

109TH CONGRESS
1ST SESSION

S. 950

To provide assistance to combat tuberculosis, malaria, and other infectious diseases, and for other purposes.

IN THE SENATE OF THE UNITED STATES

APRIL 28, 2005

Mr. BROWNBACK (for himself, Ms. LANDRIEU, and Mr. INHOFE) introduced the following bill; which was read twice and referred to the Committee on Foreign Relations

A BILL

To provide assistance to combat tuberculosis, malaria, and other infectious diseases, 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 “Elimination of Ne-
5 glected Diseases Act of 2005” or as the “END Act of
6 2005”.

1 **SEC. 2. ENHANCED COORDINATION AND STRATEGIC PLAN-**
 2 **NING.**

3 (a) **MALARIA AND TB RESPONSE COORDINATORS.**—
 4 Section 1 of the State Department Basic Authorities Act
 5 of 1956 (22 U.S.C. 2651a) is amended—

6 (1) by redesignating subsection (g) as sub-
 7 section (i); and

8 (2) by inserting after subsection (f) the fol-
 9 lowing new subsections:

10 “(g) **MALARIA RESPONSE COORDINATOR.**—

11 “(1) **IN GENERAL.**—There shall be established
 12 within the Department of State a Coordinator of
 13 United States Government Activities to Combat Ma-
 14 laria Globally, who shall be appointed by the Presi-
 15 dent (in this subsection referred to as the ‘Coordi-
 16 nator’).

17 “(2) **AUTHORITIES AND DUTIES; DEFINITION.**—

18 “(A) **AUTHORITIES.**—The Coordinator,
 19 acting through such nongovernmental organiza-
 20 tions (including faith-based and community-
 21 based organizations) and relevant executive
 22 branch agencies as may be necessary and ap-
 23 propriate to effect the purposes of this section,
 24 is authorized—

25 “(i) to operate internationally to carry
 26 out prevention, care, treatment, support,

1 capacity development, and other activities
2 for combatting malaria;

3 “(ii) to transfer and allocate funds for
4 combatting malaria to relevant executive
5 branch agencies in accordance with the
6 strategy developed under section 2(b) of
7 the END Act of 2005; and

8 “(iii) to provide grants to, and enter
9 into contracts with, nongovernmental orga-
10 nizations (including faith-based and com-
11 munity-based organizations) for activities
12 to combat malaria.

13 “(B) DUTIES.—

14 “(i) IN GENERAL.—The Coordinator
15 shall have primary responsibility for the
16 oversight and coordination of all resources
17 and international activities of the United
18 States Government to combat malaria, in-
19 cluding all programs, projects, and activi-
20 ties of the United States Government re-
21 lated to malaria under the United States
22 Leadership Against HIV/AIDS, Tuber-
23 culosis, and Malaria Act of 2003 (22
24 U.S.C. 7601 et seq.) or any amendment
25 made by that Act.

1 “(ii) SPECIFIC DUTIES.—The duties
2 of the Coordinator shall specifically include
3 the following:

4 “(I) Ensuring program and pol-
5 icy coordination related to malaria
6 among the relevant executive branch
7 agencies and nongovernmental organi-
8 zations, including auditing, moni-
9 toring, and evaluation of all such pro-
10 grams.

11 “(II) Ensuring that each relevant
12 executive branch agency undertakes
13 programs primarily in those areas
14 where the agency has the greatest ex-
15 pertise, technical capabilities, and po-
16 tential for success in combatting ma-
17 laria.

18 “(III) Avoiding duplication of ef-
19 forts to combat malaria.

20 “(IV) Ensuring coordination of
21 relevant executive branch agency ac-
22 tivities in the field to combat malaria.

23 “(V) Pursuing coordination with
24 other countries and international or-
25 ganizations to combat malaria.

1 “(VI) Resolving policy, program,
2 and funding disputes among the rel-
3 evant executive branch agencies re-
4 lated to activities to combat malaria.

5 “(VII) Directly approving all ac-
6 tivities of the United States, including
7 the provision of funding, related to
8 combatting malaria.

9 “(VIII) Administering the Ma-
10 laria Scientific Review Board estab-
11 lished in subsection (g) of section
12 104C of the Foreign Assistance Act of
13 1961 (22 U.S.C. 2151b–4).

14 “(IX) Establishing due diligence
15 criteria for all recipients of funds for
16 malaria activities subject to the co-
17 ordination and appropriate moni-
18 toring, evaluation, and audits carried
19 out by the Coordinator necessary to
20 assess the measurable outcomes of
21 such activities.

22 “(X) Coordinating with the
23 World Health Organization, the Glob-
24 al Fund to Fight AIDS, Tuberculosis
25 and Malaria, the Department of

1 Health and Human Services (the Cen-
 2 ters for Disease Control and Preven-
 3 tion and the National Institutes of
 4 Health), and other organizations with
 5 respect to the development and imple-
 6 mentation of a comprehensive malaria
 7 control program.

8 “(C) RELEVANT EXECUTIVE BRANCH
 9 AGENCIES DEFINED.—In this paragraph, the
 10 term ‘relevant executive branch agencies’ means
 11 the Department of State, the United States
 12 Agency for International Development, the De-
 13 partment of Health and Human Services (in-
 14 cluding the Public Health Service), and any
 15 other department or agency of the United
 16 States that participates in international malaria
 17 activities pursuant to the authorities of such de-
 18 partment or agency or this Act.

19 “(h) TB RESPONSE COORDINATOR.—

20 “(1) IN GENERAL.—There shall be established
 21 within the Department of State a Coordinator of
 22 United States Government Activities to Combat Tu-
 23 berculosis Globally, who shall be appointed by the
 24 President (in this subsection referred to as the ‘Co-
 25 ordinator’).

