

112TH CONGRESS  
1ST SESSION

# H. R. 2795

To address childhood obesity, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

AUGUST 5, 2011

Ms. FUDGE (for herself, Mrs. CHRISTENSEN, Ms. LEE of California, and Mr. PAYNE) introduced the following bill

SEPTEMBER 6, 2011

Referred to the Committee on Energy and Commerce, and in addition to the Committees on Education and the Workforce, Ways and Means, Natural Resources, the Judiciary, Financial Services, and Agriculture, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To address childhood obesity, 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 “Fit for Life Act of  
5 2011”.

6 **SEC. 2. TABLE OF CONTENTS.**

7 The table of contents of this Act is as follows:

Sec. 1. Short title.

Sec. 2. Table of contents.

TITLE I—IMPROVING THE NUTRITIONAL QUALITY OF AND  
ACCESS TO FOODS IN UNDERSERVED AMERICAN COMMUNITIES

Subtitle A—Access to Nutritious and Quality Foods in Underserved American  
Communities

- Sec. 101. Food deserts: Addressing the Lack of Supermarkets in Underserved Communities.
- Sec. 102. Expansion of the Fresh Fruit and Vegetable Program.
- Sec. 103. Expanding Access to the Summer Food Service Program for Children.
- Sec. 104. Study and report on physical activity and nutritional quality of meals and snacks served, in juvenile justice facilities.
- Sec. 105. Local food insecurity assessments: assessing the unique nutritional needs of local communities.
- Sec. 106. Weekends and holidays without hunger.

Subtitle B—Ensuring a Healthy Start for Children in Underserved American  
Communities

- Sec. 111. Improving Healthy Eating and Physical Activity Among our Youngest Children.
- Sec. 112. Health and fitness school programs: training America's youth to live healthy lifestyles.

TITLE II—ADVANCING PREVENTATIVE MEASURES AND TREATMENT OF OBESITY IN ADULTS AND CHILDREN IN UNDERSERVED COMMUNITIES

- Sec. 201. Community health and wellness navigators pilot program: connecting America's health professional with our schools.
- Sec. 202. Requirement to expedite national Medicare coverage determinations for evidence-based preventive services.
- Sec. 203. Expansion of obesity treatment services under Medicare.
- Sec. 204. Coverage of evidence-based preventive services under Medicaid and SCHIP.
- Sec. 205. Coverage of medical nutrition therapy under Medicaid and SCHIP.
- Sec. 206. Clarification of EPSDT inclusion of prevention, screening, and treatment services for obesity and overweight; SCHIP coverage.
- Sec. 207. National commission on child obesity.
- Sec. 208. GAO report.

TITLE III—ENCOURAGING PHYSICAL ACTIVITY IN UNDERSERVED  
AMERICAN COMMUNITIES

- Sec. 301. Renovation of foreclosed and abandoned properties to create spaces that encourage physical activity in American neighborhoods.
- Sec. 302. National youth sports program revitalization.
- Sec. 303. Expansion of the Zuni Youth Enrichment Project Summer Camp.
- Sec. 304. Making routes to schools in underserved communities safe and accessible with public participation through the Community Oriented Policing Services program.
- Sec. 305. Land and Water Conservation Fund Program Grants in Low-Income Communities and Expand Tribal Participation.

Sec. 306. Changing Hearts, Attitudes, and Minds by Participating in Sports (CHAMPS) Program.

Sec. 307. Coordinated School Health Initiatives.

Sec. 308. Rewarding elementary and secondary schools for outstanding student performance in physical fitness programs.

1 **TITLE I—IMPROVING THE NU-**  
 2 **TRITIONAL QUALITY OF AND**  
 3 **ACCESS TO FOODS IN UNDER-**  
 4 **SERVED AMERICAN COMMU-**  
 5 **NITIES**

6 **Subtitle A—Access to Nutritious**  
 7 **and Quality Foods in Under-**  
 8 **served American Communities**

9 **SEC. 101. FOOD DESERTS: ADDRESSING THE LACK OF SU-**  
 10 **PERMARKETS IN UNDERSERVED COMMU-**  
 11 **NITIES.**

12 (a) ESTABLISHMENT OF GRANT PROGRAM.—From  
 13 the amounts appropriated to carry out this section, the  
 14 Secretary of Agriculture shall award grants to local part-  
 15 nerships to establish, or enhance existing, supermarkets  
 16 that sell fresh fruits and produce in low-income commu-  
 17 nities located in food deserts.

18 (b) APPLICATION.—In order to receive a grant under  
 19 this section, a local partnership shall submit an applica-  
 20 tion to the Secretary at such time, in such manner, and  
 21 containing such information as the Secretary may require.

22 (c) USES OF FUNDS.—A local partnership shall use  
 23 grant funds received under this section to establish, or en-

1 hance an existing, a supermarket in a low-income commu-  
2 nity located in a food desert and assist the supermarket  
3 in carrying out the following activities:

4 (1) Selling fresh fruit and produce at prices  
5 that, to the maximum extent practicable, are afford-  
6 able for most individuals in the low-income commu-  
7 nity.

8 (2) Making the supermarket available for  
9 youth-centered, hands-on educational instruction and  
10 information on healthy cooking and nutrition.

11 (3) Providing community outreach services that  
12 encourage health and wellness to individuals in the  
13 low-income community.

14 (d) REPORTING.—

15 (1) LOCAL PARTNERSHIPS.—Not later than 2  
16 years after receiving a grant under this section, a  
17 local partnership shall submit a report to the Sec-  
18 retary on the success of the supermarket established  
19 using such funds.

20 (2) SECRETARY.—Upon receipt of a report  
21 under paragraph (1), the Secretary shall transmit  
22 such report to Congress.

23 (e) DEFINITIONS.—In this section:

24 (1) FOOD DESERT.—The term “food desert”  
25 has the meaning given such term in section 7527(a)

1 of the Food, Conservation, and Energy Act of 2008  
2 (Public Law 110–234).

3 (2) LOCAL PARTNERSHIP.—The term “local  
4 partnership” means a partnership between—

5 (A) a unit of general local government, a  
6 State, or a tribal government; and

7 (B) a—

8 (i) public or private organization; or

9 (ii) not-for profit entity.

10 (3) LOW-INCOME COMMUNITY.—The term “low-  
11 income community” includes a low-income commu-  
12 nity (as such term is defined by the Secretary) lo-  
13 cated in an urban area.

14 (4) SECRETARY.—The term “Secretary” means  
15 the Secretary of Agriculture.

16 (5) SUBURBAN COMMUNITY.—The term “sub-  
17 urban community” has the meaning given such term  
18 by the Secretary.

19 (6) STATE.—The term “State” includes, in ad-  
20 dition to the several States of the United States, the  
21 Commonwealth of Puerto Rico, the District of Co-  
22 lumbia, the Virgin Islands, Guam, American Samoa,  
23 and the Commonwealth of the Northern Mariana Is-  
24 lands.

1           (7) SUPERMARKET.—The term “supermarket”  
2 means any establishment under Code 445110 of the  
3 North American Industry Classification System.

4           (8) UNIT OF GENERAL LOCAL GOVERNMENT.—  
5 The term “unit of general local government” means  
6 any city, county, town, township, parish, village, or  
7 other general purpose political subdivision of a  
8 State.

9 **SEC. 102. EXPANSION OF THE FRESH FRUIT AND VEGE-**  
10 **TABLE PROGRAM.**

11           Section 19 of the Richard B. Russell National School  
12 Lunch Act (42 U.S.C. 1769a) is amended—

13           (1) in subsection (a), by inserting “, secondary  
14 schools, child care centers, and family child care  
15 homes” after “elementary schools”;

16           (2) in subsection (b), by inserting “, center, or  
17 home” after each place “school” appears;

18           (3) in subsection (d)—

19           (A) in the heading, by inserting “, CEN-  
20 TERS, OR HOMES”;

21           (B) in paragraph (1)—

22           (i) in the matter preceding subpara-  
23 graph (A), by inserting “, centers, or  
24 homes” after “schools”;

1 (ii) in subparagraph (A), by inserting  
2 “, center, or home” after “school”;

3 (iii) in subparagraph (B), by inserting  
4 “, centers, or homes” after “schools”;

5 (iv) by amending subparagraph (C) to  
6 read as follows:

7 “(C) ensure that each school selected is an  
8 elementary school or secondary school (as such  
9 terms are defined in section 9101 of the Ele-  
10 mentary and Secondary Education Act of 1965  
11 (20 U.S.C. 7801)), each center selected is a  
12 child care center (as such term is defined in  
13 section 39900 of the Public Health Service  
14 Act), and each home selected is a family child  
15 care home (as such term is defined in section  
16 39900 of the Public Health Service Act).”;

17 (v) in subparagraph (D)—

18 (I) in the matter preceding clause  
19 (i), by inserting “, centers, or homes”  
20 after “schools”;

21 (II) in clause (i), by inserting “,  
22 center, or home” after “school”; and

23 (III) in clause (ii), by inserting “,  
24 center, or home” after “as determined  
25 by the school”;

1 (C) in paragraph (2), by inserting “, cen-  
2 ters, or homes” after each place “schools” ap-  
3 pears; and

4 (D) in paragraph (3), by inserting “, cen-  
5 ters, or homes” after each place “schools” ap-  
6 pears; and

7 (4) in subsection (e), by inserting “, center, or  
8 home” after “school”.

9 **SEC. 103. EXPANDING ACCESS TO THE SUMMER FOOD**  
10 **SERVICE PROGRAM FOR CHILDREN.**

11 Section 13(a) of the Richard B. Russell National  
12 School Lunch (42 U.S.C. 1761(a)) is amended—

13 (1) in paragraph (1)(A), by striking “50 per-  
14 cent” each place it appears and inserting “40 per-  
15 cent”;

16 (2) by repealing paragraph (9); and

17 (3) in paragraph (10)—

18 (A) in subparagraph (A)—

19 (i) by striking “The Secretary” and  
20 inserting “From the amounts appropriated  
21 to carry out this paragraph, the Sec-  
22 retary”; and

23 (ii) by striking “not more than 5”;



1 (B) in subparagraph (C), by striking “fis-  
2 cal year 2006” and inserting “fiscal year  
3 2012”;

4 (C) in subparagraph (D)—

5 (i) by striking “January 1, 2008” and  
6 inserting “January 1, 2012”; and

7 (ii) by striking “January 1, 2009”  
8 and inserting “January 1, 2013”; and

9 (D) by striking subparagraph (E).

10 **SEC. 104. STUDY AND REPORT ON PHYSICAL ACTIVITY AND**  
11 **NUTRITIONAL QUALITY OF MEALS AND**  
12 **SNACKS SERVED, IN JUVENILE JUSTICE FA-**  
13 **CILITIES.**

14 (a) STUDY.—The Administrator of the Office of Ju-  
15 venile Justice and Delinquency Prevention, in consultation  
16 with the Secretary of Agriculture, shall conduct a study  
17 on—

18 (1) the amount of physical activity by juveniles  
19 in juvenile justice facilities, including the types of  
20 physical activities in which such juveniles partici-  
21 pate, how many hours per day such juveniles partici-  
22 pate in physical activities, and the adequacy of the  
23 amounts and types of physical activity of such juve-  
24 niles; and

1           (2) the nutritional quality of meals and snacks  
2           served in juvenile justice facilities.

3           (b) REPORT.—Not later than 2 years after the date  
4 of enactment of this Act, the Administrator of the Office  
5 of Juvenile Justice and Delinquency Prevention, in con-  
6 sultation with the Secretary of Agriculture, shall submit  
7 to Congress a report on the findings of the study con-  
8 ducted under subsection (a), including an evaluation of  
9 whether the amounts and types of physical activity by ju-  
10 veniles, and the nutritional quality of meals and snacks  
11 served, in juvenile justice facilities are adequate to ensure  
12 the health and wellness of such juveniles.

