

“(f) **RULE OF CONSTRUCTION.**—Nothing in this section shall be construed to prohibit a State or other approved body from requiring compliance with a higher standard of education and training than that specified by this section. Notwithstanding any other provision of this section, individuals who provide medical imaging services relating to mammograms shall continue to meet the standards applicable under the Mammography Quality Standards Act of 1992.

“(g) **EVALUATION AND REPORT.**—The Secretary shall periodically evaluate the performance of each approved body under subsection (d) at an interval determined appropriate by the Secretary. The results of such evaluations shall be included as part of the report submitted to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives in accordance with 354(e)(6)(B).

“(h) **DELIVERY OF AND PAYMENT FOR SERVICES.**—Not later than the date described in subsection (j)(3), the Secretary shall promulgate regulations to ensure that all programs under the authority of the Secretary that involve the performance of or payment for medical imaging or radiation therapy, are performed in accordance with the standards established under this section.

“(i) **ALTERNATIVE STANDARDS FOR RURAL AND UNDERSERVED AREAS.**—

“(1) **IN GENERAL.**—The Secretary shall determine whether the standards established under subsection (a) must be met in their entirety for medical imaging or radiation therapy that is performed in a geographic area that is determined by the Medicare Geographic Classification Review Board to be a ‘rural area’ or that is designated as a health professional shortage area. If the Secretary determines that alternative standards for such rural areas or health professional shortage areas are appropriate to assure access to quality medical imaging, the Secretary is authorized to develop such alternative standards.

“(2) **STATE DISCRETION.**—The chief executive officer of a State may submit to the Secretary a statement declaring that an alternative standard developed under paragraph (1) is inappropriate for application to such State, and such alternative standard shall not apply in such submitting State. The chief executive officer of a State may rescind a statement described in this paragraph following the provision of appropriate notice to the Secretary.

“(j) **APPLICABLE TIMELINES.**—

“(1) **GENERAL IMPLEMENTATION REGULATIONS.**—Not later than 18 months after the date of enactment of this section, the Secretary shall promulgate such regulations as may be necessary to implement all standards in this section except those provided for in subsection (d)(2).

“(2) **MINIMUM STANDARDS FOR CERTIFICATION OF APPROVED BODIES.**—Not later than 24 months after the date of enactment of this section, the Secretary shall establish the standards regarding approved bodies referred to in subsection (d)(2) and begin certifying approved bodies under such subsection.

“(3) **REGULATIONS FOR DELIVERY OF OR PAYMENT FOR SERVICES.**—Not later than 36 months after the date of enactment of this section, the Secretary shall promulgate the regulations described in subsection (h). The Secretary may withhold the provision of Federal assistance as provided for in subsection (h) beginning on the date that is 48 months after the date of enactment of this section.

“(k) **DEFINITIONS.**—In this section:

“(1) **APPROVED BODY.**—The term ‘approved body’ means an entity that has been certified by the Secretary under subsection (d)(1) to accredit the various mechanisms by which an individual can demonstrate compliance with the standards promulgated under subsection (a) with respect to performing, planning, evaluating, or verifying patient dose for medical imaging or radiation therapy.

“(2) **MEDICAL IMAGING.**—The term ‘medical imaging’ means any procedure used to visualize tissues, organs, or physiologic processes in humans for the purpose of diagnosing illness or following the progression of disease. Images may be produced utilizing ionizing radiation, radio-pharmaceuticals, magnetic resonance, or ultrasound and image production may include the use of contrast media or computer processing. For purposes of this section, such term does not include routine dental diagnostic procedures.

“(3) **PERFORM.**—The term ‘perform’, with respect to medical imaging or radiation therapy, means—

“(A) the act of directly exposing a patient to radiation via ionizing or radio frequency radiation, to ultrasound, or to a magnetic field for purposes of medical imaging or for purposes of radiation therapy; and

“(B) the act of positioning a patient to receive such an exposure.

“(4) **PLAN.**—The term ‘plan’, with respect to medical imaging or radiation therapy, means the act of preparing for the performance of such a procedure to a patient by evaluating site-specific information, based on measurement and verification of radiation dose distribution, computer analysis, or direct measurement of dose, in order to customize the procedure for the patient.

