Calendar No. 139

108TH CONGRESS *1st Session*	SENATE	REPORT 108–70

AUTOMATIC DEFIBRILLATION IN ADAM'S MEMORY ACT

JUNE 13, 2003.—Ordered to be printed

Mr. GREGG, from the Committee on Health, Education, Labor, and Pensions, submitted the following

R E P O R T

[To accompany S. 231]

The Committee on Health, Education, Labor, and Pensions, to which was referred the bill (S. 231) to authorize the use of certain grant funds to establish an information clearinghouse that provides information to increase public access to defibrillation in schools, having considered the same, reports favorably thereon without amendment and recommends that the bill do pass.

CONTENTS

I. PURPOSE AND NEED FOR LEGISLATION

The purpose of the Automatic Defibrillation in Adam's Memory Act (ADAM Act) is to allow funds authorized under the Community AED Act (Community Access to Emergency Defibrillation Act) of 2002 to be used for the establishment of a national clearinghouse to provide information to increase public access to defibrillation in schools. The national clearinghouse will provide schools with the proper instruction and technical guidance to set up a public access defibrillation program. The ADAM Act would ensure that schools have access to the appropriate training and other logistics required for successful programs.

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Over 220,000 Americans die each year from cardiac arrest. Every 2 minutes, an individual goes into cardiac arrest in the United States. The chance of successfully returning to a normal heart rhythm diminishes by 10 percent each minute following sudden cardiac arrest. Eighty percent of cardiac arrests are caused by ventricular fibrillation, for which defibrillation is the only effective treatment. Sixty percent of all cardiac arrests occur outside the hospital. The average national survival rate for out-of-hospital cardiac arrest is only 5 percent.

Communities that have established and implemented public access defibrillation programs have achieved average survival rates for out-of-hospital cardiac arrest as high as 50 percent. In many communities, schools are a focal point for large activities and are located near the city center. Promoting early access to defibrillation in public venues will help improve cardiac arrest survival rates.

II. SUMMARY

The legislation amends Subsection (c) of section 312 of the Public Health Service Act (42 U.S.C. 244), as amended by Public Law 107–188 (Public Health Security and Bioterrorism Preparedness and Response Act of 2002). The bill expands the authorized uses of certain grant funds to include establishing a national information clearinghouse that provides information to increase public access to defibrillation in schools.

III. HISTORY OF LEGISLATION AND VOTES IN COMMITTEE

During the 107th Congress, the full Senate, with consent from the Committee on Health, Education, Labor, and Pensions, unanimously approved S. 1041, an earlier version of the ADAM Act, as both stand-alone legislation and as part of S. 1275, the Community AED Act. On February 6, 2002, the Senate unanimously passed S. 1275, which included S. 1041. However, an objection was raised and it was removed from the bill. On June 26, 2002, the Senate passed S. 1041 by unanimous consent.

During the 108th Congress, S. 231, the ADAM Act, was introduced in the Senate on January 29, 2003 and referred to the Committee on Health, Education, Labor, and Pensions. S. 231 passed by unanimous consent during the committee's executive session on April 12, 2003, with no amendments.

IV. EXPLANATION OF LEGISLATION AND COMMITTEE VIEWS

The Automatic Defibrillation in Adam's Memory Act (ADAM Act) allows funds authorized under the Community AED Act to be used in an effort to establish a national clearinghouse to provide information to increase public access to defibrillation in schools.

This act will assist schools in having access to the appropriate training and other logistics required for successful programs.

The committee expects the legislation will assist schools in having access to the appropriate training and other logistics required for successful programs. Promoting early access to defibrillation in public venues will help improve cardiac arrest survival rates.

V. Cost Estimate and Unfunded Mandate Statement

U.S. Congress,
Congressional Budget Office,
Washington, DC, April 11, 2003.

Hon. Judd Gregg,
Chairman, Committee on Health, Education, Labor, and Pensions,
U.S. Senate, Washington, DC.

Dear Mr. Chairman: The Congressional Budget Office has prepared the enclosed cost estimate for S. 231, the Automatic Defibrillation in Adam's Memory Act.

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Alexis Ahlstrom.

Sincerely,

Barry. B. Anderson
(For Douglas Holtz-Eakin, Director).

Enclosure.

S. 231—Automatic Defibrillation in Adam's Memory Act

S. 231 would amend the Public Health Service Act to allow funds appropriated under section 312 to be spent to establish an information clearinghouse to increase access to defibrillation in schools. Under current law, section 312 authorizes the appropriation of $25 million in 2003 and such sums as may be necessary from 2004 through 2006 for grants to states and tribal organizations to develop and implement public access defibrillation programs. S. 231 would create an additional use of the grant money authorized under section 312, but it would not increase the authorization level for grants under that section. Therefore, CBO estimates that the bill would not affect discretionary spending. Enacting S. 231 also would not affect direct spending or receipts.

This legislation contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act and would impose no costs on state, local, or tribal governments.

The CBO staff contact for this estimate is Alexis Ahlstrom. This estimate was approved by Peter H. Fontaine, Deputy Assistant Director for Budget Analysis.

VI. Regulatory Impact Statement

In accordance with paragraph 11(b) of rule XXVI of the Standing Rules of the Senate, the committee has determined that there will be minimal increases in the regulatory burden imposed by this bill.

VII. Application of Law to the Legislative Branch

The committee has determined that there is no legislative impact.

VIII. Section-by-Section Analysis

Section 1. Short title

"Automatic Defibrillation in Adam's Memory Act".

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Section 2. Amendments to Public Health Service Act

The legislation establishes an information clearinghouse that provides information to increase public access to defibrillation in schools.

IX. CHANGES IN EXISTING LAW

In compliance with rule XXVI paragraph 12 of the Standing Rules of the Senate, the following provides a print of the statute or the part or section thereof to be amended or replaced (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman):

PUBLIC HEALTH SERVICE ACT

*   *   *   *   *   *   *

AUTOMATIC DEFIBRILLATION IN ADAM'S MEMORY ACT

*   *   *   *   *   *   *

TITLE III—GENERAL POWERS AND DUTIES OF PUBLIC HEALTH SERVICE

PART A—RESEARCH AND INVESTIGATION

*   *   *   *   *   *   *

PART B—FEDERAL-STATE COOPERATION

IN GENERAL

SEC. 311. * * *

*   *   *   *   *   *   *

SEC. 312. [244] PUBLIC ACCESS DEFIBRILLATION PROGRAMS.
  (a) IN GENERAL.—* * *

*   *   *   *   *   *   *
  (c) * * *
    (1) * * *

*   *   *   *   *   *   *

    (5) produce materials to encourage private companies, including small businesses, to purchase automated external defibrillators; [and]
    (6) establish an information clearinghouse that provides information to increase public access to defibrillation in schools; and
    [(6)] *(7)* further develop strategies to improve access to automated external defibrillators in public places.

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