13 **SEC. 105. LOCAL FOOD INSECURITY ASSESSMENTS: ASSESS-**  
14 **ING THE UNIQUE NUTRITIONAL NEEDS OF**  
15 **LOCAL COMMUNITIES.**

16           (a) IN GENERAL.—The Secretary of Health and  
17 Human Services shall establish a 3-year pilot program to  
18 award grants to local and tribal governments, on a com-  
19 petitive basis, to allow such local and tribal governments,  
20 in partnership with the local community organizations  
21 under subsection (e), to—

22           (1) conduct a food security assessment; and

23           (2) make an inventory of the system in order to  
24           identify the strengths and gaps in such system.

1 (b) DATA POINTS FOR ASSESSMENT.—For purposes  
2 of conducting an Assessment and making an inventory  
3 under a grant under subsection (a), with respect to the  
4 community served by a local or tribal government, such  
5 government shall examine the following food security and  
6 food system issues in the community:

7 (1) The prevalence of childhood obesity.

8 (2) The availability of safe routes to school for  
9 children.

10 (3) The quality of food served in school and  
11 child care settings.

12 (4) The availability of supermarkets.

13 (5) The cost and availability of fresh fruits and  
14 vegetables.

15 (6) The concentration of convenience stores,  
16 and other food vendors that sell a disproportionate  
17 amount of foods that are not fresh fruits and vegeta-  
18 bles.

19 (7) The availability of products.

20 (8) The concentration of fast food restaurants.

21 (9) The availability of green space or recreation  
22 areas, and the extent to which such space or areas  
23 encourage physical activity by adults and children.

24 (10) Any other issues determined to be relevant  
25 by the local or tribal government.

1           (11) Any other issues determined to be relevant  
2           by the Secretary of Health and Human Services.

3           (c) NUMBER OF SITES.—The Secretary of Health  
4           and Human Services, in awarding grants under subsection  
5           (a), shall award grants to no more than—

6                   (1) 20 local governments; and

7                   (2) 5 tribal governments.

8           (d) PRIORITY.—In awarding grants under subsection  
9           (a), the Secretary of Health and Human Services shall  
10          give priority to those local and tribal governments that  
11          serve communities with the highest concentrations of pov-  
12          erty.

13          (e) REQUIREMENT OF PARTNERSHIPS.—In order to  
14          qualify for a grant under subsection (a), a local or tribal  
15          government shall demonstrate, to the satisfaction of the  
16          Secretary of Health and Human Services, that the local  
17          or tribal government has entered into a partnership (for  
18          the purpose of conducting an assessment and making an  
19          inventory under subsection (a)) with at least one of the  
20          following local community organizations:

21                   (1) A nonprofit community-based organization  
22                   or entity.

23                   (2) A developer or urban planning institution.

24                   (3) An accredited college or university.

1           (4) A freestanding children’s hospital or center  
2           with expertise in child health and policy.

3 **SEC. 106. WEEKENDS AND HOLIDAYS WITHOUT HUNGER.**

4           Section 18 of the Richard B. Russell National School  
5 Lunch Act (42 U.S.C. 1769) is amended by adding at the  
6 end the following:

7           “(1) WEEKENDS AND HOLIDAYS WITHOUT HUN-  
8 GER.—

9           “(1) DEFINITIONS.—In this subsection:

10           “(A) AT-RISK SCHOOL CHILD.—The term  
11           ‘at-risk school child’ has the meaning given the  
12           term in section 17(r)(1).

13           “(B) ELIGIBLE INSTITUTION.—

14           “(i) IN GENERAL.—The term ‘eligible  
15           institution’ means a public or private non-  
16           profit institution that is determined by the  
17           Secretary to be able to meet safe food stor-  
18           age, handling, and delivery standards es-  
19           tablished by the Secretary.

20           “(ii) INCLUSIONS.—The term ‘eligible  
21           institution’ includes—

22           “(I) an elementary or secondary  
23           school or school food service authority;

24           “(II) a food bank or food pantry;

25           “(III) a homeless shelter; and

1                   “(IV) such other type of emer-  
2                   gency feeding agency as is approved  
3                   by the Secretary.

4                   “(2) ESTABLISHMENT.—Subject to the avail-  
5                   ability of appropriations provided in advance in an  
6                   appropriations Act specifically for the purpose of  
7                   carrying out this subsection, the Secretary shall es-  
8                   tablish a program under which the Secretary shall  
9                   provide commodities, on a competitive basis, to eligi-  
10                  ble institutions to provide nutritious food to at-risk  
11                  children on weekends and during extended school  
12                  holidays during the school year.

13                  “(3) ELIGIBILITY.—

14                  “(A) IN GENERAL.—To be eligible to re-  
15                  ceive commodities under this subsection, an eli-  
16                  gible institution shall submit an application to  
17                  the Secretary at such time, in such manner,  
18                  and containing such information as the Sec-  
19                  retary may determine.

20                  “(B) PLAN.—An application under sub-  
21                  paragraph (A) shall include the plan of the eli-  
22                  gible institution for the distribution of nutri-  
23                  tious foods to at-risk school children, includ-  
24                  ing—

1                   “(i) methods of food service delivery  
2                   to at-risk school children;

3                   “(ii) assurances that children receiv-  
4                   ing foods under the project will not be pub-  
5                   licly separated or overtly identified;

6                   “(iii) lists of the types of food to be  
7                   provided under the project and provisions  
8                   to ensure food quality and safety;

9                   “(iv) information on the number of  
10                  at-risk school children to be served and the  
11                  per-child cost of providing the children  
12                  with food; and

13                  “(v) such other information as the  
14                  Secretary determines to be necessary to as-  
15                  sist the Secretary in evaluating projects  
16                  that receive commodities under this sub-  
17                  section.

18                  “(4) PRIORITY.—In selecting applications under  
19                  this subsection, the Secretary shall give priority to  
20                  eligible institutions that—

21                         “(A) have on-going programs and experi-  
22                         ence serving populations with significant pro-  
23                         portions of at-risk school children;

24                         “(B) have a good record of experience in  
25                         food delivery and food safety systems;

1           “(C) maintain high quality control, ac-  
2           countability, and recordkeeping standards;

3           “(D) provide children with readily  
4           consumable food of high nutrient content and  
5           quality;

6           “(E) demonstrate cost efficiencies and the  
7           potential for obtaining supplemental funding  
8           from non-Federal sources to carry out projects;  
9           and

10          “(F) demonstrate the ability to continue  
11          projects for the full approved term of the pilot  
12          project period.

13          “(5) GUIDELINES.—

14          “(A) IN GENERAL.—The Secretary shall  
15          issue guidelines containing the criteria for  
16          projects to receive commodities under this sec-  
17          tion.

18          “(B) INCLUSIONS.—The guidelines shall,  
19          to the maximum extent practicable within the  
20          funds available and applications submitted, take  
21          into account—

22                  “(i) geographical variations in project  
23                  locations to include qualifying projects in  
24                  rural, urban, and suburban areas with high



1 proportions of families with at-risk school  
2 children;

3 “(ii) different types of projects that  
4 offer nutritious foods on weekends and  
5 during school holidays to at-risk school  
6 children; and

7 “(iii) institutional capacity to collect,  
8 maintain, and provide statistically valid in-  
9 formation necessary for the Secretary—

10 “(I) to analyze and evaluate the  
11 results of the pilot project; and

12 “(II) to make recommendations  
13 to Congress.

14 “(6) EVALUATION.—

15 “(A) INTERIM EVALUATION.—Not later  
16 than November 30, 2013, the Secretary shall  
17 complete an interim evaluation of the pilot pro-  
18 gram carried out under this subsection.

19 “(B) FINAL REPORT.—Not later than De-  
20 cember 31, 2015, the Secretary shall submit to  
21 Congress a final report that contains—

22 “(i) an evaluation of the pilot pro-  
23 gram carried out under this subsection;  
24 and

1                   “(ii) any recommendations of the Sec-  
2                   retary for legislative action.

3                   “(7) FUNDING.—

4                   “(A) AUTHORIZATION OF APPROPRIA-  
5                   TIONS.—There is authorized to be appropriated  
6                   to carry out this section such sums as are nec-  
7                   essary, to remain available until expended.

8                   “(B) AVAILABILITY OF FUNDS.—Not more  
9                   than 3 percent of the funds made available  
10                  under subparagraph (A) may be used by the  
11                  Secretary for expenses associated with review of  
12                  the operations and evaluation of the projects  
13                  carried out under this subsection.”.

14                  **Subtitle B—Ensuring a Healthy**  
15                  **Start for Children in Under-**  
16                  **served American Communities**

17                  **SEC. 111. IMPROVING HEALTHY EATING AND PHYSICAL AC-**  
18                  **TIVITY AMONG OUR YOUNGEST CHILDREN.**

19                  Title III of the Public Health Service Act (42 U.S.C.  
20                  241 et seq.) is amended by adding at the end the fol-  
21                  lowing:

22                  **“PART W—HEALTHY KIDS PROGRAM**

23                  **“SEC. 39900. DEFINITIONS.**

24                  “In this part:

1           “(1) CHILD CARE CENTER.—The term ‘child  
2           care center’ means a center licensed or otherwise au-  
3           thorized to provide child care services for fewer than  
4           24 hours per day per child in a non-residential set-  
5           ting, unless care in excess of 24 hours is due to the  
6           nature of the parents’ work.

7           “(2) EARLY LEARNING COUNCIL.—The term  
8           ‘early learning council’ means an early childhood as-  
9           sembly that is established to advise governors, State  
10          legislators, or State agency administrators on how  
11          best to meet the needs of young children and their  
12          families specifically through improvement of pro-  
13          grams and services.

14          “(3) FAMILY CHILD CARE HOME.—The term  
15          ‘family child care home’ means a private family  
16          home where home-based child care is provided for a  
17          portion of the day, unless care in excess of 24 hours  
18          is due to the nature of the parents’ work, and that  
19          is certified, registered, or licensed in the State in  
20          which it is located.

21          “(4) SCREEN TIME LIMITS.—The term ‘screen  
22          time limits’ means policies or guidelines, such as  
23          those developed by the American Academy of Pediat-  
24          rics, designed to reduce the daily amount of time  
25          that children spend watching or looking at digital

1 monitors or displays, including television sets, com-  
2 puter monitors, or hand-held gaming devices.

3 “(5) SECRETARY.—The term ‘Secretary’ means  
4 the Secretary of Health and Human Services.

5 **“SEC. 39900-1. GRANTS.**

6 “(a) IN GENERAL.—The Secretary, in consultation  
7 with appropriate entities within the Department of Health  
8 and Human Services, shall award 3-year competitive  
9 grants to 5 State health departments (or other appro-  
10 priate child care licensing entities within such States) to  
11 help reduce and prevent obesity among the birth to 5 year  
12 old population of the State in child care settings outside  
13 a child’s place of residence.

14 “(b) USE OF FUNDS.—State grantees shall use  
15 amounts received under a grant under this subsection to—

16 “(1) provide, or enter into contracts to provide,  
17 training (that meets the requirements of subsection  
18 (c)) to the staff of national, State, or community-  
19 based organizations with networks of child care cen-  
20 ters, or a consortium of child care centers and fam-  
21 ily child care homes consisting of at least 10 centers,  
22 for the purpose of implementing evidence-based or  
23 data-informed healthy eating and physical activity  
24 policies and practices, including curricula and other  
25 interventions; and

1           “(2) provide grants to child care centers and  
2           family child care homes, whose staff received the  
3           training described in paragraph (1), to implement  
4           practice, curricula, and policy changes (that meet  
5           the requirements of subsection (d)) that promote  
6           healthy eating and physical activity among the birth  
7           to 5 years of age population.

