## Calendar No. 427

114TH CONGRESS 2D SESSION

# S. 2700

To update the authorizing provisions relating to the workforces of the National Institutes of Health and the Food and Drug Administration, and for other purposes.

#### IN THE SENATE OF THE UNITED STATES

March 17, 2016

Mr. ALEXANDER (for himself and Mrs. Murray) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

APRIL 18, 2016

Reported by Mr. ALEXANDER, with an amendment

[Strike out all after the enacting clause and insert the part printed in italic]

# A BILL

To update the authorizing provisions relating to the workforces of the National Institutes of Health and the Food and Drug Administration, and for other purposes.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,
- 3 **SECTION 1. SHORT TITLE.**
- 4 This Act may be cited as the "FDA and NIH Work-
- 5 force Authorities Modernization Act".

1	SEC. 2. SILVIO O. CONTE SENIOR BIOMEDICAL RESEARCH
2	SERVICE.
3	(a) Hiring and Retention Authority.—Section
4	228 of the Public Health Service Act (42 U.S.C. 237) is
5	amended—
6	(1) in the section heading, by inserting "AND
7	BIOMEDICAL PRODUCT ASSESSMENT" after "RE-
8	SEARCH";
9	(2) in subsection (a)—
10	(A) in paragraph (1), by striking "Silvio
11	O. Conte Senior Biomedical Research Service,
12	not to exceed 500 members" and inserting
13	"Silvio O. Conte Senior Biomedical Research
14	and Biomedical Product Assessment Service (in
15	this section referred to as the 'Service'), not to
16	exceed 2,000 members, the purpose of which is
17	to recruit and retain outstanding and qualified
18	scientific and technical experts in the fields of
19	biomedical research, clinical research evalua-
20	tion, and biomedical product assessment";
21	(B) by amending paragraph (2) to read as
22	<del>follows:</del>
23	"(2) The authority established in paragraph (1) may
24	not be construed to require the Secretary to reduce the
25	number of employees serving under any other employment

1	system in order to offset the number of members serving
2	in the Service."; and
3	(C) by adding at the end the following:
4	"(3) The Secretary shall assign experts under this
5	section to agencies within the Department of Health and
6	Human Services taking into account the need for the ex-
7	pertise of such expert.";
8	(3) in subsection (b)—
9	(A) in the matter preceding paragraph (1),
10	by striking "or clinical research evaluation" and
11	inserting ", clinical research evaluation, or bio-
12	medical product assessment"; and
13	(B) in paragraph (1), by inserting "or a
14	doctoral or master's level degree in engineering,
15	bioinformatics, or a related or emerging field,"
16	after the comma;
17	(4) in subsection $(d)(2)$ , by striking "and shall
18	not exceed the rate payable for level I of the Execu-
19	tive Schedule unless approved by the President
20	under section 5377(d)(2) of title 5, United States
21	Code" and inserting "and shall not exceed the
22	amount of annual compensation (excluding expenses)
23	specified in section 102 of title 3, United States
24	Code";
25	(5) by striking subsection (e); and

1 (6) by redesignating subsections (f) and (g) as 2 subsections (e) and (f), respectively.

#### (b) GAO STUDY.—

(1) IN GENERAL.—The Comptroller General of the United States shall conduct a study of the effectiveness of the amendments to section 228 of the Public Health Service Act (42 U.S.C. 237) made by subsection (a) and the impact of such amendments, if any, on all agencies or departments of the Department of Health and Human Services, and, not later than 4 years after the date of enactment of this Act, shall submit a report based on such study to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives.

(2) Content of Study and Report.—The study and report under paragraph (1) shall include an examination of the extent to which recruitment and retention of outstanding and qualified scientific, medical, or technical experts in the fields of biomedical research, clinical research evaluation, and biomedical product assessment has improved or otherwise has been affected by the amendments to section 228 of the Public Health Service Act (42 U.S.C. 237) made by subsection (a), including by

determining, during the period between the date of
enactment of this Act and the completion of the
study—

(A) the total number of members recruited and retained under the Senior Biomedical Research and Biomedical Product Assessment Service under such section 228, and the effect of increasing the number of members eligible for such Service;

(B) the number of members of such Senior Biomedical Research and Biomedical Product Assessment Service hired with a doctoral level degree in biomedicine or a related field, or doctoral or master's level degree in engineering, bioinformatics, or a related or emerging field; and

(C) how many Senior Biomedical Research and Biomedical Product Assessment Service members have been hired by each agency or department of the Department of Health and Human Services, and how such Department assigns such members to each agency or department.

1	SEC. 3. HIRING AUTHORITY FOR SCIENTIFIC, TECHNICAL,
2	AND PROFESSIONAL PERSONNEL.
3	(a) In General.—The Federal Food, Drug, and
4	Cosmetic Act is amended by inserting after section 714
5	(21 U.S.C. 379d-3) the following:
6	"SEC. 714A. HIRING AUTHORITY FOR SCIENTIFIC, TECH-
7	NICAL, AND PROFESSIONAL PERSONNEL.
8	"(a) In General.—The Secretary may, without re-
9	gard to the provisions of title 5, United States Code, gov-
10	erning appointments in the competitive service, appoint
11	outstanding and qualified candidates to scientific, tech-
12	nical, or professional positions that support the develop-
13	ment, review, and regulation of medical products. Such po-
14	sitions shall be within the competitive service.
15	"(b) Compensation.—
16	"(1) In General.—Notwithstanding any other
17	provision of law, including any requirement with re-
18	spect to General Schedule pay rates under sub-
19	chapter III of chapter 53 of title 5, United States
20	Code, and consistent with the requirements of para-
21	graph (2), the Commissioner of Food and Drugs
22	may determine and fix—
23	"(A) the annual rate of pay of any indi-
24	vidual appointed under subsection (a); and
25	"(B) for purposes of retaining qualified
26	employees, the annual rate of pay for any quali-

fied scientific, technical, or professional personnel appointed to a position described in subsection (a) before the date of enactment of this
section.

"(2) LIMITATION.—The annual rate of pay established pursuant to paragraph (1) may not exceed the amount of annual compensation (excluding expenses) specified in section 102 of title 3, United States Code.

"(3) PUBLIC AVAILABILITY.—The annual rate of pay provided to an individual in accordance with this section shall be publicly available information.

13 "(e) RULE OF CONSTRUCTION.—The authorities
14 under this section shall not be construed to affect the au15 thority provided under section 714.

#### "(d) Report on Workforce Planning.—

"(1) IN GENERAL.—Not later than 18 months after the date of enactment of the FDA and NIH Workforce Authorities Modernization Act, the Secretary shall submit a report on workforce planning to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives that examines the extent to which the Food and Drug Administration has a critical need for qualified

1	individuals for scientific, technical, or professional
2	positions, including—
3	"(A) an analysis of the workforce needs at
4	the Food and Drug Administration and the
5	Secretary's strategic plan for addressing such
6	needs, including through use of the authority
7	under this section; and
8	"(B) a recruitment and retention plan for
9	hiring qualified scientific, technical, and profes-
10	sional candidates, which may include the use
11	<del>of</del>
12	"(i) recruitment through non-govern-
13	mental recruitment or placement agencies;
14	"(ii) recruitment through academic in-
15	stitutions;
16	"(iii) recruitment or hiring bonuses, if
17	applicable;
18	"(iv) recruitment using targeted direct
19	hiring authorities; and
20	"(v) retention of qualified scientific,
21	technical, and professional employees using
22	the authority under this section, or other
23	applicable authorities of the Secretary.
24	"(2) RECOMMENDATIONS.—The report under
25	paragraph (1) may include the recommendations of

the Commissioner of Food and Drugs that would help the Food and Drug Administration to better recruit and retain qualified individuals for scientific, technical, or professional positions at the agency.".

