

TO AMEND TITLE II OF THE PUBLIC HEALTH SERVICE ACT TO INCLUDE AS AN ADDITIONAL RIGHT OR PRIVILEGE OF COMMISSIONED OFFICERS OF THE PUBLIC HEALTH SERVICE (AND THEIR BENEFICIARIES) CERTAIN LEAVE PROVIDED UNDER TITLE 10, UNITED STATES CODE TO COMMISSIONED OFFICERS OF THE ARMY (OR THEIR BENEFICIARIES)

OCTOBER 3, 2025.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mr. GUTHRIE, from the Committee on Energy and Commerce,
submitted the following

REPORT

[To accompany H.R. 2846]

The Committee on Energy and Commerce, to whom was referred the bill (H.R. 2846) to amend title II of the Public Health Service Act to include as an additional right or privilege of commissioned officers of the Public Health Service (and their beneficiaries) certain leave provided under title 10, United States Code to commissioned officers of the Army (or their beneficiaries), having considered the same, reports favorably thereon without amendment and recommends that the bill do pass.

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PURPOSE AND SUMMARY

H.R. 2846 would amend the Public Health Service Act (PHSA) such that the process of acquiring leave for commissioned Public Health Service officers aligns with that of other uniformed services.

BACKGROUND AND NEED FOR LEGISLATION

The Commissioned Corps of the U.S. Public Health Services (USPHS) is one of the United States' eight uniformed services and is uniquely committed to public health service.¹ The USPHS Commissioned Corps employs more than 6,000 health professionals, in over 800 countries across the world, and across eleven professional categories.² Public Health Service officers are deployed to provide public health emergency response and disaster recovery support.³

The USPHS Commissioned Corps has been deployed on the front lines domestically to respond to significant threats to public health. The USPHS played a key role in the provision of health services during events such as Hurricane Katrina, the 2001 anthrax attacks, the attack on the World Trade Center, and during the COVID19 pandemic.⁴ USPHS officers were also deployed to render expert care during the 2014 Ebola Outbreak, where rotations of 65-person teams staffed the Ebola treatment unit in Monrovia, Liberia.⁵ Public Health Service officers were the only U.S. uniformed personnel providing direct care for patients with Ebola.⁶ USPHS officers served during the Iraqi Freedom and Enduring Freedom operations by assisting with care for injured service members and host nationals.⁷ USPHS officers frequently partner with the U.S. Navy to conduct health diplomacy missions to assist our allies in need of medical assistance.⁸

USPHS officers are currently the only civilian or uniformed federal entity who do not have access to leave benefits, which include extended parental leave, rest and recuperation leave, emergency leave, and court appearance leave.⁹ H.R. 2846 would fix this disparity and align USPHS leave policies with that of other uniformed services.

COMMITTEE ACTION

On July 16, 2025, the Subcommittee on Health held a legislative hearing on H.R. 2846. The title of the hearing was "Legislative Proposals to Maintain and Improve the Public Health Workforce, Rural Health, and Over-the-Counter Medicines." The Subcommittee received testimony from:

¹ U.S. DEP'T. OF HEALTH AND HUMAN SERV. (HHS), Commissioned Corps of the U.S. Public Health Service, *Who We Are*, <https://www.usphs.gov/about-us>.

² HHS, Office of the Surgeon General, *U.S. Public Health Service Commissioned Corps*, <https://www.hhs.gov/surgeongeneral/corps/index.html> (last visited Oct. 3, 2025).

³ *Id.*

⁴ Commissioned Officers Association of the U.S. Public Health Service, *A Supervisor's Guide to the Commissioned Corps Personnel System* (Feb. 27, 2025), <https://dcp.psc.gov/ccmis/ccis/documents/PAM58.pdf>.

⁵ *Id.*; see also Commissioned Officers Association of the U.S. Public Health Service, *America's Health Responders*, <https://www.coausphs.org/COA/COA/Advocacy/America-s-Health-Responders.aspx> (last visited Oct. 3, 2025).

⁶ Commissioned Officers, *supra* note 5.

⁷ *Id.*

⁸ Commissioned Officers, *supra* note 4.

⁹ Commissioned Officers Association of the U.S. Public Health Service, *FY 2024 Legislative Proposals and Appropriations Request*, https://dcp.psc.gov/ccmis/PDF_Docs/USPHS%20Commissioned%20Corps%20Background%20and%20FY%202024%20Requests%20Handout.pdf.

- Dr. Jacqueline Corrigan-Curay, JD, MD, Acting Director for Center for Drug Evaluation and Research (CDER), U.S. Food and Drug Administration;
- Dr. Candice Chen, MD, MPH, Acting Associate Administrator for Health Workforce, U.S. Health Resources and Services Administration; and
- Tom Morris, MPA, Associate Administrator for Rural Health Policy, U.S. Health Resources and Services Administration.

On September 10, 2025, the Subcommittee on Health met in open markup session and forwarded H.R. 2846, without amendment, to the full Committee by a voice vote.