8           Preference in awarding grants shall be given to those  
9           States that demonstrate collaboration between relevant  
10          State entities related to child care and health and with  
11          key stakeholders, such as State early learning councils and  
12          other community-based organizations working with child  
13          care centers or family child care homes.

14          “(c) TRAINING REQUIREMENTS.—

15                 “(1) IN GENERAL.—Training provided under  
16                 subsection (b) shall—

17                         “(A) include the provision of information  
18                         concerning age-appropriate healthy eating and  
19                         physical activity interventions and culturally  
20                         competent curricula for the birth to 5 years of  
21                         age population in the State involved, which at  
22                         a minimum shall include—

23                                 “(i) a handbook that includes rec-  
24                                 ommendations, guidelines, and best prac-  
25                                 tices for child care centers and family child

1 care homes relating to healthy eating,  
2 physical activity, and screen time reduc-  
3 tion;

4 “(ii) information about the availability  
5 of and services provided by child care  
6 health consultants; and

7 “(iii) health and wellness resources  
8 available through the Child Care Bureau  
9 and the Maternal and Child Health Bu-  
10 reau;

11 “(B) identify, improve upon, and expand  
12 nutrition and physical activity best practices  
13 targeted to the birth to 5 years of age popu-  
14 lation in the State involved and identify strate-  
15 gies for incorporating parental education and  
16 other parental involvement; and

17 “(C) provide instruction on how to appro-  
18 priately model, direct, and encourage child care  
19 staff behavior to apply the best practices and  
20 strategies identified under subparagraph (B).

21 “(2) TRAINING ENTITIES.—A grantee may con-  
22 duct the training required under this section di-  
23 rectly, or may provide such training through a con-  
24 tract with—

1           “(A) an appropriate national, State, or  
2           community organization with relevant expertise;

3           “(B) a health care provider or professional  
4           organization with relevant expertise;

5           “(C) a university or research center that  
6           employs faculty with relevant expertise; or

7           “(D) any other entity determined appro-  
8           priate by the State and approved by the Sec-  
9           retary.

10          “(3) REQUIREMENT OF CONTRACT.—If a grant-  
11          ee elects to provide the training under this section  
12          through a contract, the grantee shall ensure that a  
13          consistent healthy eating and physical activity cur-  
14          riculum is being developed for all child care entities  
15          participating in the pilot program in the State.

16          “(d) PRACTICE, CURRICULA, AND POLICY  
17          CHANGES.—After training is provided as required under  
18          subsection (c), a State grantee shall ensure that the orga-  
19          nizations and consortium involved—

20                 “(1) implement, in child care settings, evidence-  
21                 based or data-informed policy changes that promote  
22                 healthy eating, physical activity, and appropriate  
23                 screen time limits among the birth to 5 years of age  
24                 population;

1           “(2) utilize an evidence-based or data-informed,  
2           culturally competent healthy eating and physical ac-  
3           tivity curriculum in child care settings focusing on  
4           such birth to age 5 population;

5           “(3) implement programs, activities, and proce-  
6           dures for incorporating parental education and in-  
7           volvement of parents in programs, including dissemi-  
8           nating a written parental involvement policy, and co-  
9           ordinating and integrating parental involvement  
10          strategies under this section, to the extent feasible  
11          and appropriate, with parental involvement strate-  
12          gies under other programs, such as the Head Start  
13          program and the Early Head Start Program; and

14          “(4) find innovative ways to remove barriers  
15          that exist to providing opportunities for healthy eat-  
16          ing and physical activity.

17 All activities described in this paragraph shall be evidence-  
18 based and data-informed and be consistent with the cur-  
19 riculum presented through training activities described in  
20 subsection (c).

21 **“SEC. 39900-2. GRANTS FOR THE EVALUATION OF PILOT**  
22 **PROGRAMS.**

23          “The Secretary shall award competitive grants to  
24 Prevention Research Centers or universities to evaluate  
25 the programs carried out with grants under section



1 39900–1, including baseline, process, and outcome meas-  
2 urements.

3 **“SEC. 39900–3. COORDINATION.**

4 “(a) INTERAGENCY COORDINATION.—To the extent  
5 practicable, the Secretary shall coordinate activities con-  
6 ducted under this part with activities undertaken by the  
7 National Prevention, Health Promotion and Public Health  
8 Council established under section 4001 of the Patient Pro-  
9 tection and Affordable Care Act (Public Law 111–148).  
10 Where practicable, such coordination shall—

11 “(1) include the sharing of current and emerg-  
12 ing best practices concerning healthy eating, physical  
13 activity, and screen time limits that have a popu-  
14 lation-level impact in promoting nutrition and phys-  
15 ical activity in child care settings;

16 “(2) promote the effective implementation and  
17 sustainability of such programs; and

18 “(3) avoid unnecessary duplication of effort.

19 “(b) PILOT COORDINATION.—The Secretary shall  
20 designate an individual (directly or through contract) to  
21 provide technical assistance to States and pilot centers in  
22 the development, implementation, and evaluation of activi-  
23 ties and dissemination of information described in para-  
24 graphs (1), (2), and (3) of subsection (a).

1 **“SEC. 39900–4. EVALUATION AND REPORTING.**

2 “(a) TECHNICAL ASSISTANCE AND INFORMATION.—

3 The Secretary shall—

4 “(1) provide technical assistance to grantees  
5 and other entities providing training under a grant  
6 under this part; and

7 “(2) disseminate to health departments and  
8 trainers under grants under this part information  
9 concerning evidence-based or data-informed ap-  
10 proaches, including dissemination of existing tool-  
11 kits, curricula, and existing or emerging best prac-  
12 tices that can be expanded or improved upon  
13 through a program conducted under this part.

14 “(b) EVALUATION REQUIREMENTS.—With respect to  
15 evaluations conducted under section 39900–2, the Sec-  
16 retary shall ensure that—

17 “(1) evaluation metrics are consistent across all  
18 programs funded under this part;

19 “(2) interim outcomes are measured by the  
20 number of centers that have implemented policy and  
21 environmental strategies that support use of cur-  
22 ricula and practices supporting healthy eating, phys-  
23 ical activity, and screen time limits;

24 “(3) interim outcomes are measured, to the ex-  
25 tent possible, by behavior changes in healthy eating,  
26 physical activity, and screen time; and

1           “(4) upon completion of the program, the eval-  
2           uation shall include an identification of best prac-  
3           tices relating to behavior change and reductions in  
4           the increasing prevalence of overweight and obesity  
5           that could be replicated in other settings.

6           “(c) DISSEMINATION OF INFORMATION.—Upon the  
7           conclusion of the programs carried out under this part,  
8           the Secretary shall disseminate to all appropriate agencies  
9           within the Department of Health and Human Services evi-  
10          dence, best practices, and lessons learned from grantees.  
11          Such agencies shall encourage the adoption of the best  
12          practices.

13          “(d) REPORT TO CONGRESS.—Not later than 6  
14          months after the completion of the pilot program under  
15          this part, the Secretary shall submit to Congress a report  
16          concerning the evaluation of the pilot programs, including  
17          recommendations as to how lessons learned from such pro-  
18          grams can be incorporated into future guidance docu-  
19          ments developed and provided by the Secretary and other  
20          Federal agencies, as appropriate.

21          **“SEC. 39900-5. AUTHORIZATION OF APPROPRIATIONS.**

22          “‘There is authorized to be appropriated to carry out  
23          this part, \$2,500,000 for each of fiscal years 2012, 2013,  
24          and 2014.’”.

1 **SEC. 112. HEALTH AND FITNESS SCHOOL PROGRAMS:**  
2 **TRAINING AMERICA'S YOUTH TO LIVE**  
3 **HEALTHY LIFESTYLES.**

4 (a) **IN GENERAL.**—The Secretaries shall carry out a  
5 2-year pilot program consisting of awarding grants to eli-  
6 gible entities for the purpose of establishing or expanding  
7 evidence-informed health and fitness programs in sec-  
8 ondary schools in low-income communities.

9 (b) **HEALTH AND FITNESS PROGRAM REQUIRE-**  
10 **MENTS.**—As a condition on receipt of a grant under this  
11 section, an eligible entity shall agree that any health and  
12 fitness program at a secondary school funded through the  
13 grant will—

14 (1) be conducted in partnership with the sec-  
15 ondary school, community entities, local contributors  
16 of funds, and tribal councils;

17 (2) include services by recent graduates of insti-  
18 tutions of higher education who are interested in  
19 pursuing graduate degrees in medicine, nursing, nu-  
20 trition science, exercise physiology, public health, or  
21 a related discipline;

22 (3) use services by such graduates to supple-  
23 ment rather than supplant the health and fitness  
24 curriculum of the secondary school;

25 (4) include a highly effective student-mentor  
26 intervention and education program conducted by

1 such graduates for a maximum of 2 years of service  
2 in 1 secondary school per graduate;

3 (5) build a healthier community through  
4 wellness activities and increased awareness about  
5 and access to healthy foods;

6 (6) provide daily health and fitness instruction  
7 to both students and faculty;

8 (7) conduct an annual in-school health fair  
9 using the services of secondary school students with  
10 the objective of building a healthier community  
11 through wellness activities and increased awareness  
12 about and access to healthy foods;

13 (8) conduct an annual school-based and an an-  
14 nual community-based health fair using the services  
15 of secondary school students with the objective of  
16 building a healthier community through wellness ac-  
17 tivities and increased awareness about and access to  
18 healthy foods; and

19 (9) expose secondary school students to a vari-  
20 ety of career choices in wellness and health-related  
21 disciplines, including careers in medicine, nursing,  
22 nutrition science, and exercise physiology.

23 (c) NON-FEDERAL FUNDS.—The Secretaries shall  
24 encourage grantees under this section to contribute funds  
25 from non-Federal sources to increase—

1           (1) the number of secondary schools at which  
2 health and fitness programs are offered; or

3           (2) the longevity of such programs.

4           (d) MINIMUM NUMBER OF SCHOOLS.—The Secre-  
5 taries shall ensure that grants under this section are used  
6 to establish or expand health and fitness programs at a  
7 total of not less than 20 schools.

8           (e) ASSESSMENT; REPORTING.—As conditions on re-  
9 ceipt of a grant under this section, an eligible entity shall  
10 agree to—

11           (1) conduct an annual assessment of health and  
12 fitness programs funded through the grant using the  
13 Centers for Disease Control and Prevention’s School  
14 Health Index;

15           (2) on an annual basis, report the findings of  
16 each assessment under paragraph (1) to the partici-  
17 pating school, community partners, local contribu-  
18 tors of funds, and tribal councils; and

19           (3) not later than the end of fiscal year 2013,  
20 submit a report to the Secretaries and an appro-  
21 priate representative of the Centers for Disease Con-  
22 trol and Prevention on the success of the programs  
23 in educating children and families and thereby pre-  
24 venting or reducing childhood obesity, including data  
25 from each assessment under paragraph (1).

1 (f) DEFINITIONS.—In this section:

2 (1) The term “secondary school” has the mean-  
3 ing given to such term in section 9101 of the Ele-  
4 mentary and Secondary Education Act of 1965 (20  
5 U.S.C. 7801).

6 (2) The term “eligible entity” means a non-  
7 profit organization or entity with the ability to meet  
8 the requirements applicable to a grantee under this  
9 section, as determined by the Secretaries.

10 (3) The term “low-income communities” in-  
11 cludes—

12 (A) communities with a high percentage of  
13 children eligible for free and reduced priced  
14 lunches under the Richard B. Russell National  
15 School Lunch Act (42 U.S.C. 1751 et seq.);  
16 and

17 (B) any other communities determined by  
18 the Secretaries to be low-income for purposes of  
19 this section.

20 (4) The term “Secretaries” means the Sec-  
21 retary of Health and Human Services and the Sec-  
22 retary of Education, acting jointly and in conjunc-  
23 tion with the Director of the Centers for Disease  
24 Control and Prevention.

