

Union Calendar No. 167

116TH CONGRESS
1ST SESSION

H. R. 3525

[Report No. 116-211]

To amend the Homeland Security Act of 2002 to direct the Commissioner of U.S. Customs and Border Protection to establish uniform processes for medical screening of individuals interdicted between ports of entry, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JUNE 27, 2019

Ms. UNDERWOOD introduced the following bill; which was referred to the Committee on Homeland Security

SEPTEMBER 18, 2019

Additional sponsors: Mr. PAYNE, Mr. RICHMOND, Mr. THOMPSON of Mississippi, Mr. MEEKS, Mr. VEASEY, Mr. JOHNSON of Georgia, Mrs. BEATTY, Mr. EVANS, Ms. PRESSLEY, Ms. LEE of California, Ms. KELLY of Illinois, Ms. CLARKE of New York, Mrs. WATSON COLEMAN, Ms. FUDGE, Ms. JOHNSON of Texas, Mr. DANNY K. DAVIS of Illinois, Mr. RUSH, Mr. LEWIS, Mr. CLYBURN, Mr. SUOZZI, and Mr. WELCH

SEPTEMBER 18, 2019

Reported with an amendment, committed to the Committee of the Whole House on the State of the Union, and ordered to be printed

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

[For text of introduced bill, see copy of bill as introduced on June 27, 2019]

A BILL

To amend the Homeland Security Act of 2002 to direct the Commissioner of U.S. Customs and Border Protection to establish uniform processes for medical screening of individuals interdicted between ports of entry, 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 “U.S. Border Patrol Med-*
5 *ical Screening Standards Act”.*

6 **SEC. 2. UNIFORM PROCESSES FOR MEDICAL SCREENING OF**
7 **INDIVIDUALS INTERDICTED BETWEEN PORTS**
8 **OF ENTRY.**

9 *(a) IN GENERAL.—Subtitle C of title IV of the Home-*
10 *land Security Act of 2002 (6 U.S.C. 231) is amended by*
11 *adding at the end the following new section:*

12 **“SEC. 437. MEDICAL SCREENING OF INDIVIDUALS INTER-**
13 **DICTED BETWEEN PORTS OF ENTRY.**

14 *“(a) IN GENERAL.—To improve border security and*
15 *the processing of individuals and families interdicted by the*
16 *U.S. Border Patrol between ports of entry, the Commis-*
17 *sioner of U.S. Customs and Border Protection, in coordina-*
18 *tion with the Chief Medical Officer of the Department, shall,*
19 *not later than 30 days after the date of the enactment of*
20 *this section, establish uniform processes and training to en-*
21 *sure consistent and efficient medical screening of all indi-*
22 *viduals, with priority given to children who have not yet*
23 *attained the age of 18, so interdicted before transfer from*
24 *U.S. Customs and Border Protection custody, but in no case*
25 *longer than 12 hours after such interdiction, or 6 hours in*

1 *the case of a high priority individual. Such screening*
2 *should be conducted by a medical professional and should*
3 *be developed in collaboration with non-governmental ex-*
4 *perts in the delivery of health care in humanitarian crises*
5 *and in the delivery of health care to children.*

6 “(b) *SCREENING PROCESS COMPONENTS.—At a min-*
7 *imum, the uniform processes and training established under*
8 *subsection (a) shall include the following:*

9 “(1) *Requirements for initial in-person screening*
10 *that includes documentation of the following:*

11 “(A) *Visual assessment of overall physical*
12 *and behavioral state, including any possible dis-*
13 *ability.*

14 “(B) *A brief medical history, including de-*
15 *mographic information, current medications (in-*
16 *cluding a list of confiscated medications and*
17 *whether such have been replaced), and any*
18 *chronic or past illnesses.*

19 “(C) *Any current medical complaints.*

20 “(D) *A physical examination that includes*
21 *the screening of vital signs such as body tem-*
22 *perature, pulse rate, and blood pressure.*

23 “(2) *Criteria for determining when to make a re-*
24 *ferral to higher medical care and a process to execute*
25 *such referral.*

1 “(3) *Recordkeeping requirements regarding how*
2 *information is to be recorded for each initial screen-*
3 *ing under paragraph (1), including information on*
4 *the use of interpretation services.*

5 “(4) *Review by a medical professional of any*
6 *prescribed medication that is in the detainee’s posses-*
7 *sion or that was confiscated upon arrival to deter-*
8 *mine if such medication may be kept by such detainee*
9 *for use during detention, properly stored with appro-*
10 *prate access for use during detention, or maintained*
11 *with a detainee’s personal property.*