1 “(2) AUTHORITIES AND DUTIES; DEFINITION.—

2 “(A) AUTHORITIES.—The Coordinator,
3 acting through such nongovernmental organiza-
4 tions (including faith-based and community-
5 based organizations) and relevant executive
6 branch agencies as may be necessary and ap-
7 propriate to effect the purposes of this section,
8 is authorized—

9 “(i) to operate internationally to carry
10 out prevention, care, treatment, support,
11 capacity development, and other activities
12 for combatting tuberculosis;

13 “(ii) to transfer and allocate funds for
14 combatting tuberculosis to relevant execu-
15 tive branch agencies in accordance with the
16 strategy developed under section 2(c) of
17 the END Act of 2005; and

18 “(iii) to provide grants to, and enter
19 into contracts with, nongovernmental orga-
20 nizations (including faith-based and com-
21 munity-based organizations) to carry out
22 activities to combat tuberculosis.

23 “(B) DUTIES.—

24 “(i) IN GENERAL.—The Coordinator
25 shall have primary responsibility for the

oversight and coordination of all resources and international activities of the United States Government to combat tuberculosis, including all programs, projects, and activities of the United States Government related to tuberculosis under the United States Leadership Against HIV/AIDS, Tuberculosis, and Malaria Act of 2003 (22 U.S.C. 7601 et seq.) or any amendment made by that Act.

“(ii) SPECIFIC DUTIES.—The duties of the Coordinator shall specifically include the following:

“(I) Ensuring program and policy coordination related to tuberculosis among the relevant executive branch agencies and nongovernmental organizations, including auditing, monitoring, and evaluation of all such programs.

“(II) Ensuring that each relevant executive branch agency undertakes programs primarily in those areas where the agency has the greatest expertise, technical capabilities, and po-

1 tential for success in combatting tu-
2 berculosis.

3 “(III) Avoiding duplication of ef-
4 forts to combat tuberculosis.

5 “(IV) Ensuring coordination of
6 relevant executive branch agency ac-
7 tivities in the field to combat tuber-
8 culosis.

9 “(V) Pursuing coordination with
10 other countries and international or-
11 ganizations to combat tuberculosis.

12 “(VI) Resolving policy, program,
13 and funding disputes among the rel-
14 evant executive branch agencies re-
15 lated to activities to combat tuber-
16 culosis.

17 “(VII) Directly approving all ac-
18 tivities of the United States, including
19 the provision of funding, related to
20 combatting tuberculosis.

21 “(VIII) Establishing due dili-
22 gence criteria for all recipients of
23 funds for tuberculosis activities sub-
24 ject to the coordination and appro-
25 priate monitoring, evaluation, and au-

1 dits carried out by the Coordinator
 2 necessary to assess the measurable
 3 outcomes of such activities.

4 “(C) RELEVANT EXECUTIVE BRANCH
 5 AGENCIES DEFINED.—In this paragraph, the
 6 term ‘relevant executive branch agencies’ means
 7 the Department of State, the United States
 8 Agency for International Development, the De-
 9 partment of Health and Human Services (in-
 10 cluding the Public Health Service), and any
 11 other department or agency of the United
 12 States that participates in international tuber-
 13 culosis activities pursuant to the authorities of
 14 such department or agency or this Act.

15 “(3) AUTHORITY TO SERVE IN MULTIPLE CA-
 16 PACITIES.—An individual may serve as the Coordi-
 17 nator of United States Government Activities to
 18 Combat HIV/AIDS Globally, the Coordinator of
 19 United States Government Activities to Combat Ma-
 20 laria Globally, and the Coordinator of United States
 21 Government Activities to Combat Tuberculosis Glob-
 22 ally.”.

23 (b) STRATEGY FOR MALARIA.—

24 (1) REQUIREMENT.—Not later than 6 months
 25 after the date of enactment of this Act, the Sec-

1 retary of State and the Secretary of Health and
2 Human Services shall develop a comprehensive, inte-
3 grated, five-year strategy to set priorities for the use
4 of United States assistance for programs to combat
5 malaria in foreign countries. If elements are in-
6 cluded in or excluded from the strategy that conflict
7 with recommendations of the Malaria Scientific Re-
8 view Board, the Secretary of State and the Sec-
9 retary of Health and Human Services shall provide
10 a justification to Congress for such inclusion or ex-
11 clusion.

12 (2) OBJECTIVE.—The objective of the strategy
13 required by paragraph (1) shall be to reduce the rate
14 of infection of malaria in each community in a for-
15 eign country where the United States provides as-
16 sistance to combat malaria.

17 (3) ELEMENTS.—The strategy required by
18 paragraph (1) shall—

19 (A) assign priorities for the provision of
20 assistance to combat malaria for each agency or
21 department of the United States that provides
22 such assistance that are consistent with the
23 mission and expertise of such agency or depart-
24 ment;

1 (B) evaluate each program to combat ma-
2 laria that receives assistance from the United
3 States to determine if such program is con-
4 sistent with such priorities and to modify or
5 terminate any inconsistent program;

6 (C) identify priority regions and countries
7 where bilateral efforts will have the greatest im-
8 pact and best complement multilateral efforts
9 and bilateral programs of other donors;

10 (D) describe procedures to employ measur-
11 able outcome indicators to assess the effective-
12 ness of a program to combat malaria that re-
13 ceives assistance from the United States, in-
14 cluding a program that is intended to build ca-
15 pacity or provide technical assistance;

16 (E) propose methods to eliminate duplica-
17 tion of effort of programs to combat malaria
18 that receives assistance from the United States;

19 (F) propose activities to combat malaria to
20 be assigned to each such agency or department
21 of the United States based on the clinical and
22 scientific expertise and technical capability of
23 such agency or department to carry out such
24 activities;

1 (G) estimate the resources required by
2 each such agency or department to carry out
3 the strategy required by paragraph (1), includ-
4 ing requests for funding to be made for these
5 purposes by the President to Congress; and

6 (H) ensure that each such program is co-
7 ordinated and consistent with the activities of
8 other donors to combat malaria, including such
9 activities of the Global Fund to Fight AIDS,
10 Tuberculosis and Malaria established pursuant
11 to Article 80 of the Swiss Civil Code.