1 (g) AUTHORIZATION OF APPROPRIATIONS.—To carry  
2 out this section, there is authorized to be appropriated  
3 \$1,400,000 for the period of fiscal years 2012 through  
4 2013.

5 **TITLE II—ADVANCING PREVENT-**  
6 **ATIVE MEASURES AND**  
7 **TREATMENT OF OBESITY IN**  
8 **ADULTS AND CHILDREN IN**  
9 **UNDERSERVED COMMU-**  
10 **NITIES**

11 **SEC. 201. COMMUNITY HEALTH AND WELLNESS NAVIGA-**  
12 **TORS PILOT PROGRAM: CONNECTING AMER-**  
13 **ICA'S HEALTH PROFESSIONAL WITH OUR**  
14 **SCHOOLS.**

15 (a) IN GENERAL.—The Secretary of Health and  
16 Human Services shall award grants to 5 or more States  
17 for the establishment of a community navigator program,  
18 consisting of each such State making subgrants to 1 or  
19 more eligible entities for a local community navigator pro-  
20 gram described in subsection (b).

21 (b) PROGRAM DESCRIPTION.—A local community  
22 navigator program described in this subsection shall con-  
23 sist of the following:

24 (1) An eligible entity, in partnership with a  
25 local educational agency, a bureau-funded school, or



1 a nonprofit health or education organization, will  
2 hire and train 2 or more community navigators.

3 (2) The community navigators will facilitate a  
4 relationship between the eligible entity and the local  
5 educational agency, bureau-funded school, or non-  
6 profit health or education organization in low-income  
7 communities to ensure increased access to medical  
8 care through educating parents and school adminis-  
9 trators.

10 (3) The community navigators will carry out  
11 educational activities for elementary school and sec-  
12 ondary school students and their parents in low-in-  
13 come communities with the goal of—

14 (A) increasing familial intake of nutritious  
15 meals;

16 (B) increasing physical activity both in and  
17 out of the school setting; and

18 (C) increasing access to medical care.

19 (c) REPORT.—Not later than 2 years after the date  
20 of the enactment of this Act, the Secretary shall submit  
21 a report to the Congress on the effectiveness of the pro-  
22 gram under this section.

23 (d) DEFINITIONS.—In this section:

1           (1) The term “bureau-funded school” has the  
2 meaning given such term in section 1146 of the  
3 Education Amendments of 1978 (25 U.S.C. 2026).

4           (2) The terms “elementary school”, “local edu-  
5 cational agency”, and “secondary school” have the  
6 meanings given to such terms in section 9101 of the  
7 Elementary and Secondary Education Act of 1965  
8 (20 U.S.C. 7801).

9           (3) The term “eligible entity” includes a Feder-  
10 ally qualified health center (as defined in section  
11 1861(aa) of the Social Security Act (42 U.S.C.  
12 1395x(aa))), a facility operated by the Indian  
13 Health Service (including a facility operated by an  
14 Indian tribe or tribal organization through a con-  
15 tract or compact with the Service under the Indian  
16 Self-Determination and Education Assistance Act  
17 (25 U.S.C. 450 et seq.)), a free-standing children’s  
18 hospital that is described in subparagraph (L) or  
19 (M) of section 340B(a)(4) of the Public Health  
20 Service Act (42 U.S.C. 256b(a)(4)), a non-profit  
21 with demonstrated effectiveness in the area of  
22 healthcare and with a focus on serving low-income  
23 communities, a rural hospital, and a rural health  
24 clinic.

1           (4) The term “low-income communities” in-  
2       cludes—

3                   (A) communities with a high percentage of  
4       children eligible for free and reduced priced  
5       lunches under the Richard B. Russell National  
6       School Lunch Act (42 U.S.C. 1751 et seq.);  
7       and

8                   (B) any other communities determined by  
9       the Secretaries to be low-income for purposes of  
10      this section.

11           (5) The term “nonprofit health or education or-  
12      ganization” shall be defined by the Secretary.

13           (6) The term “Secretary” means the Secretary  
14      of Health and Human Services.

15           (7) The term “State” includes the District of  
16      Columbia and any commonwealth, territory, or pos-  
17      session of the United States, including the Common-  
18      wealth of Puerto Rico, the Virgin Islands, Guam,  
19      American Samoa, and the Commonwealth of the  
20      Northern Mariana Islands.

21           (e) AUTHORIZATION OF APPROPRIATIONS.—To carry  
22      out this section, there are authorized to be appropriated  
23      such sums as may be necessary for fiscal years 2012 and  
24      2013.

1 **SEC. 202. REQUIREMENT TO EXPEDITE NATIONAL MEDI-**  
2 **CARE COVERAGE DETERMINATIONS FOR EVI-**  
3 **DENCE-BASED PREVENTIVE SERVICES.**

4 (a) IN GENERAL.—Not later than January 1, 2012,  
5 the Secretary of Health and Human Services shall issue  
6 national Medicare coverage determinations for evidence-  
7 based preventive and treatment services, including services  
8 to prevent or treat overweight and obesity that have in  
9 effect a rating of ‘A’ or ‘B’ (relating to a classification  
10 representing strongly recommended or recommended serv-  
11 ices) in the current recommendations of the United States  
12 Preventive Services Task Force (in this section referred  
13 to as “USPSTF”) and clinical services for preventing and  
14 treating overweight and obesity as defined by the National  
15 Heart, Lung and Blood Institute’s (in this section referred  
16 to as “NHLBI”) Clinical Guidelines on the Identification,  
17 Evaluation and Treatment of Overweight and Obesity in  
18 Adults. The Secretary shall update such coverage deter-  
19 minations based on future updates to such USPSTF and  
20 NHLBI guidelines.

21 (b) UPDATING RECOMMENDATIONS.—The Secretary  
22 shall instruct—

23 (1) the Agency for Healthcare Research and  
24 Quality and the USPSTF to update, by not later  
25 than one year after the date of the enactment of this  
26 Act and at least once every 5 years thereafter,

1 USPSTF recommendations relating to the preven-  
2 tion of overweight and obesity that have in effect a  
3 rating of ‘I’ (relating to a classification representing  
4 insufficient evidence to make a recommendation for  
5 the service involved) to determine if such rating  
6 should be upgraded to a rating of “A” or “B”; and  
7 (2) the National Heart, Lung and Blood Insti-  
8 tute to update, by not later than December 31,  
9 2010, and at least once every 3 years thereafter, the  
10 NHLBI Clinical Guidelines described in subsection  
11 (a).

12 **SEC. 203. EXPANSION OF OBESITY TREATMENT SERVICES**  
13 **UNDER MEDICARE.**

14 (a) **COVERAGE.**—Section 1861 of the Social Security  
15 Act (42 U.S.C. 1395x), as amended by section 4103 of  
16 the Patient Protection and Affordable Care Act (Public  
17 Law 111–148), is further amended—

18 (1) in subsection (s)(2)—

19 (A) in subparagraph (EE), by striking at  
20 the end “and”;

21 (B) in subparagraph (FF), by adding at  
22 the end “and”; and

23 (C) by adding at the end the following new  
24 subparagraph:

1           “(GG) items and services furnished under  
2           an obesity treatment program (as defined in  
3           subsection (iii));” and

4           (2) by adding at the end the following new sub-  
5           section:

6           “(iii) OBESITY TREATMENT PROGRAM.—The term  
7           ‘obesity treatment program’ means—

8           “(1) medical services delivered to eligible indi-  
9           viduals under a plan of care for the purpose of re-  
10          ducing body mass index and the associated co-  
11          morbidities of obesity, including—

12           “(A) the development of an initial plan of  
13          care and subsequent revisions to that plan of  
14          care;

15           “(B) medical and surgical interventions as  
16          determined appropriate by the Secretary; and

17           “(C) additional services for which payment  
18          would not otherwise be made under this title  
19          that the Secretary may specify that encourage  
20          the receipt of, or improve the effectiveness of,  
21          the services described in the preceding subpara-  
22          graphs.

23          In carrying out subparagraph (C), the Secretary  
24          shall consider recommendations of the United States  
25          Preventive Services Task Force; clinical practice

1 guidelines for treatment of overweight, obesity, and  
2 severe obesity issued by professional medical soci-  
3 eties; and consensus statements and guidelines on  
4 effective treatment of overweight, obesity, and severe  
5 obesity issued by the National Institutes of Health,  
6 professional medical societies, and other authori-  
7 tative sources (such as those identified in the Na-  
8 tional Heart Lung and Blood Institute’s Clinical  
9 Guidelines on the Identification, Evaluation, and  
10 Treatment of Overweight and Obesity in Adults).

11 “(2) For purposes of this subsection, the term  
12 ‘eligible individual’ means an individual who has—

13 “(A) been diagnosed with obesity by a phy-  
14 sician (as defined in subsection (r)) or provider  
15 of services (as defined in subsection (u));

16 “(B) a body mass index of at least 30; or

17 “(C) a body mass index of at least 27 with  
18 at least one weight-related comorbid condition.

19 It is not necessary for such individual to be diag-  
20 nosed with co-morbidities in addition to the obesity  
21 diagnosis or body mass index of at least 30 in order  
22 to be considered an ‘eligible individual’ under this  
23 subsection.”.

24 (b) PAYMENT.—Section 1833(a)(1) of the Social Se-  
25 curity Act (42 U.S.C. 1395l(a)(1)), as amended by section

1 10501(h)(3)(B) of the Patient Protection and Affordable  
2 Care Act (Public Law 111–148), is amended—

3 (1) by striking “and” before “(Z)”; and

4 (2) by inserting before the semicolon at the end  
5 the following: “, and (AA) with respect to items and  
6 services furnished under an obesity treatment pro-  
7 gram (as defined in section 1861(iii)), the amount  
8 paid shall be 80 percent of the lesser of the actual  
9 charge for the services or the amount determined  
10 under a fee schedule established by the Secretary for  
11 purposes of this subparagraph”.

12 **SEC. 204. COVERAGE OF EVIDENCE-BASED PREVENTIVE**  
13 **SERVICES UNDER MEDICAID AND SCHIP.**

14 (a) STATE OPTION TO PROVIDE MEDICAL ASSIST-  
15 ANCE FOR EVIDENCE-BASED PREVENTIVE SERVICES.—

16 (1) IN GENERAL.—Section 1905 of the Social  
17 Security Act (42 U.S.C. 1396d) is amended—

18 (A) in subsection (a)—

19 (i) in paragraph (28), by striking  
20 “and” at the end;

21 (ii) by redesignating paragraph (29)  
22 as paragraph (30); and

23 (iii) by inserting after paragraph (28)  
24 the following:



1 “(29) evidence-based preventive services de-  
2 scribed in subsection (ee); and”;

3 (B) by adding at the end the following:

4 “(ee) For purposes of subsection (a)(29), evidence-  
5 based preventive services described in this subsection  
6 are—

7 “(1) any preventive services which the Sec-  
8 retary has determined are reasonable and necessary  
9 for preventing obesity and comorbidities of obesity,  
10 including diet and exercise counseling, healthy  
11 weight and obesity counseling; and

12 “(2) any other evidence-based, effective clinical  
13 intervention for obese individuals designed to pre-  
14 vent comorbidities of obesity, including pharma-  
15 cological or surgical services.”.

16 (2) CONFORMING AMENDMENT.—Section  
17 1902(a)(10)(C)(iv) of such Act is amended by in-  
18 serting “, or (29)” after “(24)”.

19 (b) STATE OPTION TO PROVIDE CHILD HEALTH AS-  
20 SISTANCE FOR EVIDENCE-BASED PREVENTIVE SERV-  
21 ICES.—Section 2110(a) of the Social Security Act (42  
22 U.S.C. 1397jj(a)) is amended—

23 (1) by redesignating paragraph (28) as para-  
24 graph (29); and

1           (2) by inserting after paragraph (27) the fol-  
2           lowing:

3           “(28) Evidence-based preventive services de-  
4           scribed in section 1905(ee).”.

