

117TH CONGRESS
1ST SESSION

H. R. 747

To amend the Public Health Service Act to authorize grants for acquiring equipment and supplies capable of performing same-day clinical laboratory testing in a point-of-care setting, and to assist laboratories in meeting the cost of acquiring high-throughput equipment, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 3, 2021

Ms. DEGETTE (for herself and Mr. BUCSHON) introduced the following bill;
which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to authorize grants for acquiring equipment and supplies capable of performing same-day clinical laboratory testing in a point-of-care setting, and to assist laboratories in meeting the cost of acquiring high-throughput equipment, 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 “Access to Technology
5 and Equipment for Same-day Tests Act” or the “Access
6 to TESTs Act”.

1 **SEC. 2. GRANTS FOR SAME-DAY POINT-OF-CARE TESTING**
2 **IN COMMUNITIES.**

3 Section 2821 of the Public Health Service Act (42
4 U.S.C. 300hh–31) is amended—

5 (1) by redesignating subsection (b) as sub-
6 section (d); and

7 (2) after making such redesignation, by insert-
8 ing after subsection (a) the following new subsection:

9 “(b) GRANTS FOR SAME-DAY POINT-OF-CARE TEST-
10 ING IN COMMUNITIES.—

11 “(1) GRANTS.—The Secretary, acting through
12 the Director of the Centers for Disease Control and
13 Prevention, shall award grants to eligible entities to
14 assist such entities in acquiring legally-marketed
15 equipment and supplies capable of performing, stor-
16 ing, and processing same-day clinical laboratory test-
17 ing, including molecular, serological, and antigen
18 tests, in a point-of-care setting.

19 “(2) ELIGIBILITY.—To be eligible for a grant
20 under paragraph (1), an entity shall—

21 “(A) be—

22 “(i) a hospital;

23 “(ii) a primary care facility;

24 “(iii) a clinic;

25 “(iv) a pharmacy;

26 “(v) a physician; or

1 “(vi) such other type of health care
2 provider as the Secretary may determine
3 for purposes of this section;

4 “(B) be in compliance with section 353
5 (commonly referred to as the ‘Clinical Labora-
6 tory Improvement Amendments of 1988’); and

7 “(C) submit to the Secretary an applica-
8 tion at such time, in such manner, and con-
9 taining such information as the Secretary may
10 reasonably require.

11 “(3) AMOUNT OF GRANT.—The amount of a
12 grant under paragraph (1) may not exceed \$20,000.

13 “(4) PRIORITY.—In awarding grants under
14 paragraph (1), the Secretary shall give highest pri-
15 ority to eligible entities providing services to—

16 “(A) underserved populations in rural
17 areas; and

18 “(B) medically underserved populations (as
19 defined in section 330(b)(3)).”.

20 **SEC. 3. GRANTS FOR LABORATORIES TO ACQUIRE HIGH-**
21 **THROUGHPUT DIAGNOSTIC EQUIPMENT.**

22 Section 2821 of the Public Health Service Act (42
23 U.S.C. 300hh–31) is amended by inserting after sub-
24 section (b) (as added by section 2) the following new sub-
25 section:

1 “(c) GRANTS FOR LABORATORIES TO ACQUIRE
2 HIGH-THROUGHPUT DIAGNOSTIC EQUIPMENT.—

3 “(1) GRANTS.—The Secretary, acting through
4 the Director of the Centers for Disease Control and
5 Prevention, shall award grants to eligible entities to
6 assist such entities in purchasing high-throughput
7 diagnostic equipment and related supplies to admin-
8 ister, store, and process molecular, serological, and
9 antigen tests.

10 “(2) ELIGIBILITY.—To be eligible for a grant
11 under paragraph (1), an entity shall—

12 “(A) be—

13 “(i) a State, local, or Tribal public
14 health laboratory;

15 “(ii) a laboratory within a public
16 health laboratory network coordinated or
17 managed by the Centers for Disease Con-
18 trol and Prevention;

19 “(iii) a laboratory not described in
20 clause (i) or (ii) that the Secretary deter-
21 mines (at the Secretary’s discretion) pro-
22 vides population-based testing for the pre-
23 vention and control of infectious, commu-
24 nicable, genetic, or chronic diseases; or

1 “(iv) a consortium of 2 or more enti-
2 ties described in any of clauses (i) through
3 (iii); and

4 “(B) submit to the Secretary an applica-
5 tion at such time, in such manner, and con-
6 taining such information as the Secretary may
7 reasonably require.

8 “(3) AMOUNT OF GRANT.—The amount of a
9 grant under paragraph (1) may not exceed
10 \$2,000,000, except in the case of eligible entity de-
11 scribed in paragraph (2)(A)(iv).

12 “(4) HIGH-THROUGHPUT DIAGNOSTIC EQUIP-
13 MENT DEFINED.—In this subsection, the term ‘high-
14 throughput diagnostic equipment’ means legally-
15 marketed equipment capable of performing multi-
16 channel analysis for use in clinical laboratory test-
17 ing, including molecular, serological, and antigen
18 tests.”.

19 **SEC. 4. AUTHORIZATION OF APPROPRIATIONS.**

20 Section 2821(d) of the Public Health Service Act (42
21 U.S.C. 300hh–31(d)) (as redesignated by section 2) is
22 amended to read as follows:

23 (1) by striking “There are authorized to be ap-
24 propriated to carry out this section” and inserting
25 the following:

1 “(1) IN GENERAL.—There is authorized to be
2 appropriated to carry out subsection (a)”; and

3 (2) by adding at the end, the following:

4 “(2) AUTHORIZATION OF APPROPRIATIONS.—

5 “(A) TESTING GRANTS.—For carrying out
6 subsection (b), there is authorized to be appro-
7 priated \$500,000,000 for fiscal year 2021, to
8 remain available until expended.

9 “(B) EQUIPMENT GRANTS.—For carrying
10 out subsection (c), there is authorized to be ap-
11 propriated \$250,000,000 for fiscal year 2021,
12 to remain available until expended.

13 “(C) ADMINISTRATIVE EXPENSES.—Of the
14 total amount made available to carry out sub-
15 sections (b) and (c) for any fiscal year, the Sec-
16 retary may not use more than 5 percent of such
17 amount for the expenses of administering such
18 subsections.”.

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