12 (4) CONSULTATION.—The Coordinator of
13 United States Government Activities to Combat Ma-
14 laria Globally shall consult with the Malaria Sci-
15 entific Review Board established in subsection (g) of
16 section 104C of the Foreign Assistance Act of 1961
17 (22 U.S.C. 2151b–4), as added by section 3(b), in
18 developing the elements for the strategy related to
19 combatting malaria.

20 (5) REPORT.—Not later than 180 days after
21 the date of the enactment of this Act, the Coordi-
22 nator of United States Government Activities to
23 Combat Malaria Globally shall submit to Congress a
24 report setting forth the strategy required by para-
25 graph (1).

1 (c) STRATEGY FOR TUBERCULOSIS.—

2 (1) REQUIREMENT.—The Coordinator of
3 United States Government Activities to Combat Tu-
4 berculosis Globally shall develop a comprehensive, in-
5 tegrated, five-year strategy to set priorities for the
6 use of United States assistance for programs to
7 combat tuberculosis in foreign countries.

8 (2) OBJECTIVE.—The objective of the strategy
9 required by paragraph (1) shall be to reduce the rate
10 of infection of tuberculosis in each community in a
11 foreign country where the United States provides as-
12 sistance to combat tuberculosis.

13 (3) ELEMENTS.—The strategy required by
14 paragraph (1) shall—

15 (A) assign priorities for the provision of
16 assistance to combat tuberculosis for each agen-
17 cy or department of the United States that pro-
18 vides such assistance that are consistent with
19 the mission and expertise of such agency or de-
20 partment;

21 (B) evaluate each program to combat tu-
22 berculosis that receives assistance from the
23 United States to determine if such program is
24 consistent with such priorities and to modify or
25 terminate any inconsistent program;

1 (C) identify priority regions and countries
2 where bilateral efforts will have the greatest im-
3 pact and best complement multilateral efforts
4 and bilateral programs of other donors;

5 (D) describe procedures to employ measur-
6 able outcome indicators to assess the effective-
7 ness of a program to combat tuberculosis that
8 receives assistance from the United States, in-
9 cluding a program that is intended to build ca-
10 pacity or provide technical assistance;

11 (E) propose methods to eliminate duplica-
12 tion of effort of programs to combat tuber-
13 culosis that receives assistance from the United
14 States;

15 (F) propose activities to combat tuber-
16 culosis to be assigned to each such agency or
17 department of the United States based on the
18 clinical and scientific expertise and technical ca-
19 pability of such agency or department to carry
20 out such activities;

21 (G) estimate the resources required by
22 each such agency or department to carry out
23 the strategy required by paragraph (1), includ-
24 ing requests for funding to be made for these
25 purposes by the President to Congress; and

1 (H) ensure that each such program is co-
 2 ordinated and consistent with the activities of
 3 other donors to combat tuberculosis, including
 4 such activities of the Global Fund to Fight
 5 AIDS, Tuberculosis and Malaria established
 6 pursuant to Article 80 of the Swiss Civil Code.

7 (4) REPORT.—Not later than 180 days after
 8 the date of the enactment of this Act, the Coordi-
 9 nator of United States Government Activities to
 10 Combat Tuberculosis Globally shall submit to Con-
 11 gress a report setting forth the strategy required by
 12 paragraph (1).

13 **SEC. 3. ASSISTANCE TO COMBAT MALARIA.**

14 (a) AWARD OF ASSISTANCE.—Section 104C of the
 15 Foreign Assistance Act of 1961 (22 U.S.C. 2151b–4) is
 16 amended by adding at the end the following new sub-
 17 sections:

18 “(e) AWARD OF ASSISTANCE.—

19 “(1) IN GENERAL.—The President may not
 20 enter into any agreement with a person to procure
 21 assistance to combat malaria except as provided in
 22 this subsection, or as described in the strategy devel-
 23 oped under section 2(b) of the END Act of 2005.

24 “(2) DEFINITIONS.—In this subsection:

1 “(A) AGREEMENT.—The term ‘agreement’
2 means an agreement to procure assistance to
3 combat malaria.

4 “(B) ASSISTANCE TO COMBAT MALARIA.—
5 The term ‘assistance to combat malaria’ means
6 any goods or services related to the treatment
7 or prevention of malaria authorized to be pro-
8 vided under subsection (c).

9 “(C) ELIGIBLE ENTITY.—The term ‘eligi-
10 ble entity’ means any person that the President
11 determines is eligible to enter into an agree-
12 ment under this section.

13 “(D) MALARIA SCIENTIFIC REVIEW
14 BOARD.—The term ‘Malaria Scientific Review
15 Board’ means the Malaria Scientific Review
16 Board established under subsection (g).

17 “(3) APPLICATION.—An eligible entity seeking
18 to enter into an agreement shall submit an applica-
19 tion to the President at such time and in such man-
20 ner as the President may require.

21 “(4) TERM OF AGREEMENT.—The term of an
22 agreement may not exceed 3 years and each agree-
23 ment shall provide for the annual evaluation de-
24 scribed in paragraph (8).

