

107TH CONGRESS
1ST SESSION

H. R. 3153

To assist States in preparing for, and responding to, biological or chemical terrorist attacks.

IN THE HOUSE OF REPRESENTATIVES

OCTOBER 17, 2001

Mr. BLAGOJEVICH introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To assist States in preparing for, and responding to,
biological or chemical terrorist attacks.

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 “State Bioterrorism
5 Preparedness Act”.

6 **SEC. 2. FINDINGS.**

7 Congress makes the following findings:

8 (1) State governments are viewed as strong
9 partners in the United States’ national security ef-
10 forts, particularly as related to domestic terrorism.

1 (2) Information sharing is a critical part of ter-
2 rorism preparedness activities.

3 (3) Coordination efforts with public, private,
4 nonprofit, and for-profit hospitals and medical pro-
5 viders are essential to the success of preventing the
6 spread of a biological terrorist attack.

7 (4) The Centers for Disease Control and Pre-
8 vention have implemented a solid structure with
9 which to combat terrorism. However, additional re-
10 sources and direction are needed to expand upon the
11 program and accelerate its results.

12 (5) There are hundreds of infectious agents and
13 toxins, but only a small subgroup has the physical
14 and biological properties needed for a mass casualty
15 producing biological weapon.

16 (6) Most biological weapons programs con-
17 centrate on between 10 and 15 agents sharing the
18 common characteristics of ease of production, infec-
19 tivity or toxicity, stability during processing, storage
20 and in the environment, and the ability to effectively
21 cause illness or death to an exposed population with
22 anthrax and small pox common to most lists.

23 (7) A comprehensive strategy that involves pre-
24 venting an attack from occurring and preparing the
25 Federal, State, local and private sectors in case such

1 an attack were to occur is critical to reducing the in-
2 cidence of fatality if such an attack were to occur.

3 (8) The intelligence community must make far
4 greater use of the biomedical communities in and
5 out of government and the United States national
6 security community should include the medical, pub-
7 lic health and human service communities, which all
8 are critical to bioterrorism preparedness and re-
9 sponse.

10 (9) Enhancing domestic preparedness by devel-
11 oping a national bioterrorism surveillance and detec-
12 tion capacity, developing and distributing rapid and
13 more reliable diagnostic capabilities and systems, de-
14 veloping a comprehensive strategy for assuring surge
15 capacity for health care, streamlining national phar-
16 maceutical stockpiling efforts, and increasing re-
17 search and development for new pharmaceuticals,
18 vaccines and antidotes are essential endeavors.

19 (10) Developing a clear strategy for working
20 with the media to help manage public apprehension
21 and panic and to reexamine and modernize the legal
22 framework for epidemic control measures and civil
23 liberties, including working with States to achieve
24 greater harmony at the State and local level with
25 management of new threats must be done.

1 (11) The Administration of President Clinton
2 took the initiative to strengthen the public health in-
3 frastructure by creating a pharmaceutical stockpile
4 for civilian use, awarding contracts for new small
5 pox vaccine, researching the development of new and
6 improved diagnostics, drugs and vaccines, helping to
7 train first responders (police, fire fighters and public
8 health officials) and investing in new technologies to
9 help with detection of biological agents, but this ef-
10 fort must be dramatically accelerated and far more
11 money and energy is needed to address the today's
12 threats.

13 **SEC. 3. GRANTS TO IMPROVE STATE PREPAREDNESS.**

14 (a) IN GENERAL.—The Secretary of Health and
15 Human Services (referred to in this Act as the “Sec-
16 retary”), acting through the Director of the Centers for
17 Disease Control and Prevention, shall award grants to
18 States to enable such States to prepare for and respond
19 to bioterrorism. The grant program established under this
20 section shall be administered through the Bioterrorism
21 Preparedness and Response Initiative.

22 (b) ELIGIBILITY.—To be eligible to receive a grant
23 under subsection (a), a State shall prepare and submit to
24 the Secretary an application at such time, in such manner,
25 and containing such information as the Secretary may re-

1 quire, including a plan for preparing for and responding
2 to bioterrorism. Such plan shall include—

3 (1) a description of the process the State will
4 implement in order to detect and response to bioter-
5 rorism, including how the State will manage State
6 detection and response efforts and coordinate with
7 national efforts;

8 (2) an assurance that the State will coordinate
9 with all emergency responders, health care providers,
10 Federal, State and local governmental agencies, and
11 law enforcement personnel during all stages of the
12 State bioterrorism initiative;

13 (3) a description of the activities that the State
14 will conduct to build local infrastructures for the
15 prevention, detection, and response to biological or
16 chemical attacks;