5 **SEC. 205. COVERAGE OF MEDICAL NUTRITION THERAPY**  
6 **UNDER MEDICAID AND SCHIP.**

7           (a) STATE OPTION TO PROVIDE MEDICAL ASSIST-  
8           ANCE FOR MEDICAL THERAPY SERVICES.—

9           (1) IN GENERAL.—Section 1905(a) of the So-  
10          cial Security Act (42 U.S.C. 1396d), as amended by  
11          section 204(a)(1), is amended—

12                 (A) in paragraph (29), by striking “and”  
13                 at the end;

14                 (B) by redesignating paragraph (30) as  
15                 paragraph (31); and

16                 (C) by inserting after paragraph (29) the  
17                 following:

18                 “(30) medical nutrition therapy services (as de-  
19                 fined in section 1861(vv)(1)) for individuals with  
20                 pre-diabetes or obesity or who are overweight (as de-  
21                 fined by the Secretary); and”.

22           (2) CONFORMING AMENDMENT.—Section  
23          1902(a)(10)(C)(iv) of such Act, as amended by sec-  
24          tion 204(a)(2), is amended by striking “or (29)”  
25          and inserting “(29), or (30)”.

1 (b) STATE OPTION TO PROVIDE CHILD HEALTH AS-  
2 SISTANCE FOR MEDICAL NUTRITION THERAPY SERV-  
3 ICES.—Section 2110(a) of the Social Security Act (42  
4 U.S.C. 1397jj(a)), as amended by section 204(b), is  
5 amended—

6 (1) by redesignating paragraph (29) as para-  
7 graph (30); and

8 (2) by inserting after paragraph (28) the fol-  
9 lowing:

10 “(29) Medical nutrition therapy services (as de-  
11 fined in section 1861(vv)(1)) for individuals with  
12 pre-diabetes or obesity or who are overweight (as de-  
13 fined by the Secretary).”.

14 **SEC. 206. CLARIFICATION OF EPSDT INCLUSION OF PRE-**  
15 **VENTION, SCREENING, AND TREATMENT**  
16 **SERVICES FOR OBESITY AND OVERWEIGHT;**  
17 **SCHIP COVERAGE.**

18 (a) IN GENERAL.—Section 1905(r) of the Social Se-  
19 curity Act (42 U.S.C. 1396d(r)) is amended—

20 (1) in paragraph (1)(B)—

21 (A) in clause (iv), by striking “and” at the  
22 end;

23 (B) in clause (v), by striking the period at  
24 the end and inserting “, and”; and

25 (C) by adding at the end the following:

1                   “(vi) weight and BMI measurement  
2                   and monitoring.”.

3                   (2) in paragraph (5), by inserting “ (including  
4                   treatment services related to obesity and body  
5                   weight, such as medical nutrition therapy services  
6                   (as defined in section 1861(vv)(1)), physical therapy,  
7                   exercise training, behavioral health counseling, and  
8                   such other evidence-based services as recommended  
9                   by the Secretary (taking into consideration the  
10                  American Academy of Pediatrics Expert Committee  
11                  Guidelines Regarding the Prevention, Assessment,  
12                  and Treatment of Child and Adolescent Overweight  
13                  and Obesity)” after “screening services”.

14                  (b) SCHIP.—

15                   (1) REQUIRED COVERAGE.—Section 2103 (42  
16                   U.S.C. 1397cc) is amended—

17                   (A) in subsection (a), in the matter pre-  
18                   ceding paragraph (1), by striking “and (7)”  
19                   and inserting “(7), and (9)”; and

20                   (B) in subsection (c)—

21                   (i) by redesignating paragraph (7) as  
22                   paragraph (9); and

23                   (ii) by inserting after paragraph (6),  
24                   the following:

1           “(7) PREVENTION, SCREENING, AND TREAT-  
2           MENT SERVICES FOR OBESITY AND OVERWEIGHT.—  
3           The child health assistance provided to a targeted  
4           low-income child shall include coverage of weight  
5           and BMI measurement and monitoring, as well as  
6           appropriate treatment services, including medical  
7           nutrition therapy services (as defined in section  
8           1861(vv)(1)), physical therapy or exercise training,  
9           behavioral health counseling, and such other evi-  
10          dence based services as recommended by the Sec-  
11          retary. For purposes of the previous sentence the  
12          Secretary shall take into consideration the American  
13          Academy of Pediatrics Expert Committee Guidelines  
14          Regarding the Prevention, Assessment, and Treat-  
15          ment of Child and Adolescent Overweight and Obe-  
16          sity.”.

17           (2) CONFORMING AMENDMENT.—Section  
18          2102(a)(7)(B) (42 U.S.C. 1397bb(c)(2)) is amended  
19          by striking “section 2103(c)(5)” and inserting  
20          “paragraphs (5) and (7) of section 2103(c)”.

21 **SEC. 207. NATIONAL COMMISSION ON CHILD OBESITY.**

22          (a) ESTABLISHMENT.—There is established a com-  
23          mission to be known as the National Commission on Child  
24          Obesity (in this section referred to as the “Commission”).

1 (b) DUTIES OF COMMISSION.—The Commission  
2 shall—

3 (1) conduct a comprehensive study that exam-  
4 ines and assesses the needs of children relating to  
5 the prevalence, prevention, and treatment of child-  
6 hood overweight and obesity, including specific find-  
7 ings relating to—

8 (A) best practices for the prevention and  
9 treatment of childhood overweight and obesity;

10 (B) child physical health and mental  
11 health;

12 (C) child care in all settings;

13 (D) child welfare;

14 (E) elementary and secondary education;

15 (F) food availability in neighborhoods;

16 (G) access to health care;

17 (H) health care utilization;

18 (I) built environment;

19 (J) parent physical health and education;

20 (K) underserved communities, including  
21 tribal communities, health professional shortage  
22 areas designated under section 332 of the Pub-  
23 lic Health Service Act (42 U.S.C. 254e), medi-  
24 cally underserved areas (as defined in section  
25 799B of such Act (42 U.S.C. 295p), and areas

1 in the Appalachian region (as defined in section  
2 14102(a) of title 40, United States Code);

3 (L) relevant activities in childhood over-  
4 weight and obesity; and

5 (M) the availability of information on State  
6 and Federal supportive nutrition programs,  
7 such as the Summer Food Service Program, the  
8 Women, Infants, and Children Program, the  
9 State Children's Health Insurance Program  
10 under title XXI of the Social Security Act, and  
11 the Supplemental Nutrition Assistance Pro-  
12 gram;

13 (2) identify, review, and evaluate existing laws,  
14 regulations, policies, programs, and public health ini-  
15 tiatives relevant to best practices for the prevalence,  
16 prevention, and treatment of childhood overweight  
17 and obesity;

18 (3) identify, review, and evaluate the lessons  
19 learned from past laws, regulations, policies, pro-  
20 grams, and public health initiatives relevant to the  
21 prevalence, prevention, and treatment of childhood  
22 overweight and obesity;

23 (4) advise on the need to revise laws, regula-  
24 tions, policies, and programs relative to addressing  
25 best practices for the prevalence, prevention, and

1 treatment of childhood overweight and obesity at  
2 regular intervals as new knowledge is gained;

3 (5) include in the interim report required by  
4 subsection (i)(1) recommendations on—

5 (A) the appropriate Federal agency to es-  
6 tablish the infrastructure for the creation of a  
7 comprehensive nationwide registry of patient  
8 data associated with children living with obe-  
9 sity;

10 (B) the specific criteria needed for such  
11 registry to allow the field of pediatric clinicians  
12 access to patient-level, clinical data suitable for  
13 research and the development of best practices;

14 (C) the appropriate funding level required  
15 for the establishment and implementation of  
16 such the registry described in subparagraph  
17 (A); and

18 (D) how to capture large-scale data that  
19 are currently unavailable on adolescent and  
20 child patients who are currently obese; and

21 (6) include in the final report required by sub-  
22 section (i)(3) the Commission's specific findings,  
23 conclusions, and recommendations to address the  
24 needs of children relating to the prevention and



1 treatment of childhood overweight and obesity, in-  
2 cluding specific recommendations on—

3 (A) the need for planning and establishing  
4 a national resource center for children and obe-  
5 sity; and

6 (B) such coordination of resources and  
7 services, administrative actions, policies, regula-  
8 tions, and legislative changes as the Commis-  
9 sion considers appropriate.

10 (c) COMPOSITION.—

11 (1) MEMBERS.—The Commission shall be com-  
12 posed of 15 members, of whom—

13 (A) 3 members, each of a different political  
14 party, shall be appointed by the President;

15 (B) 3 members shall be appointed by the  
16 majority leader of the Senate;

17 (C) 3 members shall be appointed by the  
18 minority leader of the Senate;

19 (D) 3 members shall be appointed by the  
20 Speaker of the House of Representatives; and

21 (E) 3 members shall be appointed by the  
22 minority leader of the House of Representa-  
23 tives.

1           (2) APPOINTMENT.—Members of the Commis-  
2           sion shall be appointed not later than 6 months after  
3           the date of the enactment of this Act.

4           (3) CHAIRPERSON, VICE CHAIRPERSON, AND  
5           MEETINGS.—

6           (A) IN GENERAL.—Not later than 30 days  
7           after the date on which all members of the  
8           Commission are appointed under paragraph (1),  
9           such members shall meet to elect a Chairperson  
10          and Vice Chairperson from among such mem-  
11          bers and shall determine a schedule of Commis-  
12          sion meetings.

13          (B) INITIAL MEETING.—The Commission  
14          shall meet and begin the operations of the Com-  
15          mission not later than 120 days after the ap-  
16          pointment of members of the Commission.

17          (4) GOVERNMENTAL APPOINTEES.—An indi-  
18          vidual appointed to the Commission may not be an  
19          official or employee of the Federal Government.

20          (5) COMMISSION REPRESENTATION.—The Com-  
21          mission shall include at least one—

22                 (A) representative from each of a nonprofit  
23                 and for-profit entity with demonstrated exper-  
24                 tise in addressing the needs of children relating

1 to the prevalence, prevention, and treatment of  
2 childhood overweight and obesity;

3 (B) State or local director of health; and

4 (C) tribal health representative.

5 (6) QUALIFICATIONS.—Members appointed  
6 under paragraph (1) may include—

7 (A) individuals involved with providing  
8 services to children, including health and other  
9 social services;

10 (B) individuals involved with administering  
11 health insurance coverage to children;

12 (C) individuals with experience in public  
13 health initiatives relating to the prevention and  
14 treatment of childhood overweight and obesity,  
15 including coordination of resources and services  
16 among State and local governments, the Fed-  
17 eral Government, and nongovernmental entities;

18 (D) individuals with philanthropic experi-  
19 ence focused on the needs of children relating  
20 to the prevalence, prevention, and treatment of  
21 childhood overweight and obesity;

22 (E) individuals who have conducted aca-  
23 demic research relating to the prevalence, pre-  
24 vention, and treatment of childhood overweight  
25 and obesity; and

1 (F) individuals with significant experience  
2 in child health and policy.

3 (7) QUORUM AND VACANCY.—

4 (A) QUORUM.—A majority of the members  
5 of the Commission shall constitute a quorum,  
6 but a lesser number of members may hold hear-  
7 ings.

8 (B) VACANCY.—Any vacancy in the Com-  
9 mission shall not affect its powers and shall be  
10 filled in the same manner in which the original  
11 appointment was made.

12 (d) POWERS OF COMMISSION.—

13 (1) HEARINGS.—The Commission may hold  
14 such hearings, meet and act at such times and  
15 places, and receive such evidence as may be nec-  
16 essary to carry out the functions of the Commission.