25 “(5) REVIEW PANELS.—

1 “(A) AUTHORITY.—The Administrator of
2 the United States Agency for International De-
3 velopment is authorized to establish review pan-
4 els as described in this subparagraph to review
5 applications for assistance under this section.

6 “(B) MEMBERSHIP.—A review panel shall
7 be composed of individuals selected by the
8 President after consideration of individuals rec-
9 ommended by the Malaria Scientific Review
10 Board.

11 “(C) TERM OF SERVICE.—The term of
12 service for a member of a review panel may not
13 exceed 1 year. An individual may serve for more
14 than 1 term but such terms may not occur dur-
15 ing consecutive years.

16 “(D) AVAILABILITY OF INFORMATION.—A
17 review panel shall make available—

18 “(i) to Congress, the transcript of any
19 meeting of the review panel upon request;
20 and

21 “(ii) to the public, a summary of the
22 review and scores awarded by the review
23 panel to each eligible entity who submitted
24 an application under paragraph (3) upon
25 request.

1 “(6) SELECTION CRITERIA.—

2 “(A) HISTORY AND EXPERIENCE.—During
3 a fiscal year prior to 2009, the history and ex-
4 perience of an eligible entity in receiving funds
5 from the United States Agency for Inter-
6 national Development and carrying out pro-
7 grams with such funds may not be considered
8 in awarding assistance under this section.

9 “(B) AVAILABILITY OF INFORMATION.—
10 An eligible entity may not be awarded assist-
11 ance under this section unless such entity
12 agrees to make available to the President for
13 publication in the Federal Register and on the
14 Internet the information that the President de-
15 termines is appropriate.

16 “(7) ALLOCATION OF FUNDS.—The President
17 shall award agreements for a fiscal year in a manner
18 so that amounts made available to the President for
19 such agreements are allocated as follows:

20 “(A) Fifty percent of such amounts shall
21 be used to provide commodities used to combat
22 malaria, including pharmaceuticals, diagnostic
23 equipment, and pesticides and pesticide applica-
24 tion equipment for use with indoor residual
25 spraying, of which—

1 “(i) 55 percent shall be used to pro-
2 vide commodities associated with indoor re-
3 sidual spraying; and

4 “(ii) not less than 10 percent shall be
5 used to provide pharmaceuticals.

6 “(B) Not more than 10 percent may be
7 used to carry out technical assistance activities.

8 “(C) Not more than 5 percent may be used
9 by the United States for administration, travel,
10 or other indirect or overhead costs.

11 “(D) Not more than 5 percent may be
12 used to carry out research, including basic re-
13 search or operational research or vaccine and
14 therapeutic research and development.

15 “(E) The remaining amounts should be
16 used to—

17 “(i) support distribution of commod-
18 ities purchased under subparagraph (A);

19 “(ii) support the commodity distribu-
20 tion efforts of the Global Fund to Fight
21 HIV/AIDS, Tuberculosis and Malaria;

22 “(iii) provide rapid response to ma-
23 laria epidemics that multilateral efforts
24 may not be able to mobilize to address
25 quickly; or

1 “(iv) carry out other activities with
2 measurable impact on morbidity and mor-
3 tality from malaria.

4 “(8) EVALUATION.—

5 “(A) INDICATORS.—At the end of each 1-
6 year period during which an agreement is in ef-
7 fect, the President shall determine whether the
8 assistance to combat malaria provided pursuant
9 to the agreement has produced a significant de-
10 crease in the following indicators:

11 “(i) The rate of morbidity from ma-
12 laria in each health district where such as-
13 sistance is provided.

14 “(ii) The rate of mortality from ma-
15 laria in each health district where such as-
16 sistance is provided.

17 “(B) CONDUCT OF EVALUATION.—An eval-
18 uation of the assistance to combat malaria
19 under an agreement required by subparagraph
20 (A) may be conducted by the eligible entity pro-
21 viding such assistance or by another person, as
22 determined by the President.

23 “(C) HEALTH DISTRICT DEFINED.—In
24 this paragraph, the term ‘health district’ means
25 the jurisdiction which a program to combat ma-

1 malaria is operated, as designed by the host gov-
2 ernment.

3 “(9) CONTINUATION.—The President may con-
4 tinue an agreement for an additional 1-year period
5 if the assistance to combat malaria provided under
6 the agreement has produced a significant decrease in
7 the indicators described in clauses (i) and (ii) of
8 paragraph (8)(A).

9 “(10) REVISION.—

10 “(A) IN GENERAL.—If an agreement is not
11 continued under paragraph (9), the President
12 may negotiate to revise the agreement so that
13 the assistance to combat malaria provided
14 under the modified agreement is likely to result
15 in a significant decrease in the indicators de-
16 scribed in clauses (i) and (ii) of paragraph
17 (8)(A).

18 “(B) REPORT TO CONGRESS.—If the
19 President approves a revision of an agreement
20 that at least 75 percent of the members of the
21 Malaria Scientific Review Board have voted to
22 recommend not to approve, the President shall
23 submit to Congress a justification for such ap-
24 proval.

25 “(11) TERMINATION.—

1 “(A) IN GENERAL.—The President shall
2 terminate an agreement if such agreement—

3 “(i) is not continued under paragraph
4 (9) or revised under paragraph (10); or

5 “(ii) has been revised under para-
6 graph (10) for 2 consecutive 1-year periods
7 and is not continued under paragraph (9)
8 at the end of the subsequent 1-year period.

9 “(B) REPORT TO CONGRESS.—If the
10 President fails to terminate an agreement that
11 at least 75 percent of the members of the Ma-
12 laria Scientific Review Board have voted to rec-
13 ommend to terminate, the President shall sub-
14 mit to Congress a justification for such failure.