(b) GAO STUDY AND REPORT.—

- (1) IN GENERAL. The Comptroller General of the United States shall conduct a study of the ability of the Food and Drug Administration to hire, train, and retain qualified scientific, technical, and professional staff, not including contractors, necessary to fulfill the mission of the Food and Drug Administration to protect and promote public health. Not later than January 1, 2022, the Comptroller General shall submit a report on such study to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives.
- (2) CONTENTS OF STUDY.—The Comptroller General shall include in the study and report under paragraph (1)—
  - (A) information about the progress of the Food and Drug Administration in recruiting and retaining qualified scientific, technical, and professional staff outstanding in the field of

1	biomedical research, clinical research evalua-
2	tion, and biomedical product assessment;
3	(B) the extent to which critical staffing
4	needs exist at the Food and Drug Administra-
5	tion, and barriers to hiring, training, and re-
6	taining qualified staff, if any;
7	(C) an examination of the recruitment and
8	retention strategies of the Food and Drug Ad-
9	ministration, including examining any strategic
10	workforce plan, focused on improving scientific,
11	technical, and professional staff recruitment
12	and retention; and
13	(D) recommendations for potential im-
14	provements that would address staffing needs
15	of the Food and Drug Administration.
16	SEC. 4. ESTABLISHMENT OF FOOD AND DRUG ADMINISTRA-
17	TION INTERCENTER INSTITUTES.
18	(a) In General.—Chapter X of the Federal Food,
19	Drug, and Cosmetic Act (21 U.S.C. 391 et seq.) is amend-
20	ed by adding at the end the following:
21	"SEC. 1014. FOOD AND DRUG ADMINISTRATION INTER-
22	CENTER INSTITUTES.
23	"(a) IN GENERAL.—The Secretary shall establish one
24	or more Intercenter Institutes within the Food and Drug
25	Administration (referred to in this section as an 'Insti-

- 1 tute') for a major disease area or areas. With respect to
- 2 the major disease area of focus of an Institute, such Insti-
- 3 tute shall develop and implement processes for coordina-
- 4 tion of activities, as applicable to such major disease area
- 5 or areas, between the Center for Drug Evaluation and Re-
- 6 search, the Center for Biologies Evaluation and Research,
- 7 and the Center for Devices and Radiological Health (for
- 8 the purposes of this section, referred to as the 'Centers').
- 9 Such activities may include—
- 10 "(1) coordination of staff from the Centers with
  11 diverse product expertise in the diagnosis, cure, miti12 gation, treatment, or prevention of the specific dis13 eases relevant to the major disease area of focus of
  14 the Institute;
  - "(2) streamlining, where appropriate, the review of medical products to diagnose, cure, mitigate, treat, or prevent the major disease area of focus of the Institute, applying relevant standards under sections 505, 510(k), and 515 of this Act and section 351 of the Public Health Service Act, and other applicable authorities;
  - "(3) promotion of scientific programs within the Centers related to the major disease area of focus of the Institute;

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1 "(4) development of programs and enhancement
2 of strategies to recruit, train, and provide continuing
3 education opportunities for the personnel of the Cen4 ters with expertise related to the major disease area
5 of focus of the Institute;

"(5) enhancement of the interactions of the Centers with patients, sponsors, and the external biomedical community regarding the major disease area of focus of the Institute; and

"(6) facilitation of the collaborative relationships of the Centers with other agencies within the Department of Health and Human Services regarding the major disease area of focus of the Institute.

"(b) IMPLEMENTATION PLAN.—Prior to establishing an Institute under subsection (a), and not later than 1 year after the date of enactment of the FDA and NIH Workforce Authorities Modernization Act, the Secretary shall publish a draft implementation plan for such Institute, and provide for not less than 60 calendar days for public comment on such plan.

21 "(e) TIMING.—The Secretary shall establish at least 22 one Institute under subsection (a) within 1 year of the 23 closing of the public comment period under subsection (b), 24 unless the Secretary determines that establishing such In-25 stitute would not be feasible or would not benefit the pub-

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- 1 lie health, and publishes such determination on the public
- 2 Internet website of the Food and Drug Administration.
- 3 "(d) Termination of Institutes.—The Secretary
- 4 may terminate any Institute established pursuant to this
- 5 section if the Secretary determines such Institute is no
- 6 longer benefitting the public health. Not less than 60 days
- 7 prior to so terminating an Institute, the Secretary shall
- 8 provide public notice, including the rationale for such ter-
- 9 mination.".
- 10 (b) TECHNICAL AMENDMENTS.—Chapter X of the
- 11 Federal Food, Drug, and Cosmetic Act (21 U.S.C. 391
- 12 et seq.) is amended—
- 13 (1) by redesignating section 1012 as section
- 14 <del>1013; and</del>
- 15 (2) by redesignating the second section 1011
- 16 (with respect to improving the training of State,
- 17 local, territorial, and tribal food safety officials), as
- 18 added by section 209(a) of the FDA Food Safety
- 19 Modernization Act (Public Law 111–353), as section
- $20 \frac{1012}{1012}$
- 21 SEC. 5. SCIENTIFIC MEETINGS.
- 22 (a) In General.—Scientific meetings that are at-
- 23 tended by scientific or medical personnel, or other profes-
- 24 sionals, of the Department of Health and Human Services
- 25 for whom attendance at such meeting is directly related

1	to their professional duties and the mission of the Depart
2	ment—
3	(1) shall not be considered conferences for the
4	purposes of complying with Federal reporting re-
5	quirements contained in annual appropriations Acts
6	or in this section; and
7	(2) shall not be considered conferences for pur-
8	poses of a restriction contained in an annual appro-
9	priations Act, based on Office of Management and
10	Budget Memorandum M-12-12 or any other regula
11	tion restricting such travel.
12	(b) Limitation.—Nothing in this section shall be
13	construed to exempt travel for scientific meetings from
14	Federal regulations relating to travel.
15	(e) Reports.—Each operating division of the De-
16	partment of Health and Human Services shall prepare
17	and post on an Internet website of the operating division
18	an annual report on scientific meeting attendance and re-
19	lated travel spending for each fiscal year. Such report shall
20	<del>include</del>
21	(1) general information concerning the scientific
22	meeting activities involved;
23	(2) information concerning the total amount ex-
24	pended for such meetings;

1	(3) a description of all such meetings that were
2	attended by scientific or medical personnel, or other
3	professionals, of each such operating division where
4	the total amount expended by the operating division
5	associated with each such meeting are in excess of
6	\$30,000, including—
7	(A) the total amount of meeting expenses
8	incurred by the operating division for such
9	meeting;
10	(B) the location of such meeting;
11	(C) the date of such meeting;
12	(D) a brief explanation on how such meet-
13	ing advanced the mission of the operating divi-
14	sion; and
15	(E) the total number of individuals whose
16	travel expenses or other scientific meeting ex-
17	penses were paid by the operating division; and
18	(4) with respect to any such meeting where the
19	total expenses to the operating division exceeded
20	\$150,000, a description of the exceptional cir-
21	cumstances that necessitated the expenditure of such
22	amounts.
23	SEC. 6. REAGAN-UDALL FOUNDATION FOR THE FOOD AND
24	DRUG ADMINISTRATION.
25	(a) Board of Directors.—

1	(1) Composition and size.—Section
2	770(d)(1)(C) of the Federal Food, Drug, and Cos-
3	metic Act (21 U.S.C. 379dd(d)(1)(C)) is amended—
4	(A) by redesignating clause (ii) as clause
5	<del>(iii);</del>
6	(B) by inserting after clause (i) the fol-
7	lowing:
8	"(ii) Additional members.—The
9	Board, through amendments to the bylaws
10	of the Foundation, may provide that the
11	number of voting members of the Board
12	shall be a number (to be specified in such
13	amendment) greater than 14. Any Board
14	positions that are established by any such
15	amendment shall be appointed (by majority
16	vote) by the individuals who, as of the date
17	of such amendment, are voting members of
18	the Board and persons so appointed may
19	represent any of the categories specified in
20	subclauses (I) through (V) of clause (i), so
21	long as no more than 30 percent of the
22	total voting members of the Board (includ-
23	ing members whose positions are estab-
24	lished by such amendment) are representa-
25	tives of the general pharmaceutical, device,

