AM	MENDMENT NO	Calendar No
Pu	urpose: In the nature of a subst	citute.
IN	THE SENATE OF THE UNITED	STATES—117th Cong., 1st Sess.
	H.R. 3	263
То	amend the Homeland Securion the Department of Hocountermeasures program, a	meland Security a medical
R	Referred to the Committee on _ ordered to be	
	Ordered to lie on the tak	ble and to be printed
A	AMENDMENT IN THE NATURE to be proposed by	
Viz	Z:	
1	Strike all after the enact	ing clause and insert the fol-
2	lowing:	
3	SECTION 1. SHORT TITLE.	
4	This Act may be cited as	the "DHS Medical Counter-
5	measures Act".	
6	SEC. 2. MEDICAL COUNTERME	ASURES PROGRAM.
7	(a) In General.—Sub	title C of title XIX of the
8	Homeland Security Act of 20	02 (6 U.S.C. 597) is amend-
9	ed by adding at the end the fo	ollowing:

"SEC	1932	MEDICAL.	COUNTERMEASURES	

2	"(a) In General.—Subject to the availability of ap			
3	propriations, the Secretary shall, as appropriate, establish			
4	a medical countermeasures program within the compo			
5	nents of the Department to—			
6	"(1) facilitate personnel readiness and protec			
7	tion for the employees and working animals of the			
8	Department in the event of a chemical, biological			
9	radiological, nuclear, or explosives attack, naturally			
10	occurring disease outbreak, other event impacting			
11	health, or pandemic; and			
12	"(2) support the mission continuity of the De			
13	partment.			
14	"(b) Oversight.—The Secretary, acting through the			
15	Chief Medical Officer of the Department, shall—			
16	"(1) provide programmatic oversight of the			
17	medical countermeasures program established under			
18	subsection (a); and			
19	"(2) develop standards for—			
20	"(A) medical countermeasure storage, se-			
21	curity, dispensing, and documentation;			
22	"(B) maintaining a stockpile of medical			
23	countermeasures, including antibiotics,			
24	antivirals, antidotes, therapeutics, and radio-			
25	logical countermeasures, as appropriate;			

1	"(C) ensuring adequate partnerships with
2	manufacturers and executive agencies that en-
3	able advance prepositioning by vendors of in-
4	ventories of appropriate medical counter-
5	measures in strategic locations nationwide,
6	based on risk and employee density, in accord-
7	ance with applicable Federal statutes and regu-
8	lations;
9	"(D) providing oversight and guidance re-
10	garding the dispensing of stockpiled medical
11	countermeasures;
12	"(E) ensuring rapid deployment and dis-
13	pensing of medical countermeasures in a chem-
14	ical, biological, radiological, nuclear, or explo-
15	sives attack, naturally occurring disease out-
16	break, other event impacting health, or pan-
17	demic;
18	"(F) providing training to employees of the
19	Department on medical countermeasures; and
20	"(G) supporting dispensing exercises.
21	"(c) Medical Countermeasures Working
22	GROUP.—The Secretary, acting through the Chief Medical
23	Officer of the Department, shall establish a medical coun-
24	termeasures working group comprised of representatives
25	from appropriate components and offices of the Depart-

- 1 ment to ensure that medical countermeasures standards
- 2 are maintained and guidance is consistent.
- 3 "(d) Medical Countermeasures Manage-
- 4 MENT.—Not later than 120 days after the date on which
- 5 appropriations are made available to carry out subsection
- 6 (a), the Chief Medical Officer shall develop and submit
- 7 to the Secretary an integrated logistics support plan for
- 8 medical countermeasures, including—
- 9 "(1) a methodology for determining the ideal
- types and quantities of medical countermeasures to
- stockpile and how frequently such methodology shall
- be reevaluated;
- "(2) a replenishment plan; and
- 14 "(3) inventory tracking, reporting, and rec-
- onciliation procedures for existing stockpiles and
- 16 new medical countermeasure purchases.
- 17 "(e) Transfer.—Not later than 120 days after the
- 18 date of enactment of this section, the Secretary shall
- 19 transfer all medical countermeasures-related pro-
- 20 grammatic and personnel resources from the Under Sec-
- 21 retary for Management to the Chief Medical Officer.
- 22 "(f) STOCKPILE ELEMENTS.—In determining the
- 23 types and quantities of medical countermeasures to stock-
- 24 pile under subsection (d), the Secretary, acting through
- 25 the Chief Medical Officer of the Department—

1	"(1) shall use a risk-based methodology for			
2	evaluating types and quantities of medical counter-			
3	measures required; and			
4	"(2) may use, if available—			
5	"(A) chemical, biological, radiological, and			
6	nuclear risk assessments of the Department			
7	and			
8	"(B) guidance on medical countermeasures			
9	of the Office of the Assistant Secretary for Pre			
10	paredness and Response and the Centers fo			
11	Disease Control and Prevention.			
12	"(g) Briefing.—Not later than 180 days after the			
13	date of enactment of this section, the Secretary shall pro-			
14	vide a briefing to the Committee on Homeland Security			
15	and Governmental Affairs of the Senate and the Com			
16	mittee on Homeland Security of the House of Representa			
17	tives regarding—			
18	"(1) the plan developed under subsection (d);			
19	and			
20	"(2) implementation of the requirements of this			
21	section.			
22	"(h) Definition.—In this section, the term 'medical			
23	countermeasures' means antibiotics, antivirals, antidotes,			
24	therapeutics, radiological countermeasures, and other			
25	countermeasures that may be deployed to protect the em-			

- 1 ployees and working animals of the Department in the
- 2 event of a chemical, biological, radiological, nuclear, or ex-
- 3 plosives attack, naturally occurring disease outbreak,
- 4 other event impacting health, or pandemic.".
- 5 (b) CLERICAL AMENDMENT.—The table of contents
- 6 in section 1(b) of the Homeland Security Act of 2002 is
- 7 amended by inserting after the item relating to section
- 8 1931 the following:

"Sec. 1932. Medical countermeasures.".