15 “(12) INELIGIBILITY.—

16 “(A) IN GENERAL.—An eligible entity who
17 entered into an agreement that is terminated
18 under paragraph (11), and any subsidiary of
19 such entity, may not submit an application for
20 assistance under this section during the 18-
21 month period beginning on the date such agree-
22 ment is terminated.

23 “(B) RENEWED ELIGIBILITY.—At the end
24 of a 3-year period described in subparagraph
25 (A), such entity may submit an application for

1 eligibility to the President that includes a de-
2 scription of actions carried out by such entity
3 to address the reasons that the agreement de-
4 scribed in subparagraph (A) was terminated.

5 “(f) OTHER LIMITATIONS ON ASSISTANCE.—

6 “(1) ASSISTANCE FOR MOSQUITO NETS.—

7 “(A) IN GENERAL.—The President may
8 not provide direct or indirect assistance under
9 this section for a project to provide mosquito
10 nets unless such project will provide mosquito
11 nets that are treated with a long-lasting insecti-
12 cide.

13 “(B) EVALUATIONS.—An eligible entity
14 awarded assistance under this section to provide
15 mosquito nets may not receive such assistance
16 for a period of more than 24 months unless at
17 the end of such period, such entity dem-
18 onstrates that—

19 “(i) not less than 60 percent of the
20 children under the age of 5 and of women
21 who are pregnant in each location where
22 such entity is providing the mosquito nets
23 are using such nets; or

1 “(ii) not less than 80 percent of
2 households in each such location are using
3 such nets.

4 “(2) ASSISTANCE FOR PHARMACEUTICALS.—

5 The President may not provide assistance under this
6 section for a project to provide a pharmaceutical
7 that contains chloroquine or sulfadoxine
8 pyrimethamine to combat malaria in a country if—

9 “(A) resistance rates to chloroquine or
10 sulfadoxine pyrimethamine, as appropriate, in
11 such country exceed 15 percent; or

12 “(B) no data are available for such coun-
13 try regarding the resistance rates to chloroquine
14 or sulfadoxine pyrimethamine, as appropriate.

15 “(3) CLINICAL AND EPIDEMIOLOGICAL ACTIVI-
16 TIES.—

17 “(A) IN GENERAL.—Notwithstanding any
18 other provision of law, the President shall en-
19 sure that the Secretary of Health and Human
20 Services, acting through the Director of the
21 Centers for Disease Control and Prevention, ad-
22 ministers any assistance provided under this
23 section for—

24 “(i) clinical or epidemiological activi-
25 ties to combat malaria; and

1 “(ii) technical assistance, or other in-
 2 direct support with respect to epidemiolog-
 3 ical surveillance, diagnosis, treatment, or
 4 management of malaria.

5 “(B) APPLICATION AND EVALUATION.—An
 6 eligible entity who receives assistance described
 7 in subparagraph (A) shall apply for such funds
 8 as described in subsection (e) and activities car-
 9 ried out with such assistance shall be evaluated
 10 as described in paragraph (8) of such sub-
 11 section.

12 (b) MALARIA SCIENTIFIC REVIEW BOARD.—Section
 13 104C of the Foreign Assistance Act of 1961 (22 U.S.C.
 14 2151b–4), as amended by subsection (a), is further
 15 amended by adding at the end the following new sub-
 16 section:

17 “(g) MALARIA SCIENTIFIC REVIEW BOARD.—

18 “(1) ESTABLISHMENT.—There is established
 19 the Malaria Scientific Review Board (in this sub-
 20 section referred to as the ‘Board’). The Board shall
 21 be administered by the Coordinator of United States
 22 Government Activities to Combat Malaria Globally
 23 established under section 1(g) of the State Depart-
 24 ment Basic Authorities Act of 1956.

1 “(2) MEMBERSHIP.—The Board shall be com-
2 posed of not less than 12 members as follows:

3 “(A) The Director of the National Insti-
4 tutes of Health of the Department of Health
5 and Human Services or the designee of such
6 Director.

7 “(B) The Secretary of Defense or the des-
8 ignee of such Secretary.

9 “(C) The Director of the Centers for Dis-
10 ease Control and Prevention of the Department
11 of Health and Human Services or the designee
12 of such Director.

13 “(D) The Director of the Office of Global
14 Health Affairs of the Department of Health
15 and Human Services or the designee of such
16 Director.

17 “(E) The Coordinator of United States
18 Government Activities to Combat HIV/AIDS
19 Globally appointed under section 1(f) of the
20 State Department Basic Authorities Act of
21 1956 (22 U.S.C. 2651a(f)) or the designee of
22 such Coordinator.

23 “(F) The Administrator of the United
24 States Agency for International Development,
25 or the designee of such Administrator.

1 “(G) Not less than 6 individuals selected
2 by the Coordinator of the United States Gov-
3 ernment Archives to Combat HIV/AIDS Glob-
4 ally who are not employees of the United
5 States, including experts from countries with
6 high rates of malaria prevalence.

7 “(3) QUALIFICATIONS.—A member of the
8 Board other than a member described in paragraph
9 (2)(D), shall have a doctoral degree in an appro-
10 priate field of medicine or biomedical science.

11 “(4) CHAIR.—The Chair of the Board shall ro-
12 tate on an annual basis among the Board members
13 referred to in subparagraphs (A), (B), and (C) of
14 paragraph (2).

15 “(5) DUTIES.—The Board shall—

16 “(A) review any solicitation made by the
17 United States to procure goods or services re-
18 lated to the prevention or treatment of malaria;

19 “(B) recommend individuals to serve on a
20 review panel described in subsection (e)(5);

21 “(C) review an evaluation made under sub-
22 section (e)(8);

23 “(D) vote on whether to recommend to ter-
24 minate an agreement referred to in subsection

1 (e)(1) at the end of each 1-year period that
2 such agreement is in effect;

3 “(E) vote on whether to recommend to ap-
4 prove proposed modifications to such an agree-
5 ment if such agreement will be revised under
6 subsection (e)(10); and

7 “(F) consult with the Coordinator of the
8 United States Government Archives to Combat
9 HIV/AIDS Globally regarding the development
10 of the strategy required by section 2(b) of the
11 Elimination of Neglected Diseases Act of 2005.