“(5) **RADIATION THERAPY.**—The term ‘radiation therapy’ means any procedure or article intended for use in the cure, mitigation, treatment, or prevention of disease in humans that achieves its intended purpose through the emission of radiation.

“(1) **SUNSET.**—This section shall have no force or effect after September 30, 2016.”

SEC. 4. REPORT ON THE EFFECTS OF THIS ACT.

(a) Not later than 5 years after the date of enactment of this Act, the Secretary of Health and Human Services, acting through the Director of the Agency for Healthcare Research and Quality, shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives a report on the effects of this Act. Such report shall include the types and numbers of providers for whom standards have been developed, the impact of such standards on diagnostic accuracy and patient safety, and the availability and cost of services. Entities reimbursed for technical services through programs operating under the authority of the Secretary of Health and Human Services shall be required to contribute data to such report.

Mr. FRIST. I ask unanimous consent the committee-reported amendment be agreed to, the bill as amended be read a third time and passed, the motion to reconsider be laid on the table, and any statements be printed in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

The committee amendment in the nature of a substitute was agreed to.

The bill (S. 2322) was ordered to be engrossed for a third reading, was read the third time, and passed.

NATIONAL INTEGRATED DROUGHT INFORMATION SYSTEM ACT OF 2006

Mr. FRIST. I ask unanimous consent the Committee on Commerce be discharged from further consideration of H.R. 5136 and the Senate proceed to its immediate consideration.

The PRESIDING OFFICER. Without objection, it is so ordered. The clerk will report the bill by title.

The legislative clerk read as follows:

A bill (H.R. 5136) to establish a National Integrated Drought Information System within the National Oceanic and Atmospheric Administration to improve drought monitoring and forecasting capabilities.

There being no objection, the Senate proceeded to consider the bill.

Mr. FRIST. I ask unanimous consent the bill be read the third time and passed, the motion to reconsider be laid upon the table, and any statements be printed in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

The bill (H.R. 5136) was ordered to a third reading, was read the third time, and passed.

REAUTHORIZING THE EXPORT-IMPORT BANK OF THE UNITED STATES

Mr. FRIST. I ask unanimous consent the Chair now lay before the Senate the House measure to accompany S. 3938.

The Chair laid before the Senate the following message from the House of Representatives:

S. 3938

Resolved, That the bill from the Senate (S. 3938) entitled “An Act to reauthorize the Export-Import Bank of the United States.”, do pass with the following amendment:

Strike out all after the enacting clause and insert:

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) **SHORT TITLE.**—This Act may be cited as the “Export-Import Bank Reauthorization Act of 2006”.

(b) **TABLE OF CONTENTS.**—

Sec. 1. Short title; table of contents.

Sec. 2. Extension of authority.

Sec. 3. Sub-Saharan Africa Advisory Committee.

Sec. 4. Extension of authority to provide financing for the export of non-lethal defense articles or services the primary end use of which will be for civilian purposes.

Sec. 5. Designation of sensitive commercial sectors and products.

Sec. 6. Increasing exports by small business.

Sec. 7. Anti-circumvention.

Sec. 8. Transparency.

Sec. 9. Aggregate loan, guarantee, and insurance authority.

Sec. 10. Tied aid credit program.

Sec. 11. Prohibition on assistance to develop or promote certain railway connections and railway-related connections.

Sec. 12. Process for notifying applicants of application status; implementation of Ex-Im Online.

Sec. 13. Competitiveness initiatives.

Sec. 14. Office of financing for socially and economically disadvantaged small business concerns and small business concerns owned by women.

Sec. 15. Governance.

Sec. 16. Sense of Congress regarding multi-buyer insurance and capital guarantee programs.

Sec. 17. Sense of Congress regarding office of renewable energy promotion.

Sec. 18. Environmental matters.

Sec. 19. Government Accountability Office study of bank performance standards for assistance to small businesses, especially those owned by social and economically disadvantaged individuals and those owned by women.