17 (4) a description of State efforts to stockpile
18 medications, vaccines, antibiotics, and medical sup-
19 plies;

20 (5) an assessment of the threat of biological or
21 chemical attacks in the State;

22 (6) a media and communication plan relating to
23 the dissemination of information to the public to in-
24 form the public of any biological or chemical threat
25 without creating panic;

1 (7) a description of the training initiatives that
2 the State will carry out with respect to local emer-
3 gency personnel, law enforcement officials, and
4 health care providers relating to the detection of and
5 response to a biological or chemical attack;

6 (8) a description of the cleanup and contamina-
7 tion prevention efforts to be implemented in the
8 event of a biological or chemical attack;

9 (9) an assurance that the State will coordinate
10 its bioterrorism efforts with public, private, and
11 faith-based organizations that are able to provide
12 necessary supplies and equipment, such as medical
13 products and personnel;

14 (10) a description of the State mechanisms in
15 place for improving the health care infrastructure in
16 the State through the building of workforce capacity
17 and competency, information and data systems, and
18 up to date health departments and local laboratories;

19 (11) a description of the State procedures for
20 holding practice biological or chemical attack drills
21 and simulations;

22 (12) an assessment of State and local public
23 health laws relating to bioterrorism, and the inter-
24 action of such laws with similar Federal laws;

1 (13) the designation of a State official to serve
2 as a liaison to the Office of Homeland Security; and

3 (14) the general goals and needs of the State
4 relating to bioterrorism.

5 (c) ANNUAL SUBMISSIONS.—A State that receives a
6 grant under this section shall annually submit to the Sec-
7 retary an updated State plan that contains the informa-
8 tion described in paragraphs (1) through (13) of sub-
9 section (b).

10 (d) USE OF FUNDS.—A State shall use amounts re-
11 ceived under a grant under this section to carry out the
12 State plan under subsection (b). Additionally, a State may
13 use such funds to—

14 (1) prepare for and prevent a biological or
15 chemical attack;

16 (2) carry out surveillance and detection activi-
17 ties relating to biological or chemical attacks;

18 (3) carry out activities to improve communica-
19 tions and coordination efforts within the State and
20 between the State and the Federal Government;

21 (4) carry out activities to improve emergency
22 response capabilities in the State; and

23 (5) make public health infrastructure improve-
24 ments, including—

1 (A) carrying out activities relating to rapid
2 disease detection and investigation;

3 (B) carrying out activities to improve State
4 and local laboratories, including improving bio-
5 logical and chemical agent identification, classi-
6 fication, and characterization (bacteria, viruses,
7 and toxins);

8 (C) carrying out coordinated public health
9 response activities;

10 (D) carrying out activities to improve pub-
11 lic health information technology;

12 (E) providing training for health care
13 workers and otherwise addressing staffing
14 needs;

15 (F) the development of comprehensive
16 statewide electronic public health reporting sys-
17 tems; and

18 (G) carrying out cooperative efforts with
19 State and local public and private hospitals;

20 (e) AMOUNT.—

21 (1) IN GENERAL.—Except as provided in para-
22 graph (2), the amount of a grant to a State under
23 this section for a fiscal year shall be an amount
24 equal to the sum of—

25 (A) \$5,000,000; and

1 (B) an amount that bears the same ratio
2 to the amount appropriated under subsection
3 (g) for such fiscal year as the total population
4 of the State bears to the total population of all
5 States.

6 (2) SMALL STATE MINIMUM.—Subject to the
7 extent of amounts made available under subsection
8 (g), the amount determined under paragraph (1)(B)
9 with respect to a State shall not be less than an
10 amount equal to 1 percent of the amount appro-
11 priated for the fiscal year involved.

12 (3) INDIAN TRIBES.—The Secretary shall re-
13 serve 1 percent of the amount appropriated for each
14 fiscal year under subsection (g) to award grants
15 under this section to Indian tribes and tribal organi-
16 zations. The Secretary shall develop guidelines to de-
17 termine the eligibility of such tribes or tribal organi-
18 zations for a grant under this section.

19 (f) ANNUAL REPORTS.—Not later than January 1,
20 2003, and annually thereafter, the General Accounting Of-
21 fice shall prepare and submit to the appropriate commit-
22 tees of Congress, a report concerning the implementation
23 of this section. Such report shall include—

1 (1) an assessment of the progress made by
2 States in preparing for and being able to respond to
3 a biological or chemical attack; and

4 (2) recommendations for areas in which the
5 States can improve their preparation for, or ability
6 to respond to, a biological or chemical attack.

