

119TH CONGRESS
2D SESSION

H. R. 10068

To amend the Public Health Service Act to provide for a Reducing Youth Use of E-Cigarettes Initiative.

IN THE HOUSE OF REPRESENTATIVES

AUGUST 6, 2026

Ms. WASSERMAN SCHULTZ (for herself, Mr. KRISHNAMOORTHY, and Mr. DESAULNIER) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to provide for a Reducing Youth Use of E-Cigarettes Initiative.

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 “Preventing Opportuni-
5 ties for Teen E-Cigarette and Tobacco Addiction Act” or
6 the “PROTECT Act”.

1 **SEC. 2. REDUCING YOUTH USE OF E-CIGARETTES INITIA-**
2 **TIVE.**

3 The Public Health Service Act is amended by insert-
4 ing after section 317V of such Act (42 U.S.C. 247b–24)
5 the following:

6 **“SEC. 317W. REDUCING YOUTH USE OF E-CIGARETTES INI-**
7 **TIATIVE.**

8 “(a) IN GENERAL.—The Secretary, acting through
9 the Director of the Centers for Disease Control and Pre-
10 vention, shall carry out an initiative, to be known as the
11 Reducing Youth Use of E-Cigarettes Initiative, which shall
12 include the following:

13 “(1) Conducting research (including by enhanc-
14 ing State-level surveillance and by using rapid sur-
15 veillance methods) on use by youth and young adults
16 of electronic cigarettes and emerging tobacco prod-
17 ucts, including research on—

18 “(A) the types of products youth and
19 young adults use;

20 “(B) patterns of products used by youth
21 and young adults, including initiation, fre-
22 quency of use, use in combination with other to-
23 bacco products, and use of flavors;

24 “(C) the association between the use by
25 youth and young adults of electronic cigarettes

1 and the initiation of smoking with cigarettes or
2 cigars;

3 “(D) use of electronic cigarettes and
4 emerging tobacco products among different de-
5 mographic groups;

6 “(E) the means by which youth and young
7 adults access electronic cigarettes and emerging
8 tobacco products, and methods of distribution
9 of electronic cigarettes and emerging tobacco
10 products;

11 “(F) youth and young adult exposure to
12 advertising of electronic cigarettes and emerg-
13 ing tobacco products;

14 “(G) marketing and advertising strategies
15 used by manufacturers, including the channels
16 and messaging used and strategies that target
17 different demographic groups;

18 “(H) the reasons youth and young adults
19 use such products;

20 “(I) the extent to which youth and young
21 adult electronic cigarette users are nicotine de-
22 pendent;

23 “(J) patterns of youth and young adult
24 electronic cigarette cessation behaviors, includ-
25 ing patterns in motivation to quit, quit at-

1 tempts, successful cessation, and associated fac-
2 tors; and

3 “(K) resources youth and young adults are
4 using to quit tobacco use.

5 “(2) Conducting research on—

6 “(A) the characteristics and nicotine deliv-
7 ery technology of electronic cigarettes and
8 emerging tobacco products;

9 “(B) biomarkers of exposure to electronic
10 cigarettes and emerging tobacco products and
11 resulting health impacts from such exposure;
12 and

13 “(C) the levels of nicotine in electronic
14 cigarettes and emerging tobacco products.

15 “(3) Developing, in collaboration with profes-
16 sional medical organizations, guidance for health
17 care providers, schools, and other entities, as appro-
18 priate, on intervening with, and treating, youth and
19 young adults who use electronic cigarettes and other
20 emerging tobacco products, and disseminating such
21 guidance.

22 “(4) Identifying promising strategies to—

23 “(A) prevent and reduce the use by youth
24 and young adults of electronic cigarettes and
25 emerging tobacco products;

1 “(B) identify existing, and develop new,
2 cessation strategies and quit support that are
3 appropriate for youth and young adults; and

4 “(C) improve access to, and the delivery of
5 tobacco cessation services for, youth and young
6 adults, including the use of technology-delivered
7 services.

8 “(5) Identifying effective messages and commu-
9 nication efforts that prevent initiation of tobacco
10 product use and reduce use, including the use of
11 electronic cigarettes and emerging tobacco products,
12 among youth and young adults.

13 “(6) Developing and implementing, in coordina-
14 tion with the Commissioner of Food and Drugs and
15 the Surgeon General of the Public Health Service, a
16 campaign to reduce tobacco initiation and use by
17 youth and young adults, and to educate the public
18 about—

19 “(A) the rapidly evolving tobacco product
20 landscape;

21 “(B) the harms associated with the use by
22 youth and young adults of electronic cigarettes
23 and other emerging tobacco products; and

24 “(C) culturally competent strategies for in-
25 tervening with youth and young adults who use

1 tobacco and providing or directing them to ap-
2 propriate cessation services.

3 “(7) Continuing to provide funding through the
4 Centers for Disease Control and Prevention’s Na-
5 tional Tobacco Control Program cooperative agree-
6 ment to State, local, territorial, and Freely Associ-
7 ated State health departments and Tribal organiza-
8 tions, as appropriate, for—

9 “(A) preventing and reducing the use by
10 youth and young adults of electronic cigarettes
11 and emerging tobacco products; and

12 “(B) improving access to and delivery of
13 cessation strategies that are appropriate for
14 services to youth and young adults addicted to
15 nicotine, including through quitlines and pro-
16 vider education on cessation services available
17 through the Medicaid program under title XIX
18 of the Social Security Act and the Children’s
19 Health Insurance Program under title XXI of
20 such Act.

21 “(8) Evaluating State, community, and school-
22 based strategies for—

23 “(A) preventing the initiation and use of
24 electronic cigarettes and emerging tobacco prod-
25 ucts among youth and young adults; and

1 “(B) intervening with youth and young
2 adults who use tobacco and providing or direct-
3 ing them to appropriate cessation services.

4 “(b) NO DUPLICATION.—The Secretary shall ensure
5 that activities under this section do not duplicate other
6 activities of the Department of Health and Human Serv-
7 ices.

8 “(c) STRATEGY.—Not later than 90 days after the
9 date of enactment of this section, the Secretary shall sub-
10 mit to the Committee on Health, Education, Labor, and
11 Pensions of the Senate and the Committee on Energy and
12 Commerce of the House of Representatives, and make
13 available to the public on the website of the Department
14 of Health and Human Services, a strategy for carrying
15 out the Reducing Youth Use of E-Cigarettes Initiative.

16 “(d) AUTHORIZATION OF APPROPRIATIONS.—To
17 carry out this section, there is authorized to be appro-
18 priated \$100,000,000 for each of fiscal years 2027
19 through 2031.”.

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