1	food, cosmetic, and biotechnology indus-
2	tries."; and
3	(C) in clause (iii)(I), as redesignated by
4	subparagraph (A), by striking "The ex officio
5	members shall ensure" and inserting "The ex
6	officio members, acting pursuant to clause (i),
7	and the Board, acting pursuant to clause (ii),
8	shall ensure".
9	(2) Federal employees allowed to serve
10	ON BOARD.—Clause (iii)(II) of section 770(d)(1)(C)
11	of the Federal Food, Drug, and Cosmetic Act (21
12	U.S.C. 379dd(d)(1)(C)), as redesignated by para-
13	graph (1)(A), is amended by adding at the end the
14	following: "For purposes of this section, the term
15	'employee of the Federal Government' does not in-
16	clude a 'special Government employee', as that term
17	is defined in section 202(a) of title 18, United
18	States Code.".
19	(3) Staggered Terms.—Subparagraph (A) of
20	section 770(d)(3) of the Federal Food, Drug, and
21	Cosmetic Act (21 U.S.C. 379dd(d)(3)) is amended
22	to read as follows:
23	"(A) TERM.—The term of office of each
24	member of the Board appointed under para-
25	graph (1)(C)(i), and the term of office of any

1	member of the Board whose position is estab-
2	lished pursuant to paragraph (1)(C)(ii), shall be
3	4 years, except that—
4	"(i) the terms of offices for the mem-
5	bers of the Board initially appointed under
6	paragraph (1)(C)(i) shall expire on a stag-
7	gered basis as determined by the ex officio
8	members; and
9	"(ii) the terms of office for the per-
10	sons initially appointed to positions estab-
11	lished pursuant to paragraph (1)(C)(ii)
12	may be made to expire on a staggered
13	basis, as determined by the individuals
14	who, as of the date of the amendment es-
15	tablishing such positions, are members of
16	the Board.".
17	(b) Executive Director Compensation.—Section
18	770(g)(2) of the Federal Food, Drug, and Cosmetic Act
19	(21  U.S.C.  379dd(g)(2)) is amended by striking "but shall
20	not be greater than the compensation of the Commis-
21	sioner".
22	(e) SEPARATION OF FUNDS.—Section 770(m) of the
23	Federal Food, Drug, and Cosmetic Act (21 U.S.C.
24	379dd(m)) is amended by striking "are held in separate
25	accounts from funds received from entities under sub-

1	section (i)" and inserting "are managed as individual pro-
2	grammatic funds under subsection (i), according to best
3	accounting practices".
4	SEC. 7. NIH RESEARCH INFORMATION COLLECTION EX-
5	EMPTED FROM PAPERWORK REDUCTION
6	ACT.
7	Section 301 of the Public Health Service Act (42
8	U.S.C. 241) is amended by adding to the end the fol-
9	lowing:
10	"(f) PAPERWORK REDUCTION.—Subchapter I of
11	chapter 35 of title 44, United States Code, shall not apply
12	to the collection of information during the conduct of re-
13	search by the National Institutes of Health.".
14	SEC. 8. STUDIES.
15	The Federal Food, Drug, and Cosmetic Act is amend-
16	<del>ed</del>
17	(1) in section $505(k)(5)$ (21 U.S.C.
18	355(k)(5))
19	(A) in subparagraph (A), by inserting
20	"and" after the semicolon;
21	(B) by striking subparagraph (B); and
22	(C) by redesignating subparagraph (C) as
23	subparagraph (B);
24	(2) in section 505A (21 U.S.C. 355a), by strik-
25	ing subsection (p);

1	(3) in section 505B (21 U.S.C. 355c)—
2	(A) by striking subsection (l); and
3	(B) by redesignating subsection (m) as
4	subsection (1); and
5	(4) in section 523 (21 U.S.C. 360m), by strik-
6	ing subsection (d).
7	SECTION 1. SHORT TITLE.
8	This Act may be cited as the "FDA and NIH Work-
9	force Authorities Modernization Act".
10	SEC. 2. SILVIO O. CONTE SENIOR BIOMEDICAL RESEARCH
11	SERVICE.
12	(a) Hiring and Retention Authority.—Section
13	228 of the Public Health Service Act (42 U.S.C. 237) is
14	amended—
15	(1) in the section heading, by inserting "AND
16	BIOMEDICAL PRODUCT ASSESSMENT" after "RE-
17	SEARCH'';
18	(2) in subsection (a)—
19	(A) in paragraph (1), by striking "Silvio O.
20	Conte Senior Biomedical Research Service, not
21	to exceed 500 members" and inserting "Silvio O.
22	Conte Senior Biomedical Research and Bio-
23	medical Product Assessment Service (in this sec-
24	tion referred to as the 'Service'), not to exceed
25	2,000 members, the purpose of which is to recruit

1	and retain outstanding and qualified scientific
2	and technical experts in the fields of biomedical
3	research, clinical research evaluation, and bio-
4	medical product assessment";
5	(B) by amending paragraph (2) to read as
6	follows:
7	"(2) The authority established in paragraph (1) may
8	not be construed to require the Secretary to reduce the num-
9	ber of employees serving under any other employment sys-
10	tem in order to offset the number of members serving in
11	the Service."; and
12	(C) by adding at the end the following:
13	"(3) The Secretary shall assign experts under this sec-
14	tion to agencies within the Department of Health and
15	Human Services taking into account the need for the exper-
16	tise of such expert.";
17	(3) in subsection (b)—
18	(A) in the matter preceding paragraph (1),
19	by striking "or clinical research evaluation" and
20	inserting ", clinical research evaluation, or bio-
21	medical product assessment"; and
22	(B) in paragraph (1), by inserting "or a
23	doctoral or master's level degree in engineering,
24	bioinformatics, or a related or emerging field,"
25	after the comma;

- 1 (4) in subsection (d)(2), by striking "and shall 2 not exceed the rate payable for level I of the Executive 3 Schedule unless approved by the President under sec-4 tion 5377(d)(2) of title 5, United States Code" and 5 inserting "and shall not exceed the amount of annual 6 compensation (excluding expenses) specified in section 7 102 of title 3, United States Code";
  - (5) by striking subsection (e); and
    - (6) by redesignating subsections (f) and (g) as subsections (e) and (f), respectively.

## (b) GAO STUDY.—

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- (1) In General.—The Comptroller General of the United States shall conduct a study of the effectiveness of the amendments to section 228 of the Public Health Service Act (42 U.S.C. 237) made by subsection (a) and the impact of such amendments, if any, on all agencies or departments of the Department of Health and Human Services, and, not later than 4 years after the date of enactment of this Act, shall submit a report based on such study to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives.
- (2) CONTENT OF STUDY AND REPORT.—The study and report under paragraph (1) shall include

an examination of the extent to which recruitment and retention of outstanding and qualified scientific, medical, or technical experts in the fields of biomedical research, clinical research evaluation, and biomedical product assessment has improved or otherwise has been affected by the amendments to section 228 of the Public Health Service Act (42 U.S.C. 237) made by subsection (a), including by determining, during the period between the date of enactment of this Act and the completion of the study—

- (A) the total number of members recruited and retained under the Senior Biomedical Research and Biomedical Product Assessment Service under such section 228, and the effect of increasing the number of members eligible for such Service;
- (B) the number of members of such Senior Biomedical Research and Biomedical Product Assessment Service hired with a doctoral level degree in biomedicine or a related field, or doctoral or master's level degree in engineering, bioinformatics, or a related or emerging field; and
- (C) how many Senior Biomedical Research and Biomedical Product Assessment Service

1	members have been hired by each agency or de-
2	partment of the Department of Health and
3	Human Services, and how such Department as-
4	signs such members to each agency or depart-
5	ment.
6	SEC. 3. HIRING AUTHORITY FOR SCIENTIFIC, TECHNICAL,
7	AND PROFESSIONAL PERSONNEL.
8	(a) In General.—The Federal Food, Drug, and Cos-
9	metic Act is amended by inserting after section 714 (21
10	U.S.C. 379d-3) the following:
11	"SEC. 714A. HIRING AUTHORITY FOR SCIENTIFIC, TECH-
12	NICAL, AND PROFESSIONAL PERSONNEL.
13	"(a) In General.—The Secretary may, without re-
14	gard to the provisions of title 5, United States Code, gov-
15	erning appointments in the competitive service, appoint
16	outstanding and qualified candidates to scientific, tech-
17	nical, or professional positions that support the develop-
18	ment, review, and regulation of medical products. Such po-
19	sitions shall be within the competitive service.
20	"(b) Compensation.—
21	"(1) In general.—Notwithstanding any other
22	provision of law, including any requirement with re-
23	spect to General Schedule pay rates under subchapter
24	III of chapter 53 of title 5, United States Code, and
25	consistent with the requirements of paragraph (2), the