On September 17, 2025, the full Committee on Energy and Commerce met in open markup session and ordered H.R. 2846, without amendment, favorably reported to the House by a record vote of 46 yeas and 0 nays.

COMMITTEE VOTES

Clause 3(b) of rule XIII requires the Committee to list the record votes on the motion to report legislation and amendments thereto. The following reflects the record votes taken during the Committee consideration:

**COMMITTEE ON ENERGY AND COMMERCE
119TH CONGRESS
ROLL CALL VOTE # 3**

BILL: H.R. 2846, To amend title II of the Public Health Service Act to include as an additional right or privilege of commissioned officers of the Public Health Service (and their beneficiaries) certain leave provided under title 10, United States Code to commissioned officers of the Army (or their beneficiaries).

AMENDMENT: Final Passage

DISPOSITION: Agreed to, by a roll call vote of 46 ayes and 0 nays.

REPRESENTATIVE	YEAS	NAYS	PRESENT	REPRESENTATIVE	YEAS	NAYS	PRESENT
Mr. Guthrie	X			Mr. Pallone	X		
Mr. Latta	X			Ms. DeGette	X		
Mr. Griffith	X			Ms. Schakowsky	X		
Mr. Bilirakis				Ms. Matsui	X		
Mr. Hudson	X			Ms. Castor	X		
Mr. Carter (GA)	X			Mr. Tonko	X		
Mr. Palmer				Ms. Clarke	X		
Mr. Dunn	X			Mr. Ruiz	X		
Mr. Crenshaw	X			Mr. Peters	X		
Mr. Joyce	X			Mrs. Dingell	X		
Mr. Weber	X			Mr. Veasey	X		
Mr. Allen	X			Ms. Kelly			
Mr. Balderson	X			Ms. Barragán	X		
Mr. Fulcher	X			Mr. Soto	X		
Mr. Pfluger	X			Ms. Schrier	X		
Mrs. Harshbarger	X			Ms. Trahan	X		
Mrs. Miller-Meeks	X			Ms. Fletcher	X		
Mrs. Cammack				Ms. Ocasio-Cortez	X		
Mr. Obernolte	X			Mr. Auchincloss	X		
Mr. James				Mr. Carter (LA)	X		
Mr. Bentz	X			Mr. Menendez	X		
Mrs. Houchin	X			Mr. Mullin	X		
Mr. Fry				Mr. Landsman	X		
Ms. Lee				Ms. McClellan	X		
Mr. Langworthy	X						
Mr. Kean							
Mr. Rulli	X						
Mr. Evans	X						
Mr. Goldman	X						
Mrs. Fedorchak	X						

09/17/2025

OVERSIGHT FINDINGS AND RECOMMENDATIONS

Pursuant to clause 2(b)(1) of rule X and clause 3(c)(1) of rule XIII, the Committee held a hearing and made findings that are reflected in this report.

NEW BUDGET AUTHORITY, ENTITLEMENT AUTHORITY,
AND TAX EXPENDITURES

Pursuant to clause 3(c)(2) of rule XIII, the Committee finds that H.R. 2846 would result in no new or increased budget authority, entitlement authority, or tax expenditures or revenues.

CONGRESSIONAL BUDGET OFFICE ESTIMATE

Pursuant to clause 3(c)(3) of rule XIII, at the time this report was filed, the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974 was not available.

FEDERAL MANDATES STATEMENT

The Committee adopts as its own the estimate of Federal mandates prepared by the Director of the Congressional Budget Office pursuant to section 423 of the Unfunded Mandates Reform Act.

STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

Pursuant to clause 3(c)(4) of rule XIII, the general performance goal or objective of this legislation is to amend the Public Health Service Act (PHSA) such that the process of acquiring leave for commissioned Public Health Service officers aligns with that of other uniformed services.

DUPLICATION OF FEDERAL PROGRAMS

Pursuant to clause 3(c)(5) of rule XIII, no provision of H.R. 2846 is known to be duplicative of another Federal program, including any program that was included in a report to Congress pursuant to section 21 of Public Law 111–139 or the most recent Catalog of Federal Domestic Assistance.

RELATED COMMITTEE AND SUBCOMMITTEE HEARINGS

Pursuant to clause 3(c)(6) of rule XIII, the following related hearing was used to develop or consider H.R. 2846:

- On July 16, 2025, the Subcommittee on Health held a legislative hearing on H.R. 2846. The title of the hearing was “Legislative Proposals to Maintain and Improve the Public Health Workforce, Rural Health, and Over-the-Counter Medicines.” The Subcommittee received testimony from:
 - Dr. Jacqueline Corrigan-Curay, JD, MD, Acting Director for Center for Drug Evaluation and Research (CDER), U.S. Food and Drug Administration;
 - Dr. Candice Chen, MD, MPH, Acting Associate Administrator for Health Workforce, U.S. Health Resources and Services Administration; and

◦ Tom Morris, MPA, Associate Administrator for Rural Health Policy, U.S. Health Resources and Services Administration.

