development of a
13	qualified health information technology system unless the
14	applicant provides assurances to the Secretary that the sys-
15	tem will, at a minimum, comply with the privacy regula-
16	tions promulgated under section 264(c) of the Health Insur-
17	ance Portability and Accountability Act of 1996.
18	"(e) Replication.—The Secretary shall make infor-
19	mation concerning successful models or programs developed
20	under this part available to grantees under this title for
21	the purpose of coordination, replication, and integration.
22	To facilitate efforts under this subsection, the Secretary
23	may provide for peer-based technical assistance for grantees

24 funded under this part.".

1	SEC. 602. AIDS EDUCATION AND TRAINING CENTERS.
2	(a) Amendments Regarding Schools and Cen-
3	TERS.—Section 2692(a)(2) of the Public Health Service Act
4	(42 U.S.C. 300ff-111(a)(2)) is amended—
5	(1) in subparagraph (A)—
6	(A) by inserting "and Native Americans"
7	after "minority individuals"; and
8	(B) by striking "and" at the end;
9	(2) in subparagraph (B), by striking the period
10	and inserting "; and"; and
11	(3) by adding at the end the following:
12	"(C) train or result in the training of
13	health professionals and allied health profes-
14	sionals to provide treatment for hepatitis B or C
15	co-infected individuals.".
16	(b) Authorizations of Appropriations for
17	Schools, Centers, and Dental Programs.—Section
18	2692(c) of the Public Health Service Act (42 U.S.C. 300ff-
19	111(c)) is amended to read as follows:
20	"(c) Authorization of Appropriations.—
21	"(1) Schools; centers.—For the purpose of
22	awarding grants under subsection (a), there is au-
23	thorized to be appropriated \$34,700,000 for each of
24	the fiscal years 2007 through 2009.
25	"(2) Dental schools.—For the purpose of
26	awarding grants under subsection (b), there is author-

1	ized to be appropriated \$13,000,000 for each of the
2	fiscal years 2007 through 2009.".
3	SEC. 603. CODIFICATION OF MINORITY AIDS INITIATIVE.
4	Part F of title XXVI of the Public Health Service Act
5	(42 U.S.C. 300ff-101 et seq.) is amended by adding at the
6	end the following:
7	"Subpart III—Minority AIDS Initiative
8	"SEC. 2693. MINORITY AIDS INITIATIVE.
9	"(a) In General.—For the purpose of carrying out
10	activities under this section to evaluate and address the dis-
11	proportionate impact of HIV/AIDS on, and the disparities
12	in access, treatment, care, and outcomes for, racial and eth-
13	nic minorities (including African Americans, Alaska Na-
14	tives, Latinos, American Indians, Asian Americans, Native
15	Hawaiians, and Pacific Islanders), there are authorized to
16	be appropriated \$131,200,000 for fiscal year 2007,
17	\$135,100,000 for fiscal year 2008, and \$139,100,000 for fis-
18	cal year 2009.
19	"(b) Certain Activities.—
20	"(1) In general.—In carrying out the purpose
21	described in subsection (a), the Secretary shall pro-
22	vide for—
23	"(A) emergency assistance under part A ;
24	"(B) care grants under part B;

1	"(C) early intervention services under part
2	C;
3	"(D) services through projects for HIV-re-
4	lated care under part D; and
5	"(E) activities through education and train-
6	ing centers under section 2692.
7	"(2) Allocations among activities.—Activi-
8	ties under paragraph (1) shall be carried out by the
9	Secretary in accordance with the following:
10	"(A) For competitive, supplemental grants
11	to improve HIV-related health outcomes to re-
12	duce existing racial and ethnic health dispari-
13	ties, the Secretary shall, of the amount appro-
14	priated under subsection (a) for a fiscal year, re-
15	serve the following, as applicable:
16	"(i) For fiscal year 2007, \$43,800,000.
17	"(ii) For fiscal year 2008, \$45,400,000.
18	"(iii) For fiscal year 2009,
19	\$47,100,000.
20	"(B) For competitive grants used for sup-
21	plemental support education and outreach serv-
22	ices to increase the number of eligible racial and
23	ethnic minorities who have access to treatment
24	through the program under section 2616 for
25	therapeutics, the Secretary shall, of the amount