12 “(5) *Chaperones for the physical examination of*
13 *minors, including, as appropriate, the parent, legal*
14 *guardian, or the such minors’ closest present adult*
15 *relative, or a U.S. Border Patrol agent of the same*
16 *gender.*

17 “(c) *PEDIATRIC EXPERTISE.—A pediatric medical ex-*
18 *pert shall be on site in every U.S. Border Patrol sector,*
19 *including at U.S. Border Patrol processing centers and at*
20 *U.S. Border Patrol facilities at which 20 percent or more*
21 *of detained individuals over the immediately preceding six*
22 *month period are minors. The Chief of the U.S. Border Pa-*
23 *trol shall prepare a plan to deploy in-person or technology-*
24 *facilitated medical consultation with a licensed medical*
25 *professional to U.S. Border Patrol facilities that experience*

1 *an increase in apprehensions of children greater than 10*
2 *percent over the preceding 60 days.*

3 “(d) *DEFINITION.*—*In this section, the term ‘high pri-*
4 *ority individual’ means an individual who self-identifies*
5 *as having a medical condition needing prompt attention,*
6 *exhibits signs of acute illness, is pregnant, is a child, or*
7 *is elderly.*”

8 “(e) *TRAINING.*—*Not later than 60 days after the*
9 *issuance of the uniform processes and training established*
10 *under subsection (a), the Commissioner of U.S. Customs*
11 *and Border Protection shall ensure that any individual car-*
12 *rying out medical screening under this section at a U.S.*
13 *Customs and Border Protection facility of individuals*
14 *interdicted by the U.S. Border Patrol between ports of entry*
15 *shall complete training on such uniform processes.”.*

16 “(b) *RULE OF CONSTRUCTION.*—*Nothing in this section*
17 *or the amendment made by this section may be construed*
18 *as authorizing U.S. Customs and Border Protection to de-*
19 *tain individuals for longer than 72 hours.*”

20 “(c) *CLERICAL AMENDMENT.*—*The table of contents in*
21 *section 1(b) of the Homeland Security Act of 2002 is*
22 *amended by inserting after the item relating to section 436*
23 *the following new item:*

“*Sec. 437. Medical screening of individuals interdicted between ports of entry.*”.

1 **SEC. 3. RESEARCH REGARDING PROVISION OF MEDICAL**
2 **SCREENING OF INDIVIDUALS INTERDICTED**
3 **BY U.S. CUSTOMS AND BORDER PROTECTION**
4 **BETWEEN PORTS OF ENTRY.**

5 (a) *IN GENERAL.*—Not later than one year after the
6 date of the enactment of this Act, the Secretary of Homeland
7 Security, acting through the Under Secretary for Science
8 and Technology of the Department of Homeland Security,
9 in coordination with the Commissioner of U.S. Customs
10 and Border Protection and the Chief Medical Officer of the
11 Department, shall research innovative approaches to ad-
12 dress capability gaps regarding the provision of comprehen-
13 sive medical screening of individuals, particularly children,
14 pregnant women, the elderly, and other vulnerable popu-
15 lations, interdicted by U.S. Customs and Border Protection
16 between ports of entry and issue to the Secretary rec-
17 ommendations for any necessary corrective actions.

18 (b) *CONSULTATION.*—In carrying out the research re-
19 quired under subsection (a), the Under Secretary for
20 Science and Technology of the Department of Homeland Se-
21 curity shall consult with appropriate national professional
22 associations with expertise and non-governmental experts
23 in emergency, nursing, and other medical care, including
24 pediatric care.

25 (c) *REPORT.*—The Secretary of Homeland Security
26 shall submit to the Committee on Homeland Security of the

1 *House of Representatives and the Committee on Homeland*
2 *Security and Governmental Affairs of the Senate a report*
3 *containing the recommendations referred to in subsection*
4 *(a), together with information relating to what actions, if*
5 *any, the Secretary plans to take in response to such rec-*
6 *ommendations.*

7 **SEC. 4. ELECTRONIC HEALTH RECORDS IMPLEMENTATION.**

8 *(a) IN GENERAL.—Not later than 30 days after the*
9 *date of the enactment of this Act, the Chief Information Of-*
10 *ficer of the Department of Homeland Security, in coordina-*
11 *tion with the Chief Medical Officer of the Department, shall*
12 *establish within the Department an electronic health record*
13 *system that can be accessed by all departmental components*
14 *operating along the borders of the United States for individ-*
15 *uals in the custody of such components.*

16 *(b) ASSESSMENT.—Not later than 120 days after the*
17 *implementation of the electronic health records system, the*
18 *Chief Information Officer, in coordination with the Chief*
19 *Medical Officer, shall conduct an assessment of such system*
20 *to determine system capacity for improvement and inter-*
21 *operability.*

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