17 (2) INFORMATION FROM FEDERAL AGENCIES.—

18 (A) IN GENERAL.—The Commission may  
19 access, to the extent authorized by law, from  
20 any executive department, bureau, agency,  
21 board, commission, office, independent estab-  
22 lishment, or instrumentality of the Federal Gov-  
23 ernment such information, suggestions, esti-  
24 mates, and statistics as the Commission con-  
25 siders necessary to carry out this section.

1           (B) PROVISION OF INFORMATION.—On  
2 written request of the Chairperson of the Com-  
3 mission, each department, bureau, agency,  
4 board, commission, office, independent estab-  
5 lishment, or instrumentality of the Federal Gov-  
6 ernment shall, to the extent authorized by law,  
7 provide the requested information to the Com-  
8 mission.

9           (C) RECEIPT, HANDLING, STORAGE, AND  
10 DISSEMINATION.—Information shall only be re-  
11 ceived, handled, stored, and disseminated by  
12 members of the Commission and its staff con-  
13 sistent with all applicable statutes, regulations,  
14 and Executive orders.

15 (3) ASSISTANCE FROM FEDERAL AGENCIES.—

16           (A) GENERAL SERVICES ADMINISTRA-  
17 TION.—On request of the Chairperson of the  
18 Commission, the Administrator of General  
19 Services shall provide to the Commission, on a  
20 reimbursable basis, administrative support and  
21 other assistance necessary for the Commission  
22 to carry out its duties.

23           (B) OTHER DEPARTMENTS AND AGEN-  
24 CIES.—In addition to assistance under subpara-  
25 graph (A), departments and agencies of the

1 United States may provide to the Commission  
2 such assistance as they determine advisable and  
3 as authorized by law.

4 (4) CONTRACTING.—The Commission may  
5 enter into financially reasonable contracts to enable  
6 the Commission to discharge its duties under this  
7 section.

8 (5) POSTAL SERVICES.—The Commission may  
9 use the United States mails in the same manner and  
10 under the same conditions as a department or agen-  
11 cy of the United States.

12 (e) STAFF OF COMMISSION.—

13 (1) IN GENERAL.—The Chairperson of the  
14 Commission, in consultation with the Vice Chair-  
15 person, in accordance with rules agreed upon by the  
16 Commission, may appoint and fix the compensation  
17 of a staff director, policy director, and administra-  
18 tive assistant (and other staff if agreed upon by a  
19 majority of Commission members) to enable the  
20 Commission to carry out its functions, in accordance  
21 with the provisions of title 5, United States Code,  
22 except that no rate of pay fixed under this para-  
23 graph may exceed the equivalent of that payable for  
24 a position at level V of the Executive Schedule under  
25 section 5316 of title 5, United States Code.

1           (2) STAFF OF FEDERAL AGENCIES.—Upon re-  
2           quest of the Chairperson of the Commission, the  
3           head of any executive department, bureau, agency,  
4           board, commission, office, independent establish-  
5           ment, or instrumentality of the Federal Government  
6           may detail, without reimbursement, any of its per-  
7           sonnel to the Commission to assist it in carrying out  
8           its duties under this section. Any detail of an em-  
9           ployee shall be without interruption or loss of civil  
10          service status or privilege.

11          (3) CONSULTANT SERVICES.—The Commission  
12          is authorized to procure (pursuant to a majority vote  
13          of the Commission members) the services of experts  
14          and consultants in accordance with section 3109 of  
15          title 5, United States Code, but at rates not to ex-  
16          ceed the daily equivalent of the annual rate of basic  
17          pay for level IV of the Executive Schedule under sec-  
18          tion 5315 of title 5, United States Code.

19          (f) TRAVEL EXPENSES.—Each member of the Com-  
20          mission shall serve without compensation, but shall receive  
21          travel expenses, including per diem in lieu of subsistence,  
22          in accordance with applicable provisions in the same man-  
23          ner as persons employed intermittently in the Government  
24          service are allowed expenses under section 5703 of title  
25          5, United States Code.

1 (g) APPLICABILITY OF FACA.—The Federal Advi-  
2 sory Committee Act, including any provisions applicable  
3 to staff, is deemed to apply to the Commission.

4 (h) REPORTS OF COMMISSION; TERMINATION.—

5 (1) INTERIM REPORT.—The Commission shall,  
6 not later than 1 year after the date of its first meet-  
7 ing, submit to the President and the Congress an in-  
8 terim report containing specific findings, conclu-  
9 sions, and recommendations required under this sec-  
10 tion and agreed to by a majority of Commission  
11 members.

12 (2) OTHER REPORTS AND INFORMATION.—

13 (A) REPORTS.—The Commission may  
14 issue additional reports as the Commission de-  
15 termines necessary.

16 (B) INFORMATION.—The Commission may  
17 hold public hearings to collect information and  
18 shall make such information available for use  
19 by the public.

20 (3) FINAL REPORT.—The Commission shall,  
21 not later than 2 years after the date of its first  
22 meeting, submit to the President and Congress a  
23 final report containing specific findings, conclusions,  
24 and recommendations required under this section



1 and agreed to by a majority of Commission mem-  
2 bers.

3 (4) TERMINATION.—

4 (A) IN GENERAL.—Unless reauthorized by  
5 statute, the Commission, and all the authorities  
6 of this section, shall terminate 180 days after  
7 the date on which the final report is submitted  
8 under paragraph (3).

9 (B) RECORDS.—Not later than the date of  
10 termination of the Commission under subpara-  
11 graph (A), all records and papers of the Com-  
12 mission shall be delivered to the Archivist of the  
13 United States for deposit in the National Ar-  
14 chives.

15 (i) DEFINITIONS.—In this section:

16 (1) OBESITY.—The term “obesity” with respect  
17 to children means having a body mass index (BMI)  
18 greater than or equal to the 95th percentile for age  
19 and sex according to the Centers for Disease Control  
20 and Prevention.

21 (2) CHILD; CHILDREN.—The terms “child” and  
22 “children” mean an individual or individuals, respec-  
23 tively, who have not attained 18 years of age.

1 (j) AUTHORIZATION OF APPROPRIATIONS.—There is  
2 authorized to be appropriated to carry out this section,  
3 \$1,500,000 for each of fiscal years 2012 and 2013.

4 **SEC. 208. GAO REPORT.**

5 Not later than 2 years after the first appropriation  
6 of Federal funds to carry out this Act, the Comptroller  
7 General of the United States shall submit to Congress a  
8 report on the effectiveness of the activities carried out  
9 under this Act in reducing child obesity, which shall in-  
10 clude an analysis of the costs and the benefits of such ac-  
11 tivities.

12 **TITLE III—ENCOURAGING PHYS-**  
13 **ICAL ACTIVITY IN UNDER-**  
14 **SERVED AMERICAN COMMU-**  
15 **NITIES**

16 **SEC. 301. RENOVATION OF FORECLOSED AND ABANDONED**  
17 **PROPERTIES TO CREATE SPACES THAT EN-**  
18 **COURAGE PHYSICAL ACTIVITY IN AMERICAN**  
19 **NEIGHBORHOODS.**

20 Section 106(a) of the Housing and Community De-  
21 velopment Act of 1974 (42 U.S.C. 5306(a)) is amended—

22 (1) in paragraph (3)—

23 (A) by striking “(1) and” and inserting

24 “(1),”; and

1 (B) by inserting “and after reserving such  
2 amounts for units of general local government,  
3 special district governments, and Indian tribes  
4 with high foreclosure rates and great infrastruc-  
5 ture need under paragraph (4),” after “para-  
6 graph (2),”;

7 (2) by redesignating paragraph (4) as para-  
8 graph (5);

9 (3) in paragraph (5), as redesignated by para-  
10 graph (2) of this section, by striking “paragraphs  
11 (1), (2), and (3)” and inserting “paragraphs (1),  
12 (2), (3), and (4)”;

13 (4) by inserting after paragraph (3) the fol-  
14 lowing new paragraph:

15 “(4)(A) For each fiscal year, of the amount ap-  
16 proved in appropriation Acts under section 103 for  
17 grants for such fiscal year (excluding the amounts  
18 provided for use in accordance with section 107), the  
19 Secretary shall reserve for grants to units of general  
20 local government, special district governments, and  
21 Indian tribes that the Secretary determines have  
22 both high foreclosure rates and the greatest infra-  
23 structure needs, based on the scope of the needs, an  
24 amount the Secretary determines necessary.

1           “(B) Grants under this paragraph may be used  
2           by units of general local government, special district  
3           governments, and Indian tribes to—

4                   “(i) renovate foreclosed commercial prop-  
5                   erties, abandoned commercial properties, or  
6                   both, to be transformed in community centers,  
7                   public recreation facilities, swimming pools, or  
8                   any other type of facility that will encourage in-  
9                   door physical activity;

10                   “(ii) demolish foreclosed or abandoned  
11                   commercial and residential properties, or both,  
12                   to use the sites for—

13                           “(I) the construction of parks, play-  
14                           grounds, outdoor swimming pools, tracks,  
15                           soccer fields, baseball diamonds, or any  
16                           other type of facility that will encourage  
17                           outdoor physical activity;

18                           “(II) community gardens or urban  
19                           farms, particularly in areas that are food  
20                           deserts (as such term is defined in section  
21                           7527(a) of the Food, Conservation, and  
22                           Energy Act of 2008 (Public Law 110–234;  
23                           122 Stat. 2039); or

1                   “(III) mixed used facilities that are  
2                   used for both of the purposes under sub-  
3                   clauses (I) and (II) of this clause; and

4                   “(iii) reconstruct and repair dilapidated  
5                   sidewalks, bike and pedestrian trails, and in-  
6                   door and outdoor facilities that encourage phys-  
7                   ical activity.

8                   “(C) In making grants under this paragraph,  
9                   the Secretary shall give priority among units of gen-  
10                  eral local government, special district governments,  
11                  and Indian tribes eligible pursuant to subparagraph  
12                  (A)—

13                  “(i) to units of general local government,  
14                  special district governments, and Indian tribes  
15                  that demonstrate the ability and willingness to  
16                  work with local educational agencies, devel-  
17                  opers, and other community-based organizations  
18                  to enter into mixed-use agreements to maximize  
19                  the use and efficiency of properties renovated,  
20                  constructed, or reconstructed and repaired  
21                  through the use of grant funds;

22                  “(ii) to units of general local government,  
23                  special district governments, and Indian tribes  
24                  that demonstrate the willingness to recognize  
25                  and promote the involvement of individuals en-

1           rolled in a national service program authorized  
2           under the National and Community Service Act  
3           of 1990 (42 U.S.C. 12501 et seq.) or the Do-  
4           mestic Volunteer Service Act of 1973 (42  
5           U.S.C. 4950 et seq.) in the renovation, con-  
6           struction, or reconstruction and repair of prop-  
7           erties through the use of grant funds; and

8           “(iii) to projects proposed by units of gen-  
9           eral local government, special district govern-  
10          ments, and Indian tribes that are easily acces-  
11          sible, on foot or by public transportation, for  
12          persons in low-income communities.

13          “(D) For purposes of this paragraph, the term  
14          ‘special district government’ means any organized  
15          local entity, known by a variety of titles, including  
16          districts, authorities, boards, and commissions, other  
17          than a unit of general local government or local edu-  
18          cational agency, authorized by State law to provide  
19          only one or a limited number of designated func-  
20          tions, and with sufficient administrative and fiscal  
21          autonomy to qualify as a separate government unit,  
22          as determined by the Secretary.”.

1 **SEC. 302. NATIONAL YOUTH SPORTS PROGRAM REVITAL-**  
2 **IZATION.**

3 Section 682(g) of the Community Services Block  
4 Grant Act (42 U.S.C. 9923(g)) is amended by striking  
5 “\$15,000,000” and all that follows through “2003” and  
6 inserting “\$20,000,000 for each of the fiscal years 2012  
7 through 2021”.