1	Commissioner of Food and Drugs may determine and
2	fix—
3	"(A) the annual rate of pay of any indi-
4	vidual appointed under subsection (a); and
5	"(B) for purposes of retaining qualified em-
6	ployees, the annual rate of pay for any qualified
7	scientific, technical, or professional personnel ap-
8	pointed to a position described in subsection (a)
9	before the date of enactment of this section.
10	"(2) Limitation.—The annual rate of pay es-
11	tablished pursuant to paragraph (1) may not exceed
12	the amount of annual compensation (excluding ex-
13	penses) specified in section 102 of title 3, United
14	States Code.
15	"(3) Public availability.—The annual rate of
16	pay provided to an individual in accordance with
17	this section shall be publicly available information.
18	"(c) Rule of Construction.—The authorities under
19	this section shall not be construed to affect the authority
20	provided under section 714.
21	"(d) Report on Workforce Planning.—
22	"(1) In general.—Not later than 18 months
23	after the date of enactment of the FDA and NIH
24	$Work force\ Authorities\ Modernization\ Act$ , the Sec-
25	retary shall submit a report on workforce planning to

1	the Committee on Health, Education, Labor, and
2	Pensions of the Senate and the Committee on Energy
3	and Commerce of the House of Representatives that
4	examines the extent to which the Food and Drug Ad-
5	ministration has a critical need for qualified individ-
6	uals for scientific, technical, or professional positions,
7	including—
8	"(A) an analysis of the workforce needs at
9	the Food and Drug Administration and the Sec-
10	retary's strategic plan for addressing such needs,
11	including through use of the authority under this
12	section; and
13	"(B) a recruitment and retention plan for
14	hiring qualified scientific, technical, and profes-
15	sional candidates, which may include the use
16	of—
17	"(i) recruitment through non-govern-
18	mental recruitment or placement agencies;
19	"(ii) recruitment through academic in-
20	stitutions;
21	"(iii) recruitment or hiring bonuses, if
22	applicable;
23	"(iv) recruitment using targeted direct
24	hiring authorities; and

1 "(v) retention of qualified scientific,
2 technical, and professional employees using
3 the authority under this section, or other
4 applicable authorities of the Secretary.

"(2) RECOMMENDATIONS.—The report under paragraph (1) may include the recommendations of the Commissioner of Food and Drugs that would help the Food and Drug Administration to better recruit and retain qualified individuals for scientific, technical, or professional positions at the agency."

### (b) GAO STUDY AND REPORT.—

(1) In General.—The Comptroller General of the United States shall conduct a study of the ability of the Food and Drug Administration to hire, train, and retain qualified scientific, technical, and professional staff, not including contractors, necessary to fulfill the mission of the Food and Drug Administration to protect and promote public health. Not later than January 1, 2022, the Comptroller General shall submit a report on such study to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives.

1	(2) Contents of Study.—The Comptroller
2	General shall include in the study and report under
3	paragraph (1)—
4	(A) information about the progress of the
5	Food and Drug Administration in recruiting
6	and retaining qualified scientific, technical, and
7	professional staff outstanding in the field of bio-
8	medical research, clinical research evaluation,
9	and biomedical product assessment;
10	(B) the extent to which critical staffing
11	needs exist at the Food and Drug Administra-
12	tion, and barriers to hiring, training, and re-
13	taining qualified staff, if any;
14	(C) an examination of the recruitment and
15	retention strategies of the Food and Drug Ad-
16	ministration, including examining any strategic
17	workforce plan, focused on improving scientific,
18	technical, and professional staff recruitment and
19	retention; and
20	(D) recommendations for potential improve-
21	ments that would address staffing needs of the
22	Food and Drua Administration.

1	SEC. 4. ESTABLISHMENT OF FOOD AND DRUG ADMINISTRA-
2	TION INTERCENTER INSTITUTES.
3	(a) In General.—Chapter X of the Federal Food,
4	Drug, and Cosmetic Act (21 U.S.C. 391 et seq.) is amended
5	by adding at the end the following:
6	"SEC. 1014. FOOD AND DRUG ADMINISTRATION INTER-
7	CENTER INSTITUTES.
8	"(a) In General.—The Secretary shall establish one
9	or more Intercenter Institutes within the Food and Drug
10	Administration (referred to in this section as an 'Institute')
11	for a major disease area or areas. With respect to the major
12	disease area of focus of an Institute, such Institute shall
13	develop and implement processes for coordination of activi-
14	ties, as applicable to such major disease area or areas, be-
15	tween the Center for Drug Evaluation and Research, the
16	Center for Biologics Evaluation and Research, and the Cen-
17	ter for Devices and Radiological Health (for the purposes
18	of this section, referred to as the 'Centers'). Such activities
19	may include—
20	"(1) coordination of staff from the Centers with
21	diverse product expertise in the diagnosis, cure, miti-
22	gation, treatment, or prevention of the specific dis-
23	eases relevant to the major disease area of focus of the
24	Institute;
25	"(2) streamlining, where appropriate, the review
26	of medical products to diagnose cure mitigate treat.

- or prevent the major disease area of focus of the Institute, applying relevant standards under sections 505, 510(k), 513(f)(2), and 515 of this Act and section 351 of the Public Health Service Act, and other applicable authorities;
  - "(3) promotion of scientific programs within the Centers related to the major disease area of focus of the Institute;
    - "(4) development of programs and enhancement of strategies to recruit, train, and provide continuing education opportunities for the personnel of the Centers with expertise related to the major disease area of focus of the Institute;
    - "(5) enhancement of the interactions of the Centers with patients, sponsors, and the external biomedical community regarding the major disease area of focus of the Institute; and
  - "(6) facilitation of the collaborative relationships of the Centers with other agencies within the Department of Health and Human Services regarding the major disease area of focus of the Institute.
- 22 "(b) Public Process.—The Secretary shall provide 23 a period for public comment during the time that each In-24 stitute is being implemented.

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- 1 "(c) Timing.—The Secretary shall establish at least
- 2 one Institute under subsection (a) before the date that is
- 3 1 year after the date of enactment of the FDA and NIH
- 4 Workforce Authorities Modernization Act.
- 5 "(d) Termination of Institutes.—The Secretary
- 6 may terminate any Institute established pursuant to this
- 7 section if the Secretary determines such Institute is no
- 8 longer benefitting the public health. Not less than 60 days
- 9 prior to so terminating an Institute, the Secretary shall
- 10 provide public notice, including the rationale for such ter-
- 11 mination.".
- 12 (b) Technical Amendments.—Chapter X of the Fed-
- 13 eral Food, Drug, and Cosmetic Act (21 U.S.C. 391 et seq.)
- 14 is amended—
- 15 (1) by redesignating section 1012 as section
- 16 1013; and
- 17 (2) by redesignating the second section 1011
- 18 (with respect to improving the training of State,
- 19 local, territorial, and tribal food safety officials), as
- added by section 209(a) of the FDA Food Safety Mod-
- 21 ernization Act (Public Law 111-353), as section
- 22 1012.
- 23 SEC. 5. SCIENTIFIC MEETINGS.
- 24 (a) In General.—Scientific meetings that are at-
- 25 tended by scientific or medical personnel, or other profes-

- sionals, of the Department of Health and Human Services for whom attendance at such meeting is directly related to their professional duties and the mission of the Depart-4 ment— (1) shall not be considered conferences for the 5 6 purposes of complying with Federal reporting require-7 ments contained in annual appropriations Acts or in 8 this section; and 9 (2) shall not be considered conferences for pur-10 poses of a restriction contained in an annual appro-11 priations Act, based on Office of Management and 12 Budget Memorandum M-12-12 or any other regula-13 tion restricting such travel. 14 (b) Limitation.—Nothing in this section shall be con-15 strued to exempt travel for scientific meetings from Federal regulations relating to travel. 16 17 (c) Reports.—Each operating division of the Depart-
- 18 ment of Health and Human Services shall prepare, and 19 post on an Internet website of the operating division, an 20 annual report on scientific meeting attendance and related 21 travel spending for each fiscal year. Such report shall in-22 clude—
- 23 (1) general information concerning the scientific 24 meeting activities involved;

