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(Original Signature of Member)

118TH CONGRESS
1ST SESSION

H. R. _____

To amend the Public Health Service Act with respect to the Public Health
Emergency Medical Countermeasures Enterprise, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr. HUDSON introduced the following bill; which was referred to the
Committee on _____

A BILL

To amend the Public Health Service Act with respect to
the Public Health Emergency Medical Countermeasures
Enterprise, 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 “PHEMCE Advisory
5 Committee Act of 2023”.

1 **SEC. 2. PUBLIC HEALTH EMERGENCY MEDICAL COUNTER-**
2 **MEASURES ENTERPRISE.**

3 (a) MEMBERS.—Section 2811–1(b) of the Public
4 Health Service Act (42 U.S.C. 30hh–10a(b)) is amended
5 by striking paragraph (11) and inserting the following:

6 “(11) The Director of the Biomedical Advanced
7 Research and Development Authority.

8 “(12) The Director of the Strategic National
9 Stockpile.

10 “(13) Representatives of any other Federal
11 agency, which may include the Director of the Na-
12 tional Institute of Allergy and Infectious Diseases
13 and the Director of the Office of Public Health Pre-
14 paredness and Response, as the Secretary deter-
15 mines appropriate.”.

16 (b) FUNCTIONS.—Section 2811–1(c)(2) of the Public
17 Health Service Act (42 U.S.C. 30hh–10a(c)(2)) is amend-
18 ed to read as follows:

19 “(2) INPUT.—In carrying out this section, the
20 PHEMCE shall solicit and consider input from—

21 “(A) the PHEMCE Advisory Committee
22 maintained under subsection (d), as appro-
23 priate; and

24 “(B) State, local, Tribal, and territorial
25 public health departments or officials, as appro-
26 priate.”.

1 (c) ADVISORY COMMITTEE.—Section 2811–1 of the
2 Public Health Service Act (42 U.S.C. 30hh–10a) is
3 amended by adding at the end the following:

4 “(d) PHEMCE ADVISORY COMMITTEE.—

5 “(1) ESTABLISHMENT.—The Secretary shall—

6 “(A) establish and maintain an advisory
7 committee to be known as the PHEMCE Advi-
8 sory Committee (in this subsection referred to
9 as the ‘Advisory Committee’) to seek input and
10 ensure communication and transparency in the
11 functions of the PHEMCE; and

12 “(B) seek input from and consult with ex-
13 ternal partners with divergent threat portfolios,
14 including chemical, biological, radiological, or
15 nuclear agents and emerging infectious dis-
16 eases, to ensure the right combination of
17 threat-specific expertise on PHEMCE functions
18 under subsection (c)(1) and to ensure appro-
19 priate capability and capacity to maintain over-
20 all readiness.

21 “(2) DUTIES.—The Advisory Committee
22 shall—

23 “(A) provide advice to the PHEMCE in
24 carrying out its functions;

1 “(B) solicit and incorporate the input of
2 the private sector, non-Federal partners, and
3 stakeholders to increase communication and
4 transparency, identify gaps of preparedness,
5 and coordinate improvements in PHEMCE de-
6 cision-making;

7 “(C) aid in the PHEMCE’s strategic plan-
8 ning and decision-making regarding medical
9 countermeasure research, advanced research,
10 development, procurement, stockpiling, replen-
11 ishment, deployment, and distribution;

12 “(D) aid in interactions among the
13 PHEMCE’s members listed in subsection (b)
14 and other government entities; and

15 “(E) aid in the PHEMCE’s communica-
16 tion of decisions related to the PHEMCE’s
17 functions.

18 “(3) MEMBERSHIP.—The Secretary, in con-
19 sultation with the members of the PHEMCE listed
20 in subsection (b), shall appoint to the Advisory Com-
21 mittee at least 9, and not more than 11, individuals,
22 including—

23 “(A) at least 3 non-Federal professionals
24 with expertise in medical countermeasure devel-
25 opment, including medical countermeasures for

1 chemical, biological, radiological, or nuclear
2 agents and emerging infectious diseases;

3 “(B) at least 2 non-Federal professionals
4 with expertise in medical countermeasure stock-
5 piling and replenishment;

6 “(C) at least 2 non-Federal professionals
7 with expertise in the medical countermeasure
8 supply chain, including medical countermeasure
9 manufacturing and distribution;

10 “(D) at least 2 non-Federal professionals
11 with expertise in medical disaster planning, pre-
12 paredness, response, or recovery;

13 “(E) 1 non-Federal professional appointed
14 by the Speaker of the House of Representatives;

15 “(F) 1 non-Federal professional appointed
16 by the minority leader of the House of Rep-
17 resentatives;

18 “(G) 1 non-Federal professional appointed
19 by the majority leader of the Senate; and

20 “(H) 1 non-Federal professional appointed
21 by the minority leader of the Senate.

22 “(4) TERM OF APPOINTMENT.—Each member
23 of the Advisory Committee shall be appointed for a
24 term of 2 years and may be reappointed for two ad-
25 ditional terms of 2 years, for a total of not more

1 than 6 years. The first and second such terms may
2 be consecutive. The third such term may not be con-
3 secutive.

4 “(5) MEETINGS.—The Advisory Committee
5 shall—

6 “(A) meet not less than 4 times in each
7 calendar year that begins after the establish-
8 ment of the Advisory Committee;

9 “(B) hold all meetings in-person;

10 “(C) for purposes of ensuring trans-
11 parency, provide adequate advance notice of the
12 date of each meeting, including by publicly
13 posting the meeting date 30 days before the
14 date on which the meeting is to be held;

15 “(D) not later than 60 days after each
16 meeting, communicate the activities carried out
17 and decisions made during, and minutes of,
18 such meeting to the appropriate congressional
19 committees; and

20 “(E) not later than 30 days after each
21 meeting, communicate the activities carried out
22 and decisions made during, and minutes of,
23 such meeting to the PHEMCE.”.