COMMITTEE COST ESTIMATE

Pursuant to clause 3(d)(1) of rule XIII, the Committee adopts as its own the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974. At the time this report was filed, the estimate was not available.

EARMARK, LIMITED TAX BENEFITS, AND LIMITED TARIFF BENEFITS

Pursuant to clause 9(e), 9(f), and 9(g) of rule XXI, the Committee finds that H.R. 2846 contains no earmarks, limited tax benefits, or limited tariff benefits.

ADVISORY COMMITTEE STATEMENT

No advisory committees within the meaning of section 5(b) of the Federal Advisory Committee Act were created by this legislation.

APPLICABILITY TO LEGISLATIVE BRANCH

The Committee finds that the legislation does not relate to the terms and conditions of employment or access to public services or accommodations within the meaning of section 102(b)(3) of the Congressional Accountability Act.

SECTION-BY-SECTION ANALYSIS OF THE LEGISLATION

Section 1. Application of leave provisions for members of the armed forces to members of the Public Health Service

Section 1 amends the Public Health Service Act such that it applies the leave provisions designated for members of the armed forces to members of the Public Health Service.

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italics, and existing law in which no change is proposed is shown in roman):

PUBLIC HEALTH SERVICE ACT

* * * * *

TITLE II—ADMINISTRATION AND MISCELLANEOUS PROVISIONS

PART A—ADMINISTRATION

* * * * *

【ANNUAL AND SICK LEAVE

【SEC. 219. (a) In accordance with regulations of the President, commissioned officers of the Regular Corps and officers of the Ready Reserve Corps on active duty may be granted annual leave and sick leave without any deductions from their pay and allowances.

【(b) The regulations described in subsection (a) may authorize accumulated annual leave of not more than 120 days for any commissioned officer of the Regular Corps or officer of the Ready Reserve Corps on active duty.

【(c) For purposes of this section the term “accumulated annual leave” means unused accrued annual leave carried forward from one leave year into a succeeding leave year, and the term “accrued annual leave” means the annual leave accruing to an officer during one leave year.】

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RIGHTS, PRIVILEGES, ETC. OF OFFICERS AND SURVIVING
BENEFICIARIES

SEC. 221. (a) Commissioned officers of the Service or their surviving beneficiaries are entitled to all the rights, benefits, privileges, and immunities now or hereafter provided for commissioned officers of the Army or their surviving beneficiaries under the following provisions of title 10, United States Code:

(1) Section 1036, Escorts for dependents of members: transportation and travel allowances.

(2) Chapter 61, Retirement or Separation for Physical Disability, except that sections 1201, 1202, and 1203 do not apply to commissioned officers of the Public Health Service who have been ordered to active duty for training for a period of more than 30 days.

(3) Chapter 69, Retired Grade, except sections 1370, 1374, 1375, and 1376(a).

(4) Chapter 71, Computation of Retired Pay, except formula No. 3 of section 1401.

(5) Chapter 73, Retired Serviceman’s Family Protection Plan, Survivor Benefit Plan.

(6) Chapter 75, Death Benefits.

(7) Section 2771, Final settlement of accounts: deceased members.

(8) Chapter 163, Military Claims, but only when commissioned officers of the Service are entitled to military benefits under section 212 of this Act.

(9) Section 2603, Acceptance of fellowships, scholarships, or grants.

(10) Section 2634 Motor vehicles: for members on permanent change of station.

(11) Section 1035, Deposit of savings.

(12) Section 1552, Correction of military records: claims incident thereto.

(13) Section 1553, Review of discharge or dismissal.

(14) Section 1554, Review of retirement or separation without pay for physical disability.

(15) Section 1124, Cash awards for suggestions, inventions, or scientific achievements.

(16) Section 1052, Reimbursement for adoption expenses.

(17) Section 1059, Transitional compensation and commissary and exchange benefits for dependents of members separated for dependent abuse.

(18) Section 1034, Protected Communications; Prohibition of Retaliatory Personnel Actions.

(19) Chapter 1223, Retired Pay for Non-Regular Service.

(20) Section 12601, Compensation: Reserve on active duty accepting from any person.

(21) Section 12684, Reserves: separation for absence without authority or sentence to imprisonment.

(22) *Chapter 40, Leave.*

(b)(1) The authority vested by title 10, United States Code, in the “military departments”, “the Secretary concerned”, or “the Secretary of Defense” with respect to the rights, privileges, immunities, and benefits referred to in subsection (a) shall be exercised, with respect to commissioned officers of the Service, by the Secretary of Health and Human Services or the designee of such secretary.

(2) For purposes of paragraph (18) of subsection (a), the term “Inspector General” in section 1034 of such title 10 shall mean the Inspector General of the Department of Health and Human Services.

(3) For purposes of paragraph (19) of subsection (a), the terms “Military department”, “Secretary concerned”, and “Armed forces” in such title 10 shall be deemed to include, respectively, the Department of Health and Human Services, the Secretary of Health and Human Services, and the Commissioned Corps.

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