1	(2) information concerning the total amount ex-
2	pended for such meetings;
3	(3) a description of all such meetings that were
4	attended by scientific or medical personnel, or other
5	professionals, of each such operating division where
6	the total amount expended by the operating division
7	associated with each such meeting are in excess of
8	\$30,000, including—
9	(A) the total amount of meeting expenses
10	incurred by the operating division for such meet-
11	ing;
12	(B) the location of such meeting;
13	(C) the date of such meeting;
14	(D) a brief explanation on how such meet-
15	ing advanced the mission of the operating divi-
16	sion; and
17	(E) the total number of individuals whose
18	travel expenses or other scientific meeting ex-
19	penses were paid by the operating division; and
20	(4) with respect to any such meeting where the
21	total expenses to the operating division exceeded
22	\$150,000, a description of the exceptional cir-
23	cumstances that necessitated the expenditure of such
24	amounts.

#### 1 SEC. 6. REAGAN-UDALL FOUNDATION FOR THE FOOD AND 2 DRUG ADMINISTRATION. 3 (a) Board of Directors.— 4 (1)Composition SIZE.—Section AND5 770(d)(1)(C) of the Federal Food, Drug, and Cosmetic 6 Act (21 U.S.C. 379dd(d)(1)(C)) is amended— 7 (A) by redesignating clause (ii) as clause 8 (iii);9 (B) by inserting after clause (i) the fol-10 lowing: "(ii) 11 ADDITIONAL MEMBERS.—The 12 Board, through amendments to the bulaws 13 of the Foundation, may provide that the 14 number of voting members of the Board 15 shall be a number (to be specified in such 16 amendment) greater than 14. Any Board 17 positions that are established by any such 18 amendment shall be appointed (by majority 19 vote) by the individuals who, as of the date 20 of such amendment, are voting members of 21 the Board and persons so appointed may 22 represent any of the categories specified in subclauses (I) through (V) of clause (i), so 23 24 long as no more than 30 percent of the total 25 voting members of the Board (including 26 members whose positions are established by

1	such amendment) are representatives of the
2	general pharmaceutical, device, food, cos-
3	metic, and biotechnology industries."; and
4	(C) in clause (iii)(I), as redesignated by
5	subparagraph (A), by striking "The ex officio
6	members shall ensure" and inserting "The ex
7	officio members, acting pursuant to clause (i),
8	and the Board, acting pursuant to clause (ii),
9	shall ensure".
10	(2) Federal employees allowed to serve
11	ON BOARD.—Clause (iii)(II) of section 770(d)(1)(C) of
12	the Federal Food, Drug, and Cosmetic Act (21 U.S.C.
13	379dd(d)(1)(C)),  as  redesignated  by  paragraph
14	(1)(A), is amended by adding at the end the fol-
15	lowing: "For purposes of this section, the term 'em-
16	ployee of the Federal Government' does not include a
17	'special Government employee', as that term is de-
18	fined in section 202(a) of title 18, United States
19	Code. ".
20	(3) Staggered terms.—Subparagraph (A) of
21	section 770(d)(3) of the Federal Food, Drug, and Cos-
22	metic Act (21 U.S.C. 379dd(d)(3)) is amended to read
23	as follows:
24	"(A) TERM.—The term of office of each
25	member of the Board appointed under para-

1 graph (1)(C)(i), and the term of office of any 2 member of the Board whose position is estab-3 lished pursuant to paragraph (1)(C)(ii), shall be 4 4 years, except that— "(i) the terms of offices for the members 5 6 of the Board initially appointed under 7 paragraph (1)(C)(i) shall expire on a stag-8 gered basis as determined by the ex officio 9 members: and 10 "(ii) the terms of office for the persons 11 initially appointed to positions established 12 pursuant to paragraph (1)(C)(ii) may be 13 made to expire on a staggered basis, as de-14 termined by the individuals who, as of the 15 date of the amendment establishing such po-16 sitions, are members of the Board.". 17 (b) Executive Director Compensation.—Section 18 770(q)(2) of the Federal Food, Drug, and Cosmetic Act (21  $U.S.C.\ 379dd(g)(2)$ ) is amended by striking 'but shall not 19 be greater than the compensation of the Commissioner". 21 (c) SEPARATION OF FUNDS.—Section 770(m) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 379dd(m)) is amended by striking "are held in separate accounts from funds received from entities under subsection (i)" and inserting "are managed as individual pro-

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grammatic funds under subsection (i), according to best ac-
   counting practices".
   SEC. 7. NIH RESEARCH INFORMATION COLLECTION EX-
 4
                EMPTED FROM PAPERWORK REDUCTION ACT.
 5
        Section 301 of the Public Health Service Act (42)
    U.S.C. 241) is amended by adding to the end the following:
 7
        "(f) Paperwork Reduction.—Subchapter I of chap-
   ter 35 of title 44, United States Code, shall not apply to
   the collection of information during the conduct of research
   by the National Institutes of Health.".
   SEC. 8. STUDIES.
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        The Federal Food, Drug, and Cosmetic Act is amend-
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   ed—
14
             (1) in section 505(k)(5) (21 U.S.C. 355(k)(5))—
15
                  (A) in subparagraph (A), by inserting
             "and" after the semicolon;
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17
                  (B) by striking subparagraph (B); and
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                  (C) by redesignating subparagraph (C) as
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             subparagraph (B);
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             (2) in section 505A (21 U.S.C. 355a), by striking
21
        subsection (p):
22
             (3) in section 505B (21 U.S.C. 355c)—
23
                  (A) by striking subsection (l); and
24
                  (B) by redesignating subsection (m) as sub-
25
             section (1); and
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1	(4) in section 523 (21 U.S.C. 360m), by striking
2	subsection (d).
3	SEC. 9. SUMMARY LEVEL REVIEW.
4	Section 505(c) of the Federal Food, Drug, and Cos-
5	metic Act (21 U.S.C. 355(c)) is amended by adding at the
6	end the following:
7	"(5)(A) The Secretary may rely upon qualified
8	data summaries to support the approval of a supple-
9	mental application, with respect to a qualified indi-
10	cation for a drug, submitted under subsection (b) or
11	section 351(a) of the Public Health Service Act, if
12	such supplemental application complies with sub-
13	paragraph (B).
14	"(B) A supplemental application is eligible for
15	review as described in subparagraph (A) only if—
16	"(i) there is existing data available and ac-
17	ceptable to the Secretary demonstrating the safe-
18	ty of the drug; and
19	"(ii) all data used to develop the qualified
20	data summaries are submitted to the Secretary
21	as part of the supplemental application.
22	"(C) In this paragraph—
23	"(i) the term 'qualified indication' means
24	an indication for a drug that the Secretary de-

1	termines to be appropriate for summary level re-
2	view under this paragraph; and
3	"(ii) the term 'qualified data summary'
4	means a summary of clinical data that dem-
5	onstrates the safety and effectiveness of a drug
6	with respect to a qualified indication.".
7	SEC. 10. DRUG SURVEILLANCE.
8	(a) New Drugs.—Section 505(k)(5) of the Federal
9	Food, Drug, and Cosmetic Act (21 U.S.C. 355(k)(5)), as
10	amended by section 8, is further amended—
11	(1) in subparagraph (A), by striking ", bi-weekly
12	screening" and inserting "screenings";
13	(2) in subparagraph (B), as redesignated by sec-
14	tion 8(1)(C), by striking the period at the end and in-
15	serting "; and"; and
16	(3) by adding at the end the following:
17	"(C) make available on the Internet website
18	of the Food and Drug Administration—
19	"(i) guidelines, developed with input
20	from experts qualified by scientific training
21	and experience to evaluate the safety and ef-
22	fectiveness of drugs, that detail best prac-
23	tices for drug safety surveillance using the
24	FDA Adverse Event Reporting Systems;
25	and