12 “(6) PERSONNEL MATTERS.—

13 “(A) COMPENSATION OF MEMBERS.—Each
14 member of the Board who is not an officer or
15 employee of the Federal Government shall be
16 compensated at a rate equal to the daily equiva-
17 lent of the annual rate of basic pay prescribed
18 for level IV of the Executive Schedule under
19 section 5315 of title 5, United States Code, for
20 each day (including travel time) during which
21 such member is engaged in the performance of
22 the duties of the Board. All members of the
23 Board who are officers or employees of the
24 United States shall serve without compensation

1 in addition to that received for their services as
 2 officers or employees of the United States.

3 “(B) TRAVEL EXPENSES.—The members
 4 of the Board shall be allowed travel expenses,
 5 including per diem in lieu of subsistence, at
 6 rates authorized for employees of agencies
 7 under subchapter I of chapter 57 of title 5,
 8 United States Code, while away from their
 9 homes or regular places of business in the per-
 10 formance of services for the Board.

11 “(C) STAFF.—

12 “(i) IN GENERAL.—The Chair of the
 13 Board may, without regard to the civil
 14 service laws and regulations, appoint and
 15 terminate an executive director and such
 16 other additional personnel as may be nec-
 17 essary to enable the Board to perform its
 18 duties. The employment of an executive di-
 19 rector shall be subject to confirmation by
 20 the Board.

21 “(ii) COMPENSATION.—The Chair of
 22 the Board may fix the compensation of the
 23 executive director and other personnel
 24 without regard to chapter 51 and sub-
 25 chapter III of chapter 53 of title 5, United

1 States Code, relating to classification of po-
 2 sitions and General Schedule pay rates, ex-
 3 cept that the rate of pay for the executive
 4 director and other personnel may not ex-
 5 ceed the rate payable for level V of the Ex-
 6 ecutive Schedule under section 5316 of such
 7 title.

8 “(D) DETAIL OF GOVERNMENT EM-
 9 PLOYEES.—Any Federal Government em-
 10 ployee may be detailed to the Board with-
 11 out reimbursement, and such detail shall
 12 be without interruption or loss of civil serv-
 13 ice status or privilege.

14 “(E) PROCUREMENT OF TEMPORARY
 15 AND INTERMITTENT SERVICES.—The
 16 Chair of the Board may procure temporary
 17 and intermittent services under section
 18 3109(b) of title 5, United States Code, at
 19 rates for individuals which do not exceed
 20 the daily equivalent of the annual rate of
 21 basic pay prescribed for level V of the Ex-
 22 ecutive Schedule under section 5316 of
 23 such title.”.

24 (c) REPEAL OF AUTHORITY TO COORDINATE.—Sec-
 25 tion 104C of the Foreign Assistance Act of 1961 (22

1 U.S.C. 2151b–4), as amended by subsections (a) and (b),
 2 is further amended by striking subsection (d).

3 **SEC. 4. ASSISTANCE TO COMBAT TUBERCULOSIS.**

4 (a) PRIORITY FOR DOTS COVERAGE.—Section
 5 104B(e) of the Foreign Assistance Act of 1961 (22 U.S.C.
 6 2151b–3(e)) is amended by striking the second sentence
 7 and inserting “In order to meet the requirement of the
 8 preceding sentence, the President shall ensure that not
 9 less than 75 percent of the amount made available to carry
 10 out this section for a fiscal year is expended for
 11 antituberculosis drugs, diagnostic supplies, other commod-
 12 ities, direct patient services, and support and training of
 13 frontline health workers who are responsible for direct
 14 contact with patients and the immediate supervisors of
 15 such workers in diagnosis and treatment for Directly Ob-
 16 served Treatment Short-course (DOTS) coverage and
 17 treatment of multi-drug resistant tuberculosis using
 18 DOTS-Plus. Such amount may be used to procure phar-
 19 maceuticals through the multilateral procurement mecha-
 20 nism known as the Global Tuberculosis Drug Facility.”.

21 (b) AWARD OF ASSISTANCE.—Section 104B of the
 22 Foreign Assistance Act of 1961 (22 U.S.C. 2151b–3) is
 23 amended—

24 (1) by redesignating subsection (f) as sub-
 25 section (h); and

1 (2) inserting after subsection (e) the following
2 new subsections:

3 “(f) AWARD OF ASSISTANCE.—

4 “(1) IN GENERAL.—The President may not
5 enter into any agreement with a person to procure
6 assistance to combat tuberculosis except as provided
7 in this subsection.

8 “(2) DEFINITIONS.—In this subsection:

9 “(A) AGREEMENT.—The term ‘agreement’
10 means an agreement to procure assistance to
11 combat tuberculosis.

12 “(B) ASSISTANCE TO COMBAT TUBER-
13 CULOSIS.—The term ‘assistance to combat tu-
14 berculosis’ means any goods or services related
15 to the treatment of tuberculosis authorized to
16 be provided under subsection (c).

17 “(C) ELIGIBLE ENTITY.—The term ‘eligi-
18 ble entity’ means any person that the President
19 determines is eligible to enter into an agree-
20 ment under this section.

21 “(3) APPLICATION.—An eligible entity seeking
22 to enter into an agreement shall submit an applica-
23 tion to the President at such time and in such man-
24 ner as the President may require.