7 (g) AUTHORIZATION OF APPROPRIATIONS.—There is
8 authorized to be appropriated to carry out this section—

9 (1) \$250,000,000 for each of fiscal years 2002
10 through 2006, for base allocations under subsection
11 (e)(1)(A); and

12 (2) \$200,000,000 for each of fiscal years 2002
13 through 2006, for allocations based on State popu-
14 lation under subsection (e)(1)(B).

15 (h) DEFINITION.—In this section, the term “State”
16 means each of the several States, the District of Columbia,
17 and any commonwealth, territory, or possession of the
18 United States.

19 **SEC. 4. PROVISION OF INFORMATION BY THE FEDERAL**
20 **GOVERNMENT.**

21 (a) IN GENERAL.—Each agency of the Federal Gov-
22 ernment that collects or prepares information of the type
23 described in this subsection shall provide to each State the
24 following—

1 (1) a description of the probable agents that
2 may be utilized in a biological or chemical attack,
3 the characteristics of such agents, their impact on
4 people, and appropriate risk assessments;

5 (2) model or proposed bioterrorism plans, based
6 on Federal standards and guidelines, for the surveil-
7 lance, detection, response to, and management of a
8 biological or chemical attack;

9 (3) information relating to biological or chem-
10 ical attacks that is based on best practices;

11 (4) emergency health information;

12 (5) bioterrorism preparation and response
13 training information;

14 (6) bioterrorism-related emergency information;

15 (7) a list of available resources maintained by
16 public, private, nonprofit, and for-profit entities that
17 have compiled bioterrorism training data and other
18 related information; and

19 (8) in times of war, heightened threat, or risk
20 of war, critical information relating to the health
21 and safety of the State's residents.

22 (b) COORDINATION.—The Secretary shall coordinate
23 the provision of information under subsection (a) to avoid
24 duplication of efforts.

1 (c) BEST PRACTICES.—There is authorized to be ap-
2 propriated, \$50,000,000 in each fiscal year to enable the
3 Director of the Centers for Disease Control and Preven-
4 tion to continue and enhance the efforts of the Centers
5 in developing best practices relating to biological or chem-
6 ical attacks.

7 (d) STATE SECURITY COORDINATOR.—There shall be
8 established within the Office of Homeland Security, a posi-
9 tion to be known as the “Assistant Director for State Co-
10 ordination”. The Director of the Office of Homeland Secu-
11 rity shall appoint an individual to serve as the Assistant
12 Director and act as a liaison between the Office and the
13 States.

14 **SEC. 5. DEVELOPMENT OF COMMUNICATIONS SYSTEMS.**

15 (a) IN GENERAL.—The Secretary, acting through the
16 Director of the Centers for Disease Control and Preven-
17 tion and in consultation with the heads of other Federal
18 departments and agencies, shall—

19 (1) carry out activities to implement a national
20 communications system, including the establishment
21 of a national electronic infrastructure, to improve
22 the exchange of emergency health information
23 among Federal, State, and local health agencies;

24 (2) develop a national emergency communica-
25 tion plan that ensures the rapid dissemination of

1 health information to the public during actual,
2 threatened, or suspected acts of biological or chem-
3 ical terrorism; and

4 (3) establish an Internet web-site that contains
5 training information and bioterrorism-related emer-
6 gency information for use by States.

7 (b) COMPLETION.—Not later than December 31,
8 2002, the Director of the Centers for Disease Control and
9 Prevention shall complete the system, plan, and web-site
10 described in subsection (a).

11 (c) AUTHORIZATION OF APPROPRIATIONS.—There is
12 authorized to be appropriated such sums as may be nec-
13 essary to carry out this section.

14 **SEC. 6. SIMULATIONS.**

15 (a) GRANTS.—The Secretary shall award a grant to
16 each State to enable the State to carry out table-top and
17 computer-based biological or chemical attack simulations.

18 (b) EXERCISES.—Not later than 6 months after the
19 date of enactment of this Act, the Director of the Centers
20 for Disease Control and Prevention shall provide each
21 State with a set of exercises for the simulations to be con-
22 ducted under subsection (a).

23 (c) COMPLETION.—Not later than December 31,
24 2002, a State that receives a grant under this section shall

1 complete at least one of the simulations required under
2 subsection (a).

3 (d) NOTICE SIMULATIONS.—The Secretary shall pro-
4 vide for the conduct, in three geographically diverse States
5 that receive a grant under subsection (a), of a biological
6 or chemical attack simulation. Such simulations shall be
7 conducted after notice is provided to the States involved
8 by the Secretary.

9 (e) AUTHORIZATION OF APPROPRIATIONS.—There is
10 authorized to be appropriated such sums as may be nec-
11 essary to carry out this section.

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