1	"(ii) criteria for public posting of ad-
2	verse event signals.".
3	(b) FAERS REVISION.—Section 505(r)(2)(D) of the
4	Federal Food, Drug, and Cosmetic Act (21 U.S.C.
5	355(r)(2)(D)) is amended by striking ", by 18 months" and
6	all that follows through the semicolon at the end of the sub-
7	paragraph and inserting "and making publicly available
8	on the Internet Web site established under paragraph (1)
9	best practices for drug safety surveillance activities for
10	drugs newly approved under this section or section 351 of
11	the Public Health Service Act;".
12	(c) Risk Evaluation and Mitigation Strate-
13	GIES.—Section 505–1(f)(5) of the Federal Food, Drug, and
14	Cosmetic Act (21 U.S.C. 355–1(f)(5)) is amended—
15	(1) in the matter preceding subparagraph (A),
16	by inserting "or other advisory committee" after "(or
17	successor committee)"; and
18	(2) in subparagraph (B), by striking "at least
19	annually," and inserting "periodically".
20	SEC. 11. BIOLOGICAL PRODUCT INNOVATION.
21	Section 351(j) of the Public Health Service Act (42
22	U.S.C. 262(j)) is amended by striking "except that" and
23	all that follows through the period at the end and inserting
24	"except that—

- 1 "(1) a product for which a license has been approved under this section shall not be required to have
  3 an approved application under section 505 of such
  4 Act; and
  5 "(2) those provisions of the Federal Food, Drug,
  6 and Cosmetic Act that refer to an official compen-
- dium as defined under section 201(j) of such Act shall
   not apply to a biological product subject to regulation
- 9 under this section.".

### 10 SEC. 12. EXPANDED ACCESS POLICY.

- 11 Chapter V of the Federal Food, Drug, and Cosmetic
- 12 Act is amended by inserting after section 561 (21 U.S.C.
- 13 *360bbb) the following:*
- 14 "SEC. 561A. EXPANDED ACCESS POLICY REQUIRED FOR IN-
- 15 **VESTIGATIONAL DRUGS.**
- 16 "(a) In General.—The manufacturer or distributor
- 17 of one or more investigational drugs for the diagnosis, cure,
- 18 mitigation, treatment, or prevention of one or more serious
- 19 diseases or conditions shall make available the policy of the
- 20 manufacturer or distributor on evaluating and responding
- 21 to requests submitted under section 561(b) for provision of
- 22 such a drug.
- 23 "(b) Public Availability of Expanded Access
- 24 Policy.—The policies under subsection (a) shall be made
- 25 public and readily available, such as by posting such poli-

- cies on a publicly available Internet website. Such policies may be generally applicable to all investigational drugs of such manufacturer or distributor. 3 4 "(c) Content of Policy.—A policy described in subsection (a) shall include— "(1) contact information for the manufacturer or 6 7 distributor to facilitate communication about requests 8 described in subsection (a); 9 "(2) procedures for making such requests; 10 "(3) the general criteria the manufacturer or dis-11 tributor will use to evaluate such requests for indi-12 vidual patients, and for responses to such requests; 13 and 14 "(4) the length of time the manufacturer or dis-15 tributor anticipates will be necessary to acknowledge 16 receipt of such requests. 17 "(d) No Guarantee of Access.—The posting of policies by manufacturers and distributors under subsection 18 19 (a) shall not serve as a guarantee of access to any specific investigational drug by any individual patient. 20 21 "(e) Revised Policy.—Nothing in this section shall
- 22 prevent a manufacturer or distributor from revising a pol-
- 23 icy required under this section at any time.

1 "(f) APPLICATION.—This section shall apply to a man-2 ufacturer or distributor with respect to an investigational 3 drug beginning on the later of— 4 "(1) the date that is 60 calendar days after the 5 date of enactment of the FDA and NIH Workforce 6 Authorities Modernization Act: or 7 "(2) the first initiation of a phase 2 or phase 3 8 study (as such terms are defined in section 312.21(b) 9 and (c) of title 21, Code of Federal Regulations (or any successor regulations)) with respect to such inves-10 11 tigational drug.". 12 SEC. 13. FINALIZING DRAFT GUIDANCE ON EXPANDED AC-13 CESS. 14 (a) In General.—Not later than 1 year after the date 15 of enactment of this Act, the Secretary of Health and Human Services shall finalize the draft guidance entitled "Expanded Access to Investigational Drugs for Treatment Use—Qs & As", dated May 2013. 18 19 (b) Contents.—The final guidance described in subsection (a) shall explain how the Secretary of Health and 21 Human Services considers and uses adverse drug event data reported by investigators in the case of data reported from 23 use under a request submitted under section 561(b) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C.

360bbb(b)).

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# 1 SEC. 14. AMENDMENTS TO THE ORPHAN DRUG ACT.

2	Section 5 of the Orphan Drug Act (21 U.S.C. 360ee)
3	is amended—
4	(1) in subsection (a), by striking paragraph (1)
5	and inserting the following: "(1) defraying the costs
6	of developing drugs for rare diseases or conditions, in-
7	cluding qualified testing expenses,"; and
8	(2) in subsection (b)(1)—
9	(A) in subparagraph (A)(ii), by striking
10	"and" after the semicolon;
11	(B) in subparagraph (B), by striking the
12	period and inserting "; and"; and
13	(C) by adding at the end the following:
14	"(C) prospectively planned and designed ob-
15	servational studies and other analyses conducted
16	to assist in the understanding of the natural his-
17	tory of a rare disease or condition and in the de-
18	velopment of a therapy, including studies and
19	analyses to—
20	"(i) develop or validate a drug develop-
21	ment tool related to a rare disease or condi-
22	tion; or
23	"(ii) understand the full spectrum of
24	the disease manifestations, including de-
25	scribing genotypic and phenotypic varia-
26	bility and identifying and defining distinct

1	subpopulations affected by a rare disease or
2	condition.".
3	SEC. 15. STANDARDS FOR REGENERATIVE MEDICINE AND
4	ADVANCED THERAPIES.
5	Subchapter A of chapter V of the Federal Food, Drug,
6	and Cosmetic Act (21 U.S.C. 351 et seq.) is amended by
7	inserting after section 506F the following:
8	"SEC. 506G. STANDARDS FOR REGENERATIVE MEDICINE
9	AND ADVANCED THERAPIES.
10	"(a) In General.—The Secretary, in consultation
11	with the National Institute of Standards and Technology
12	and stakeholders (including regenerative medicine and ad-
13	vanced therapies manufacturers and clinical trial sponsors,
14	contract manufacturers, academic institutions, practicing
15	clinicians, regenerative medicine and advanced therapies
16	industry organizations, and standard setting organiza-
17	tions), shall facilitate an effort to coordinate and prioritize
18	the development of standards, through a transparent public
19	process, that will help support product development, evalua-
20	tion, and review, with respect to regenerative medicine and
21	advanced therapies, through regulatory predictability, in-
22	cluding with regard to manufacturing processes and con-
23	trols for regenerative medicine and advanced therapies
24	products.
25	"(b) Activities.—

1	"(1) In general.—In carrying out this section,
2	the Secretary shall continue to—
3	"(A) identify opportunities to help advance
4	the development of regenerative medicine and ad-
5	vanced therapies;
6	"(B) identify opportunities for the develop-
7	ment of laboratory regulatory science research
8	and documentary standards that the Secretary
9	determines would help support the development,
10	evaluation, and review of regenerative medicine
11	and advanced therapies through regulatory pre-
12	dictability; and
13	"(C) work with stakeholders, such as those
14	described in subsection (a), as appropriate, in
15	the development of such standards.
16	"(2) Regulations and Guidance.—After the
17	development of standards as described in subsection
18	(a), the Secretary shall review relevant regulations
19	and guidance and, through a transparent public proc-
20	ess, update such regulations and guidance as the Sec-
21	retary determines appropriate.
22	"(c) Definition.—For purposes of this section, the
23	term 'regenerative medicine and advanced therapies' in-
24	cludes cell therapy, gene therapy, gene-modified cell ther-
25	apy, therapeutic tissue engineering products, human cell