1 “(4) ALLOCATION OF FUNDS.—The President
2 shall ensure agreements are awarded in a manner so
3 that of amounts made available to the President for
4 such agreements for a fiscal year—

5 “(A) not less than 75 percent of such
6 amounts shall be used to provide direct tuber-
7 culosis diagnosis and treatment services in the
8 22 countries that have the highest prevalence or
9 incidence rates of tuberculosis, with an empha-
10 sis on providing such services to individuals in
11 regions of such countries that do not have ade-
12 quate medical services; and

13 “(B) not less than 25 percent of the
14 amounts allocated under subparagraph (A) for
15 a fiscal year shall be used to provide
16 antituberculosis medications.

17 “(5) AVAILABILITY OF INFORMATION.—An eli-
18 gible entity may not be awarded assistance under
19 this subsection unless such entity agrees to make
20 available to the President for publication in the Fed-
21 eral Register and on the Internet the information
22 that the President determines is appropriate.

23 “(6) EVALUATION.—

24 “(A) INDICATORS.—At the end of each 1-
25 year period that an agreement is in effect, the

1 President shall determine whether the assist-
2 ance to combat tuberculosis provided pursuant
3 to the agreement has produced a significant in-
4 crease in the following indicators:

5 “(i) The rate at which individuals who
6 have tuberculosis are accurately diagnosed.

7 “(ii) The number of tuberculosis pa-
8 tients who complete DOTS.

9 “(iii) The percentage of tuberculosis
10 patients who begin DOTS that complete
11 such treatment.

12 “(iv) The percentage of tuberculosis
13 patients who are tested for the human im-
14 munodeficiency virus (HIV) infection, if
15 appropriate considering the HIV preva-
16 lence rates among individuals infected with
17 tuberculosis.

18 “(v) The percentage of patients who
19 test positive for HIV infection who are re-
20 ferred successfully to HIV care or treat-
21 ment, if appropriate considering the HIV
22 prevalence rates among individuals infected
23 with tuberculosis.

24 “(B) CONDUCT OF EVALUATION.—An eval-
25 uation of the assistance to combat malaria

1 under an agreement required by subparagraph
 2 (A) may be conducted by the eligible entity pro-
 3 viding such assistance or by another person, in-
 4 cluding an entity of a government, as determined
 5 by the President.

6 “(7) CONTINUATION.—The President may con-
 7 tinue an agreement for additional 1-year periods if
 8 the assistance to combat tuberculosis provided pur-
 9 suant to the agreement has produced a significant
 10 increase in the indicators described in clauses (i)
 11 through (v) of paragraph (6)(A).

12 “(8) REVISION.—If an agreement is not contin-
 13 ued under paragraph (7), the President may nego-
 14 tiate to revise the agreement so that the assistance
 15 to combat tuberculosis provided under the modified
 16 agreement is likely to result in a significant increase
 17 in the indicators described in clauses (i) through (v)
 18 of paragraph (6)(A).

19 “(9) TERMINATION.—The President shall ter-
 20 minate an agreement if such agreement—

21 “(A) is not continued under paragraph (7)
 22 or revised under paragraph (8); or

23 “(B) has been revised under paragraph (8)
 24 for a 1-year period and is not continued under

1 paragraph (7) at the end of the subsequent 1-
 2 year period.

3 “(g) CLINICAL AND EPIDEMIOLOGICAL ACTIVI-
 4 TIES.—

5 “(1) IN GENERAL.—Notwithstanding any other
 6 provision of law, the President shall ensure that the
 7 Secretary of Health and Human Services, acting
 8 through the Director of the Centers for Disease
 9 Control and Prevention, administers any assistance
 10 provided under this section for—

11 “(A) clinical or epidemiological activities to
 12 combat tuberculosis; and

13 “(B) technical assistance, or other indirect
 14 support with respect to epidemiological surveil-
 15 lance, diagnosis, treatment, or management of
 16 tuberculosis.

17 “(2) APPLICATION AND EVALUATION.—An eli-
 18 gible entity who receives assistance described in
 19 paragraph (1) shall apply for such funds as de-
 20 scribed in subsection (f) and activities carried out
 21 with such assistance shall be evaluated as described
 22 in paragraph (6) of such subsection.”.

1 **SEC. 5. OTHER INFECTIOUS DISEASES.**

2 (a) **AUTHORITY TO PROVIDE ASSISTANCE.**—Section
3 104(c)(3) of the Foreign Assistance Act of 1961 (22
4 U.S.C. 2151b(c)(3)) is amended to read as follows:

5 “(3) **ASSISTANCE FOR INFECTIOUS DISEASES.**—

6 “(A) **FINDING.**—Congress finds that infectious
7 diseases are responsible for the vast majority of
8 morbidity and mortality in the developing world.

9 “(B) **AUTHORITY TO PROVIDE ASSISTANCE.**—In
10 addition to authorities to provide assistance to com-
11 bat the acquired immune deficiency syndrome
12 (AIDS), the human immunodeficiency virus (HIV),
13 tuberculosis, and malaria in sections 104A, 104B,
14 and 104C, the Administrator of the United States
15 Agency for International Development is authorized
16 to implement programs to prevent, treat, and control
17 other infectious diseases, including leishmaniasis, Af-
18 rican trypanosomiasis, Chagas’ disease,
19 shistosomiasis, meningitis group B, acute respiratory
20 infections, infectious diarrhea, lymphatic filariasis,
21 onchocerciasis, trachoma, and intestinal parasites in
22 developing countries.