8 **SEC. 303. EXPANSION OF THE ZUNI YOUTH ENRICHMENT**  
9 **PROJECT SUMMER CAMP.**

10 (a) IN GENERAL.—The Secretary of Health and  
11 Human Services shall establish a 2-year pilot program to  
12 provide funds to community-based organizations on Indian  
13 reservations or tribal lands to plan and implement an en-  
14 richment program for children (in the form of a summer  
15 camp and a year-round program) for the purpose of—

16 (1) reversing the epidemics of obesity, diabetes,  
17 and alcoholism in such areas; and

18 (2) to mitigate other problems stemming from  
19 the formation of bad habits and the development of  
20 low self-esteem during childhood.

21 (b) PARTNERSHIPS.—In order to qualify for funding  
22 under subsection (a), a community-based organization  
23 shall demonstrate, to the satisfaction of the Secretary of  
24 Health and Human Services, that the organization has en-  
25 tered into a partnership with community entities, local  
26 funders, and tribal leaders (including, if applicable, the

1 tribal council) to plan and execute an enrichment program  
2 under subsection (a).

3 (c) NUMBER OF SITES.—The Secretary of Health  
4 and Human Services, in providing funding under sub-  
5 section (a), shall provide funding to no more than 20 com-  
6 munity-based organizations.

7 (d) MODEL AND CAMP REQUIREMENT.—The enrich-  
8 ment program under subsection (a) shall—

9 (1) be modeled on similar programs established  
10 by the Zuni Youth Enrichment Project; and

11 (2) shall include a camp of at least 6 weeks in  
12 duration during the summer.

13 (e) SPECIFIC CAMP REQUIREMENTS.—

14 (1) DAILY ACTIVITIES.—With respect to chil-  
15 dren attending a camp under subsection (d)(2), the  
16 leader of the organization that receives funds under  
17 subsection (a) shall, for each day of the camp, en-  
18 sure that, such children are—

19 (A) involved in at least 60 minutes of  
20 physical activity (with appropriate accommoda-  
21 tions made for children with disabilities); and

22 (B) provided with at least two meals that  
23 meet national nutritional standards.

24 (2) OTHER ACTIVITIES.—Such leader shall also  
25 ensure that—



1           (A) a community gardening activity is in-  
2           cluded in the activities conducted at the camp;  
3           and

4           (B) health and wellness education is pro-  
5           vided to the children attending the camp.

6           (f) EVALUATION.—

7           (1) IN GENERAL.—A community-based organi-  
8           zation that receives funding under subsection (a),  
9           shall, as a condition of receiving such funding, con-  
10          duct an evaluation of the enrichment program con-  
11          ducted by such organization.

12          (2) MODEL.—The form, manner, content, and  
13          frequency of the evaluation under paragraph (1)  
14          shall be modeled on the Zuni Youth Enrichment  
15          Project standard project evaluation.

16          (g) REPORT.—Not later than 1 year after the date  
17          on which a community organization first receives funding  
18          under subsection (a) and annually thereafter, the organi-  
19          zation shall—

20               (1) submit a report to the to the Secretary of  
21               Health and Human Services on the outcomes of the  
22               enrichment program conducted by the organization  
23               under this section, including—

24                       (A) the findings of the evaluation con-  
25                       ducted under subsection (f); and

1 (B) the impact of such enrichment pro-  
2 gram on the rates of childhood obesity on the  
3 reservation or area of tribal land served by the  
4 organization; and

5 (2) provide a copy of the findings under para-  
6 graph (1)(A) to community entities, local funders,  
7 tribal leaders (including, if applicable, the tribal  
8 council), and the families of children participating in  
9 the enrichment program.

10 **SEC. 304. MAKING ROUTES TO SCHOOLS IN UNDERSERVED**  
11 **COMMUNITIES SAFE AND ACCESSIBLE WITH**  
12 **PUBLIC PARTICIPATION THROUGH THE COM-**  
13 **MUNITY ORIENTED POLICING SERVICES PRO-**  
14 **GRAM.**

15 Section 1701 of the Omnibus Crime Control and Safe  
16 Streets Act of 1968 (42 U.S.C. 3796dd) is amended—

17 (1) in subsection (b)—

18 (A) in paragraph (16), by striking “and”  
19 after the semicolon;

20 (B) by redesignating paragraph (17) as  
21 paragraph (18), and in such paragraph (18) (as  
22 so redesignated), by striking “through (16)”  
23 and inserting “through (17)”; and

24 (C) by inserting after paragraph (16) the  
25 following new paragraph:

1           “(17) to award grants for Safe Routes to  
2 School-Community Oriented Policing Services pro-  
3 grams, in accordance with subsection (j); and”;

4           (2) by adding at the end the following new sub-  
5 section:

6           “(j) SAFE ROUTES TO SCHOOL-COMMUNITY ORI-  
7 ENTED POLICING SERVICES PROGRAMS.—

8           “(1) GRANT PROGRAM.—The Director of the  
9 Office of Community Oriented Policing Services, in  
10 collaboration with the Secretary of Education, shall  
11 award grants to not fewer than 10 local and tribal  
12 law enforcement agencies in low-income communities  
13 for the planning, development, and assessment of  
14 Safe Routes to School-Community Oriented Policing  
15 Services programs in accordance with this sub-  
16 section.

17           “(2) GRANT PERIOD.—Each grant awarded  
18 under this subsection shall be for a 3-year period be-  
19 ginning with the first fiscal year that begins after  
20 the date of enactment of the Fit for Life Act of  
21 2011, and may not be renewed.

22           “(3) USE OF GRANTS.—A grant awarded under  
23 this subsection shall be used by each grantee to—

24           “(A) assess the needs of the low-income  
25 community served by the grantee with respect

1 to the ability of elementary and secondary  
2 school students to get to and from school safely;  
3 and

4 “(B) establish and maintain a Safe Routes  
5 to School-Community Oriented Policing Serv-  
6 ices program that ensures the availability of  
7 safe routes to and from school for elementary  
8 and secondary school students in underserved  
9 communities by addressing the unique personal  
10 safety dangers to students in such communities  
11 that may cause routes to or from school to be  
12 unsafe, such as dangers associated with crime,  
13 drug or gang activity, abandoned properties,  
14 and the presence of sexual predators.

15 “(4) REPORTS.—Not later than one year after  
16 receiving a grant award under this subsection, and  
17 annually thereafter, each grantee shall submit to the  
18 Director of the Office of Community Oriented Polic-  
19 ing Services a report on the Safe Routes to School-  
20 Community Oriented Policing Services program car-  
21 ried out by the grantee that includes—

22 “(A) a description of the activities carried  
23 out with such grant during the preceding year;

1           “(B) the effectiveness of such activities in  
2           ensuring safe routes to and from school for ele-  
3           mentary and secondary school students;

4           “(C) a description of the activities the  
5           grantee plans to carry out with such grant in  
6           succeeding years; and

7           “(D) best practices, plans, and findings for  
8           purposes of incorporation into urban planning  
9           and development in underserved communities in  
10          succeeding years.

11          “(5) DEFINITION.—The term ‘low-income com-  
12          munities’ includes—

13               “(A) communities with a high percentage  
14               of children eligible for free and reduced priced  
15               lunches under the Richard B. Russell National  
16               School Lunch Act (42 U.S.C. 1751 et seq.);  
17               and

18               “(B) any other communities determined by  
19               the Director of the Office of Community Ori-  
20               ented Policing Services to be low-income for  
21               purposes of this section.”.

1 **SEC. 305. LAND AND WATER CONSERVATION FUND PRO-**  
2 **GRAM GRANTS IN LOW-INCOME COMMU-**  
3 **NITIES AND EXPAND TRIBAL PARTICIPATION.**

4 Section 6(e) of the Land and Water Conservation Act  
5 of 1965 (16 U.S.C. 4601–8(e)) is amended by adding at  
6 the end the following:

7 “(3) **LOW-INCOME COMMUNITIES AND INDIAN**  
8 **RESERVATIONS.**—For development of programs to  
9 increase the use of and access to parks and open  
10 space in low-income communities and on or near In-  
11 dian reservations.”.

12 **SEC. 306. CHANGING HEARTS, ATTITUDES, AND MINDS BY**  
13 **PARTICIPATING IN SPORTS (CHAMPS) PRO-**  
14 **GRAM.**

15 Part B of title III of the Public Health Service Act  
16 is amended by inserting after section 317T (42 U.S.C.  
17 247b–22) the following:

18 **“SEC. 317U. CHANGING HEARTS, ATTITUDES, AND MINDS BY**  
19 **PARTICIPATING IN SPORTS (CHAMPS) PRO-**  
20 **GRAM.**

21 “(a) **IN GENERAL.**—The Secretary, acting through  
22 the Director of the Centers for Disease Control and Pre-  
23 vention, may make grants to eligible entities to carry out  
24 nationally-based or community-based qualified childhood  
25 obesity prevention initiatives.

1       “(b) ELIGIBLE ENTITIES.—To be eligible to seek a  
2 grant under this section, an entity shall be—

3               “(1) a nationally-based nonprofit organization  
4 proposing to implement programs described in sub-  
5 section (c), each serving at least 1,000 individuals,  
6 at 5 or more locations across the Nation; or

7               “(2) a community-based nonprofit organization  
8 proposing to implement a program described in sub-  
9 section (c) serving at least 1,000 individuals.

10       “(c) QUALIFIED CHILDHOOD OBESITY PREVENTION  
11 INITIATIVE.—To qualify as a childhood obesity prevention  
12 initiative eligible for funding under this section, an initia-  
13 tive shall consist of programs that—

14               “(1) serve children or adolescents most at risk  
15 for being overweight and obese in predominantly  
16 economically disadvantaged communities;

17               “(2) serve children or adolescents during after-  
18 school hours, weekends, or summer hours;

19               “(3) provide structured physical fitness activi-  
20 ties, including organized sports, which engage each  
21 participant in a minimum of 60 minutes of moderate  
22 to vigorous physical activity at least three days per  
23 week for a period of at least 24 weeks in a given  
24 year;

1           “(4) provide adult supervision and guidance or  
2 coaches who encourage and teach proper exercise  
3 techniques and skills;

4           “(5) combine physical fitness activities with nu-  
5 tritional counseling and education; and

6           “(6) demonstrate measurable results for reduc-  
7 ing childhood obesity on the part of participants, in-  
8 cluding through—

9           “(A) measurement and study of partici-  
10 pants’ moderate to vigorous physical activity  
11 (MVPA) each day, both as part of the pro-  
12 grams funded under this section and on the  
13 participants’ own initiative;

14           “(B) increased knowledge of and aware-  
15 ness about the importance of physical activity  
16 and exercise as well as the nutritional value of  
17 food and beverage choices;

18           “(C) keeping track of and reporting mean-  
19 ingful reductions in the consumption of food  
20 and beverages with low nutritional value, in-  
21 creased consumption of healthy items, and in-  
22 creased levels of unstructured, self-initiated  
23 physical activity outside of the programs funded  
24 under this section; and



1           “(D) measurement and study of partici-  
2 pants’ body mass index (BMI) indicating  
3 that—

4           “(i) children entering programs fund-  
5 ed under this section with a healthy body  
6 mass index maintain it while participating  
7 in such programs; and

8           “(ii) children participating in such  
9 programs with an unhealthy body mass  
10 index halt any negative trend lines towards  
11 obesity or begin trend lines in a positive di-  
12 rection.

13       “(d) PRIORITY.—In selecting among applicants for  
14 grants under this section, the Secretary shall give priority  
15 to eligible entities proposing to carry out programs that  
16 will provide additional societal benefits, such as—

17           “(1) improvements to academic performance in  
18 school;

19           “(2) character building and leadership develop-  
20 ment;

21           “(3) gang and juvenile delinquency prevention  
22 and reduction;

23           “(4) gender equality and female empowerment;

24           “(5) mentoring, volunteerism promotion, and  
25 service-learning opportunities;

1           “(6) family and community engagement and  
2 participation; or

3           “(7) workforce education and career develop-  
4 ment opportunities.