1	and tissue products, and combination products using any
2	such therapies or products.".
3	SEC. 16. GOOD GUIDANCE PRACTICES.
4	(a) In General.—Section 701(h)(1)(C) of the Federal
5	Food, Drug, and Cosmetic Act (21 U.S.C. 371(h)(1)(C)) is
6	amended—
7	(1) by moving the margin of clause (ii) 2 ems
8	to the left; and
9	(2) by adding at the end the following:
10	"(iii) When proposing or finalizing
11	any guidance document under this subpara-
12	graph, the Secretary shall include in the
13	guidance document a statement, the con-
14	tents of which are committed to the discre-
15	tion of the Secretary—
16	"(I) explaining why the interpre-
17	tation or policy set forth in such guid-
18	ance document is being provided in a
19	nonbinding guidance document and
20	$not \ \ established \ \ through \ \ rule making;$
21	and
22	"(II) identifying each specific
23	statutory provision or regulation being
24	interpreted in the guidance document

1	or authorizing a policy decision de-
2	scribed in the guidance document.".
3	(b) Effective Date.—The amendment made under
4	subsection (a)(2) shall take effect with respect to any appli-
5	cable guidance documents that are issued on or after the
6	date that is 3 months after the date of enactment of this
7	Act.
8	SEC. 17. PAPERWORK REDUCTION ACT WAIVER DURING A
9	PUBLIC HEALTH EMERGENCY.
10	Section 319 of the Public Health Service Act (42
11	U.S.C. 247d) is amended by adding at the end the fol-
12	lowing:
13	"(f) Determination With Respect to Paperwork
14	REDUCTION ACT WAIVER DURING A PUBLIC HEALTH
15	Emergency.—
16	"(1) Determination.—If the Secretary deter-
17	mines, after consultation with such public health offi-
18	cials as may be necessary, that—
19	"(A)(i) the criteria set forth for a public
20	health emergency under paragraph (1) or (2) of
21	subsection (a) has been met; or
22	"(ii) a disease or disorder, including a
23	novel and emerging public health threat, is sig-
24	nificantly likely to become a public health emer-
25	gency; and

"(B) the circumstances of such public health emergency, or potential for such significantly likely public health emergency, including the specific preparation for and response to such public health emergency or threat, necessitate a waiver from the requirements of subchapter I of chapter 35 of title 44, United States Code (commonly referred to as the Paperwork Reduction Act);

then the requirements of such subchapter I with respect to voluntary collection of information shall not be applicable during the immediate investigation of, and response to, such public health emergency during the period of such public health emergency or the period of time necessary to determine if a disease or disorder, including a novel and emerging public health threat, will become a public health emergency as provided for in this paragraph. The requirements of such subchapter I with respect to voluntary collection of information shall not be applicable during the immediate post-response review regarding such public health emergency if such immediate post-response review does not exceed a reasonable length of time.

"(2) Transparency.—If the Secretary determines that a waiver is necessary under paragraph (1), the Secretary shall promptly post on the Internet

- website of the Department of Health and Human Services a brief justification for such waiver, the anticipated period of time such waiver will be in effect, and the agencies and offices within the Department of Health and Human Services to which such waiver shall apply, and update such information posted on the Internet website of the Department of Health and Human Services, as applicable.
  - "(3) Effectiveness of Waiver.—Any waiver under this subsection shall take effect on the date on which the Secretary posts information on the Internet website as provided for in this subsection.
  - "(4) TERMINATION OF WAIVER.—Upon determining that the circumstances necessitating a waiver under paragraph (1) no longer exist, the Secretary shall promptly update the Internet website of the Department of Health and Human Services to reflect the termination of such waiver.

## "(5) Limitations.—

"(A) PERIOD OF WAIVER.—The period of a waiver under paragraph (1) shall not exceed the period of time for the related public health emergency, including a public health emergency declared pursuant to subsection (a), and any immediate post-response review regarding the pub-

lic health emergency consistent with the require ments of this subsection.

"(B) Subsequent compliance.—An initiative subject to a waiver under paragraph (1) that is ongoing after the date on which the waiver expires, shall be subject to the requirements of subchapter I of chapter 35 of title 44, United States Code, and the Secretary shall ensure that compliance with such requirements occurs in as timely a manner as possible based on the applicable circumstances, but not to exceed 30 calendar days after the expiration of the applicable waiver."

### 14 SEC. 18. TECHNICAL CORRECTIONS.

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- 15 (a) REFERENCES.—Except as otherwise expressly pro-16 vided, whenever in this subsection an amendment is ex-17 pressed in terms of an amendment to a section or other pro-18 vision, the reference shall be considered to be made to that 19 section or other provision of the Federal Food, Drug, and 20 Cosmetic Act (21 U.S.C. 301 et seq.).
- 21 *(b) AMENDMENTS.*—
- 22 (1) PROHIBITED ACTS.—Section 301(r) of the 23 Act (21 U.S.C. 331(r)) is amended by inserting ", 24 drug," after "device" each place the term appears.

1	(2) NEW DRUGS.—Section 505 of the Act (21
2	U.S.C. 355) is amended—
3	(A) in subsection (d), in the last sentence,
4	by striking "premarket approval" and inserting
5	"marketing approval"; and
6	(B) in subsection $(q)(5)(A)$ , by striking
7	"subsection (b)(2) or (j) of the Act or 351(k)"
8	and inserting "subsection (b)(2) or (j) of this sec-
9	tion or section 351(k)".
10	(3) Risk evaluation and mitigation strate-
11	GIES.—Section 505–1(h) of the Act (21 U.S.C. 355–
12	1(h)) is amended—
13	(A) in paragraph $(2)(A)(iii)$ —
14	(i) in the clause heading, by striking
15	"LABEL" and inserting "LABELING";
16	(ii) by striking "label" each place the
17	term appears and inserting 'labeling'; and
18	(iii) by striking "sponsor" and insert-
19	ing "responsible person"; and
20	(B) in paragraph (8), by striking "and
21	(7)." and inserting "and (7)".
22	(4) Pediatric study plans.—Section 505B of
23	the Act (21 U.S.C. 355c) is amended—
24	(A) in subsection (e)—
25	(i) in paragraph (2)—

1	(I) in subparagraph (A), in the
2	matter preceding clause (i), by insert-
3	ing "study" after "initial pediatric"
4	each place the term appears; and
5	(II) in subparagraph (B), in the
6	subparagraph heading, by striking
7	"INITIAL PLAN" and inserting "INITIAL
8	PEDIATRIC STUDY PLAN'';
9	(ii) in paragraph (5), by inserting
10	"AGREED INITIAL PEDIATRIC STUDY" before
11	"PLAN" in the paragraph heading; and
12	(iii) in paragraph (6), by striking
13	"agreed initial pediatric plan" and insert-
14	ing "agreed initial pediatric study plan";
15	and
16	(B) in subsection (f)(1), by inserting "and
17	any significant amendments to such plans,"
18	after "agreed initial pediatric study plans,".
19	(5) Discontinuance or interruption in the
20	PRODUCTION OF LIVE-SAVING DRUGS.—Section 506C
21	of the Act (21 U.S.C. 356c) is amended—
22	(A) in subsection (c), by striking "dis-
23	continuation" and inserting "discontinuance";
24	and

1	(B) in subsection $(g)(1)$ , by striking "sec-
2	tion 505(j) that could help" and inserting "sec-
3	tion 505(j), that could help".
4	(6) Annual reporting on drug shortages.—
5	Section 506C-1(a) of the Act (21 U.S.C. 331(a)) is
6	amended, in the matter before paragraph (1)—
7	(A) by striking "Not later than the end of
8	calendar year 2013, and not later than the end
9	of each calendar year thereafter," and inserting
10	"Not later than March 31 of each calendar
11	year,"; and
12	(B) by inserting ", with respect to the pre-
13	ceding calendar year," after "a report".
14	(7) Drug shortage list.—Section
15	506E(b)(3)(E) of the Act (21 U.S.C. $356e(b)(3)(E)$ ) is
16	amended by striking "discontinuation" and inserting
17	"discontinuance".
18	(8) Inspections of establishments.—Section
19	510(h) of the Act (21 U.S.C. 360(h)) is amended—
20	(A) in paragraph (4), in the matter pre-
21	ceding subparagraph (A), by striking "estab-
22	lishing the risk-based scheduled" and inserting
23	"establishing a risk-based schedule"; and
24	(B) in paragraph (6)—