1	appropriated for a fiscal year under subsection
2	(a), reserve the following, as applicable:
3	"(i) For fiscal year 2007, \$7,000,000.
4	"(ii) For fiscal year 2008, \$7,300,000.
5	"(iii) For fiscal year 2009, \$7,500,000.
6	"(C) For planning grants, capacity-build-
7	ing grants, and services grants to health care
8	providers who have a history of providing cul-
9	turally and linguistically appropriate care and
10	services to racial and ethnic minorities, the Sec-
11	retary shall, of the amount appropriated for a
12	fiscal year under subsection (a), reserve the fol-
13	lowing, as applicable:
14	"(i) For fiscal year 2007, \$53,400,000.
15	"(ii) For fiscal year 2008, \$55,400,000.
16	"(iii) For fiscal year 2009,
17	\$57,400,000.
18	"(D) For eliminating racial and ethnic dis-
19	parities in the delivery of comprehensive, cul-
20	turally and linguistically appropriate care serv-
21	ices for HIV disease for women, infants, chil-
22	dren, and youth, the Secretary shall, of the
23	amount appropriated under subsection (a), re-
24	serve \$18,500,000 for each of the fiscal years
25	2007 through 2009.

1	"(E) For increasing the training capacity
2	of centers to expand the number of health care
3	professionals with treatment expertise and
4	knowledge about the most appropriate standards
5	of HIV disease-related treatments and medical
6	care for racial and ethnic minority adults, ado-
7	lescents, and children with HIV disease, the Sec-
8	retary shall, of the amount appropriated under
9	subsection (a), reserve \$8,500,000 for each of the
10	fiscal years 2007 through 2009.
11	"(c) Consistency With Prior Program.—With re-
12	spect to the purpose described in subsection (a), the Sec-
13	retary shall carry out this section consistent with the activi-
14	ties carried out under this title by the Secretary pursuant
15	to the Departments of Labor, Health and Human Services,
16	and Education, and Related Agencies Appropriations Act,
17	2002 (Public Law 107–116).".
18	TITLE VII—MISCELLANEOUS
19	PROVISIONS
20	SEC. 701. HEPATITIS; USE OF FUNDS.
21	Section 2667 of the Public Health Service Act (42
22	U.S.C. 300ff–67) is amended—
23	(1) in paragraph (2), by striking "and" at the
24	end;

1	(2) in paragraph (3), by striking the period and
2	inserting "; and"; and
3	(3) by adding at the end the following:
4	"(4) shall provide information on the trans-
5	mission and prevention of hepatitis A, B, and C, in-
6	cluding education about the availability of hepatitis
7	A and B vaccines and assisting patients in identi-
8	fying vaccination sites.".
9	SEC. 702. CERTAIN REFERENCES.
10	Title XXVI of the Public Health Service Act (42 U.S.C.
11	300ff et seq.) is amended—
12	(1) by striking "acquired immune deficiency
13	syndrome" each place such term appears, other than
14	in section 2687(1) (as added by section 501 of this
15	Act), and inserting "AIDS";
16	(2) by striking "such syndrome" and inserting
17	"AIDS"; and
18	(3) by striking "HIV disease" each place such
19	term appears and insertina "HIV/AIDS".

- 1 SEC. 703. REPEAL.
- 2 Effective on October 1, 2009, title XXVI of the Public
- 3 Health Service Act (42 U.S.C. 300ff et seq.) is repealed. Attest:

Secretary.

109TH CONGRESS H. R. 6143

AMENDMENT