5           “(e) DISTRIBUTION OF FUNDS.—Of the amount  
6 made available to carry out this section for a fiscal year,  
7 the Secretary shall award—

8           “(1) not less than 25 percent of such amount  
9 to nationally-based nonprofit organizations described  
10 in subsection (b)(1); and

11           “(2) not more than 75 percent of such amount  
12 to community-based nonprofit organizations de-  
13 scribed in subsection (b)(2).

14           “(f) COST-SHARE REQUIREMENTS.—

15           “(1) IN GENERAL.—With respect to the costs of  
16 a qualified childhood obesity prevention initiative to  
17 be carried out under this section—

18           “(A) in the case of an applicant that is a  
19 nationally-based nonprofit organization, a grant  
20 under subsection (a) may be made only if the  
21 organization agrees to make available (directly  
22 or through donations from public or private en-  
23 tities) non-Federal contributions toward such  
24 costs in an amount that is not less than one-

1           third of such costs (\$1 for each \$2 of Federal  
2           funds provided in the grant); and

3           “(B) in the case of an applicant that is a  
4           community-based nonprofit organization, a  
5           grant under subsection (a) may be made only if  
6           the organization agrees to make available (di-  
7           rectly or through donations from public or pri-  
8           vate entities) non-Federal contributions toward  
9           such costs in an amount that is not less than  
10          one-fourth of such costs (\$1 for each \$3 of Fed-  
11          eral funds provided in the grant).

12          “(2) NON-FEDERAL CONTRIBUTIONS BY SUB-  
13          GRANTEES.—If a nationally-based nonprofit organi-  
14          zation chooses to provide grant funds received under  
15          this section to a subgrantee to carry out one or more  
16          programs as part of the organization’s qualified  
17          childhood obesity prevention initiative, the organiza-  
18          tion shall require the subgrantee to make available  
19          (directly or through donations from public or private  
20          entities) non-Federal contributions toward the costs  
21          of such programs in an amount that is not less than  
22          one-third of such costs (\$1 for each \$2 of Federal  
23          funds provided in the grant). The amount of non-  
24          Federal contributions by subgrantees required under  
25          this paragraph is in addition to the amount of non-

1 Federal contributions by the nationally-based non-  
2 profit organization required under paragraph (1).

3 “(3) DETERMINATION OF AMOUNT CONTRIB-  
4 UTED.—

5 “(A) IN GENERAL.—Non-Federal contribu-  
6 tions required by paragraph (1) or (2)—

7 “(i) in the case of a nationally-based  
8 nonprofit organization, shall be made in  
9 cash; and

10 “(ii) in the case of a subgrantee de-  
11 scribed in paragraph (2) or a community-  
12 based nonprofit organization, may be in  
13 cash or in kind, fairly evaluated, including  
14 plant, equipment, or services.

15 “(B) EXCLUSION OF FEDERAL CONTRIBU-  
16 TIONS.—Amounts provided by the Federal Gov-  
17 ernment, or services assisted or subsidized to  
18 any significant extent by the Federal Govern-  
19 ment, may not be included in determining the  
20 amount of non-Federal contributions required  
21 by paragraph (1) or (2).

22 “(g) REPORT TO CONGRESS.—Not later than one  
23 year after the first appropriation of Federal funds to carry  
24 out this section, the Secretary shall report to the Congress

1 on the progress made in carrying out programs funded  
2 by grants under this section.

3 “(h) **BEST PRACTICES GUIDELINES.**—Based on the  
4 results of programs funded through grants under this sec-  
5 tion during the first two fiscal years of such funding, the  
6 Secretary shall develop publicly-accessible best practices  
7 guidelines for obesity reduction programs. The Secretary  
8 shall update these guidelines every two years.

9 “(i) **AUTHORIZATION OF APPROPRIATIONS.**—To  
10 carry out this section, there is authorized to be appro-  
11 priated \$50,000,000 for each of fiscal years 2012 through  
12 2016.”.

13 **SEC. 307. COORDINATED SCHOOL HEALTH INITIATIVES.**

14 (a) **IN GENERAL.**—From the amounts appropriated  
15 to carry out this section, the Secretary of Education shall  
16 carry out a pilot program to award grants to not more  
17 than 5 eligible entities to carry out coordinated school  
18 health initiatives in schools.

19 (b) **AMOUNT OF GRANT.**—A grant awarded under  
20 subsection (a) may not exceed \$15,000.

21 (c) **USE OF FUNDS.**—An eligible entity receiving a  
22 grant under this section shall carry out a coordinated  
23 school health initiative in each school under the jurisdic-  
24 tion of the entity under which the entity shall—

1           (1) carry out a program, such as a fitnessgram,  
2           to assess the physical fitness (including aerobic ca-  
3           pacity, muscular strength and endurance, flexibility,  
4           and body composition) of each student served by the  
5           entity; and

6           (2) evaluate such assessments to—

7                   (A) establish baselines with respect to aer-  
8                   obic capacity, muscular strength and endur-  
9                   ance, flexibility, and body composition that each  
10                  such student should meet by a certain period;  
11                  and

12                   (B) identify interventions to assist each  
13                  such student in meeting such baselines;

14           (3) review the interventions identified under  
15           paragraph (2)(B) to determine the best practices  
16           with respect to such interventions;

17           (4) use the determinations for best practices  
18           under paragraph (3) to implement interventions in  
19           each school under the jurisdiction of the entity; and

20           (5) not later than 1 year after the implementa-  
21           tion of the interventions, assess the physical fitness  
22           of each student served by the entity.

23           (d) REPORTING.—

24                   (1) ELIGIBLE ENTITY.—Each eligible entity re-  
25                  ceiving a grant under this section shall submit to the

1 Secretary at such time and in such manner as deter-  
2 mined by the Secretary, a report on—

3 (A) the initial physical fitness assessments  
4 carried out under subsection (c)(1);

5 (B) the interventions implemented under  
6 subsection (c)(4); and

7 (C) the physical fitness assessments car-  
8 ried out under subsection (c)(5) after the inter-  
9 ventions have been implemented.

10 (2) SECRETARY.—Not later than the first ap-  
11 propriation of Federal funds to carry out this sec-  
12 tion, the Secretary shall use the reports received  
13 under paragraph (1) to prepare and transmit to  
14 Congress a report on—

15 (A) the average physical fitness levels of  
16 students participating in the coordinated school  
17 health initiative under this section—

18 (i) prior to the interventions imple-  
19 mented by each eligible entity under this  
20 section; and

21 (ii) 1 year after the implementation of  
22 the interventions;

23 (B) the best practices with respect to the  
24 interventions; and

1 (C) recommendations on how schools and  
2 local educational agencies may incorporate such  
3 best practices.

4 (e) APPLICATION.—To receive a grant under this sec-  
5 tion, an eligible entity shall submit an application to the  
6 Secretary of Education at such time, in such manner, and  
7 containing such information as the Secretary may require.

8 (f) SUPPLEMENT, NOT SUPPLANT.—Funds received  
9 under this section shall be used to supplement, and not  
10 supplant, non-Federal funds that would otherwise be used  
11 for activities authorized under this section.

12 (g) DEFINITIONS.—For purposes of this section:

13 (1) ELIGIBLE ENTITY.—The term “eligible enti-  
14 ty” means a local educational agency—

15 (A) that serves—

16 (i) a high percentage of students eligi-  
17 ble for free or reduced price lunches under  
18 the Richard B. Russell National School  
19 Lunch Act; or

20 (ii) a community otherwise determined  
21 by the Secretary to be a low-income com-  
22 munity; and

23 (B) that forms a partnership with an insti-  
24 tution of higher education or a nonprofit health  
25 or education organization, as determined by the



1 Secretary, for the purposes of carrying out the  
2 coordinated school health initiative described in  
3 subsection (c).

4 (2) INSTITUTION OF HIGHER EDUCATION.—The  
5 term “institution of higher education” has the  
6 meaning given the term in section 101 of the Higher  
7 Education Act of 1965 (20 U.S.C. 1001).

8 (3) LOCAL EDUCATIONAL AGENCY.—The term  
9 “local educational agency” has the meaning given  
10 such term in section 9101 of the Elementary and  
11 Secondary Education Act of 1965 (20 U.S.C. 7801).

12 (4) SECRETARY.—The term “Secretary” means  
13 the Secretary of Agriculture.

14 **SEC. 308. REWARDING ELEMENTARY AND SECONDARY**  
15 **SCHOOLS FOR OUTSTANDING STUDENT PER-**  
16 **FORMANCE IN PHYSICAL FITNESS PRO-**  
17 **GRAMS.**

18 (a) IN GENERAL.—The Secretary of Health and  
19 Human Services may make grants to elementary and sec-  
20 ondary schools as rewards for their students’ outstanding  
21 performance in the President’s Challenge or other feder-  
22 ally supported physical fitness programs.

23 (b) PREFERENCE.—In making grants under sub-  
24 section (a), the Secretary shall give preference to elemen-  
25 tary and secondary schools that—

1           (1) have the highest percentage of students  
2           earning a Presidential Physical Fitness Award  
3           through the President's Challenge; and

4           (2) demonstrate the greatest improvement in  
5           the number or percentage of students earning the  
6           National Physical Fitness Award and the Partici-  
7           pant Physical Fitness Award through the Presi-  
8           dent's Challenge.

9           (c) USE OF FUNDS.—As a condition on receipt of a  
10          grant under this section, a school shall agree to use the  
11          grant funds for programs and activities to further improve  
12          the physical fitness of students.

13          (d) APPLICATION.—To seek a grant under this sec-  
14          tion, a school shall submit an application at such time,  
15          in such manner, and containing such information as the  
16          Secretary may require. At a minimum, an application  
17          under this subsection shall include—

18                 (1) a description of the school's programs and  
19                 activities for improving physical fitness;

20                 (2) an assurance of compliance with applicable  
21                 requirements of physical fitness programs of the De-  
22                 partment of Health and Human Services; and

23                 (3) an assessment of physical fitness levels of  
24                 students in the school before, during, and after im-  
25                 plementation such programs.

1 (e) REPORTS.—

2 (1) HHS.—Not later than 18 months after the  
3 date of the enactment of this Act, and annually  
4 thereafter, the Secretary shall submit a report to the  
5 Congress on the program of grants under this sec-  
6 tion, including—

7 (A) a description of best practices by ele-  
8 mentary and secondary schools for improving  
9 physical fitness; and

10 (B) any recommendations for improving  
11 the program under this section.

12 (2) GAO.—Not later than 24 months after the  
13 date of the enactment of this Act, the Comptroller  
14 General of the United States shall complete a study  
15 and submit a report to the Congress—

16 (A) analyzing physical fitness levels of stu-  
17 dents in elementary and secondary schools  
18 across the Nation;

19 (B) evaluating the President’s Challenge to  
20 determine whether the standards for Presi-  
21 dential Physical Fitness Awards, National  
22 Physical Fitness Awards, and Participant Phys-  
23 ical Fitness Awards are accurate, up-to-date,  
24 and appropriate; and

1 (C) evaluating the effectiveness of the  
2 awards described in subparagraph (B).

3 (f) DEFINITIONS.—In this section:

4 (1) The term “elementary and secondary  
5 schools” means public or private elementary schools  
6 and secondary schools (as defined in section 9101 of  
7 the Elementary and Secondary Education Act of  
8 1965 (20 U.S.C. 7801)).

9 (2) The term “President’s Challenge” refers to  
10 the premier program of the President’s Council on  
11 Fitness, Sports & Nutrition, under the Secretary of  
12 Health and Human Services, for increasing physical  
13 activity and improving physical fitness.

14 (3) The term “Secretary” means the Secretary  
15 of Health and Human Services.

○