1	(i) in subparagraph (A), by striking
2	"fiscal" and inserting "calendar" each place
3	the term appears; and
4	(ii) in subparagraph (B), by striking
5	"an active ingredient of a drug, a finished
6	drug product, or an excipient of a drug"
7	and inserting "an active ingredient of a
8	drug or a finished drug product".
9	(9) Classification of devices intended for
10	HUMAN USE.—Section $513(f)(2)(A)$ of the Act (21)
11	$U.S.C.\ 360c(f)(2)(A))$ is amended—
12	(A) in clause (i), by striking "within 30
13	days"; and
14	(B) in clause (iv), by striking 'low-mod-
15	erate" and inserting "low to moderate".
16	(10) Premarket approval.—Section 515(a)(1)
17	of the Act (21 U.S.C. 360e(a)(1)) is amended by strik-
18	ing "subject to a an order" and inserting "subject to
19	an order".
20	(11) Program to improve the device recall
21	System.—Section 518A of the Act (21 U.S.C. 360h-
22	1) is amended—
23	(A) by striking subsection (c); and
24	(B) by redesignating subsection (d) as sub-
25	section (c).

1	(12) Unique device identifier.—Section
2	519(f) of the Act (21 U.S.C. 360i(f)) is amended by
3	striking "and life sustaining" and inserting "or life
4	sustaining".
5	(13) Priority review for qualified infec-
6	TIOUS DISEASE PRODUCTS.—Section 524A of the Act
7	(21 U.S.C. 360n-1) is amended—
8	(A) by striking "If the Secretary" and in-
9	serting the following:
10	"(a) In General.—If the Secretary";
11	(B) by striking "any" and inserting "the
12	first"; and
13	(C) by adding at the end the following:
14	"(b) Construction.—Nothing in this section shall
15	prohibit the Secretary from giving priority review to a
16	human drug application or efficacy supplement submitted
17	for approval under section 505(b) that otherwise meets the
18	criteria for the Secretary to grant priority review.".
19	(14) Consultation with external experts
20	ON RARE DISEASES, TARGETED THERAPIES, AND GE-
21	NETIC TARGETING OF TREATMENTS.—Section
22	569(a)(2)(A) of the $Act$ (21 U.S.C. $360bbb$ -
23	8(a)(2)(A)) is amended, in the first sentence, by strik-
24	ing "subsection (c)" and inserting "subsection (b)".

1	(15) Optimizing global clinical trials.—
2	Section 569A(c) of the Act (21 U.S.C. 360bbb-8a(c))
3	is amended by inserting "or under the Public Health
4	Service Act" after "this Act".
5	(16) Use of clinical investigation data
6	FROM OUTSIDE THE UNITED STATES.—Section 569B
7	of the Act (21 U.S.C. 360bbb-8b) is amended by strik-
8	ing "drug or device" and inserting "drug, biological
9	product, or device" each place the term appears.
10	(17) Medical gases definitions.—Section
11	575(1)(H) of the Act (21 U.S.C. 360ddd(1)(H)) is
12	amended—
13	(A) by inserting "for a new drug" after
14	"any period of exclusivity"; and
15	(B) by inserting "or any period of exclu-
16	sivity for a new animal drug under section
17	512(c)(2)(F)," after "section $505A$ ,".
18	(18) REGULATION OF MEDICAL GASES.—Section
19	576(a) of the Act (21 U.S.C. 360ddd-1(a)) is amend-
20	ed—
21	(A) in the matter preceding subparagraph
22	(A) of paragraph (1), by inserting "who seeks to
23	initially introduce or deliver for introduction a
24	designated medical gas into interstate commerce"
25	after "any person"; and

1	(B) in paragraph (3)—
2	$(i) \ in \ subparagraph \ (A)$ —
3	(I) in clause (i)(VIII), by insert-
4	ing "for a new drug" after "any period
5	of exclusivity"; and
6	(II) in clause (ii), in the matter
7	preceding subclause (I), by inserting
8	"the" before "final use"; and
9	(ii) in subparagraph (B)—
10	(I) in clause (i), by inserting "for
11	a new drug" after "any period of ex-
12	clusivity"; and
13	(II) in clause (ii), by inserting a
14	comma after "drug product".
15	(19) Inapplicability of drug fees to des-
16	IGNATED MEDICAL GASES.—Section 577 of this Act
17	(21 U.S.C. 360ddd-2) is amended by inserting "or
18	740(a)" after "section 736(a)".
19	(20) Conflicts of interest.—Section
20	712(e)(1)(B) of the Act (21 U.S.C. $379d-1(e)(1)(B)$ )
21	is amended by striking "services" and inserting
22	"service".
23	(21) Authority to assess and use bio-
24	SIMILAR BIOLOGICAL PRODUCT FEES.—Section

1	744H(a) of the Act (21 U.S.C. 379j–52(a)) is amend-
2	ed—
3	(A) in paragraph $(1)(A)(v)$ , by striking
4	"Biosimilars User Fee Act of 2012" and insert-
5	ing "Biosimilar User Fee Act of 2012"; and
6	(B) in paragraph $(2)(B)$ , by striking
7	"Biosimilars User Fee Act of 2012" and insert-
8	ing "Biosimilar User Fee Act of 2012".
9	(22) Registration of commercial import-
10	ERS.—
11	(A) Amendment.—Section 801(s)(2) of the
12	Act (21 U.S.C. 381(s)(2)) is amended by adding
13	at the end the following:
14	"(D) Effective date.—In establishing the
15	effective date of the regulations under subpara-
16	graph (A), the Secretary shall, in consultation
17	with the Secretary of Homeland Security acting
18	through U.S. Customs and Border Protection, as
19	determined appropriate by the Secretary of
20	Health and Human Services, provide a reason-
21	able period of time for an importer of a drug to
22	comply with good importer practices, taking into
23	account differences among importers and types
24	of imports, including based on the level of risk
25	posed by the imported product.".

1	(B) Conforming amendment.—Section
2	714 of the Food and Drug Administration Safety
3	and Innovation Act (Public Law 112–144; 126
4	Stat. 1074) is amended by striking subsection
5	(d).
6	(23) Recognition of foreign government in-
7	Spections.—Section 809(a)(2) of the Act (21 U.S.C.
8	384e(a)(2)) is amended by striking "conduction" and
9	inserting "conducting".
10	(24) Findings relating to drug approval.—
11	Section 901(a)(1)(A) of the Food and Drug Adminis-
12	tration Safety and Innovation Act (Public Law 112-
13	144; 21 U.S.C. 356 note) is amended by striking "se-
14	rious and life-threatening diseases" and inserting "se-
15	rious or life-threatening diseases".
16	(25) Reporting of inclusion of demo-
17	GRAPHIC SUBGROUPS.—Section 907 of the Food and
18	Drug Administration Safety and Innovation Act
19	(Public Law 112–144; 126 Stat. 1092, 1093) is
20	amended—
21	(A) in the section heading, by striking
22	"BIOLOGICS" in the heading and inserting
23	"BIOLOGICAL PRODUCTS"; and

1	(B) in subsection $(a)(2)(B)$ , by striking
2	"applications for new drug applications" and
3	inserting "new drug applications".
4	(26) Combating prescription drug abuse.—
5	Section 1122 of the Food and Drug Administration
6	Safety and Innovation Act (Public Law 112–144; 126
7	Stat. 1112, 1113) is amended—
8	(A) in subsection $(a)(2)$ , by striking
9	"dependance" and inserting "dependence"; and
10	(B) in subsection (c), by striking "promul-
11	gate" and inserting "issue".

# Calendar No. 427

114TH CONGRESS S. 2700

# A BILL

To update the authorizing provisions relating to the workforces of the National Institutes of Health and the Food and Drug Administration, and for other purposes.

 $\begin{array}{c} \text{April 18, 2016} \\ \text{Reported with an amendment} \end{array}$