23 “(C) **ALLOCATION OF FUNDS.**—The President
24 shall ensure that of amounts made available for the
25 assistance described in subparagraph (B) for a fiscal
26 year—

1 “(i) not less than 50 percent of such
2 amounts shall be used to provide direct immu-
3 nization, prevention, diagnosis, prophylaxis, or
4 treatment to patients; and

5 “(ii) not less than 60 percent of the
6 amounts allocated under clause (i) for a fiscal
7 year shall be used to provide medicines, vac-
8 cines, diagnostic equipment, micronutrient and
9 oral rehydration combination supplements, and
10 other commodities used in the delivery of immu-
11 nization, prevention, diagnosis, prophylaxis, and
12 treatment for patients.

13 “(D) AVAILABILITY OF INFORMATION.—No in-
14 dividual or entity may not be awarded assistance to
15 carry out a program under this paragraph unless
16 such individual or entity agrees to make available to
17 the President for publication in the Federal Register
18 and on the Internet the information that the Presi-
19 dent determines is appropriate.

20 “(E) EVALUATION.—A program carried out
21 under subparagraph (B) shall be evaluated by the
22 Administrator on an annual basis to determine if
23 such program has resulted in a significant reduction
24 in the rate of morbidity and in the rate of mortality

1 attributed to an infectious disease in each location
2 where the program was implemented.

3 “(F) REVISION.—The Administrator shall re-
4 vise a program carried out under subparagraph (B)
5 that, at the end of a 1-year period, has not resulted
6 in significant reduction in each of the rates referred
7 to in subparagraph (E), so that the assistance pro-
8 vided under such modified program is likely to result
9 in a significant decrease in each such rate.

10 “(G) CLINICAL AND EPIDEMIOLOGICAL ACTIVI-
11 TIES.—

12 “(i) IN GENERAL.—Notwithstanding any
13 other provision of law, the President shall en-
14 sure that the Secretary of Health and Human
15 Services, acting through the Director of the
16 Centers for Disease Control and Prevention, ad-
17 ministers any assistance provided under this
18 section for—

19 “(I) clinical or epidemiological activi-
20 ties to combat infectious diseases; and

21 “(II) technical assistance, or other in-
22 direct support with respect to epidemiolog-
23 ical surveillance, diagnosis, treatment, or
24 management of infectious diseases.

1 “(ii) EVALUATION.—Any assistance de-
 2 scribed in clause (i) shall be evaluated at the
 3 end of each 1-year period as described in sub-
 4 paragraph (E).”.

5 (b) AUTHORIZATION OF APPROPRIATIONS.—There
 6 are authorized to be appropriated to the President for
 7 each of the fiscal years 2006 through 2011 such sums as
 8 may be necessary to carry out section 104(c)(3) of the
 9 Foreign Assistance Act of 1961 (22 U.S.C. 2151b(c)(3)),
 10 as amended by subsection (a).

11 **SEC. 6. ANNUAL REPORT ON HIV/AIDS, TUBERCULOSIS,**
 12 **AND MALARIA.**

13 Section 104A(e)(2)(C)(iv) of the Foreign Assistance
 14 Act of 1961 (22 U.S.C. 2151b–2(e)(2)(C)(iv)) is amended
 15 to read as follows:

16 “(iv) with respect to malaria, the in-
 17 crease in the number of people treated and
 18 the increase in number of malaria patients
 19 cured, the number of people treated with
 20 artemesinin-based combination therapy or
 21 another therapy that is more effective than
 22 such combination therapy, the number of
 23 households that received indoor residual
 24 spraying to prevent transmission of ma-
 25 laria through each program, project, or ac-

1 tivity receiving United States foreign as-
 2 sistance for malaria control purposes, and
 3 the progress in achieving reductions in
 4 morbidity and mortality through such pro-
 5 grams, projects, or activities.”.

6 **SEC. 7. AVAILABILITY OF INFORMATION ON EXPENDI-**
 7 **TURES.**

8 Section 104(c) of the Foreign Assistance Act of 1961
 9 (22 U.S.C. 2151b(c)) is amended by adding after para-
 10 graph (4) the following new paragraph:

11 “(5) AVAILABILITY OF INFORMATION.—

12 “(A) REQUIREMENT FOR DATABASE.—The
 13 President shall make publicly available through an
 14 Internet website a database of information regarding
 15 any activity carried out by the Agency, the Depart-
 16 ment of State, the Department of Health and
 17 Human Services, or the Department of Labor, or
 18 any assistance provided by the United States to a
 19 person, including an entity of a government, for the
 20 purpose of providing assistance to individuals in a
 21 foreign country related to any infectious disease, in-
 22 cluding—

23 “(i) the human immunodeficiency virus
 24 (HIV) and the acquired immune deficiency syn-
 25 drome (AIDS);

- 1 “(ii) malaria;
- 2 “(iii) tuberculosis;
- 3 “(iv) diarrheal disease;
- 4 “(v) polio; and
- 5 “(vi) acute respiratory infection.

6 “(B) INFORMATION REQUIRED.—The informa-
7 tion made available under subparagraph (A) for as-
8 sistance provided by the United State to an eligible
9 entity, including an entity of a government, shall in-
10 clude, for each grant of such assistance to such enti-
11 ty—

12 “(i) the name of such entity;

13 “(ii) the amount of assistance received;

14 “(iii) the text of any agreement entered
15 into by the United States and such entity, in-
16 cluding the budget proposed by such entity, the
17 description of work to be performed, and any
18 appropriate certifications;

19 “(iv) a description of the activities to be
20 carried out using such assistance, including the
21 location in which such activities will be carried
22 out;

23 “(v) the name of any person who will be
24 compensated by such entity to carry out an ac-
25 tivity described under clause (iv);

1 “(vi) the schedule on which such assistance
2 will be provided;

3 “(vii) progress reports on the carrying out
4 of the activities described under clause (iv); and

5 “(viii) any reports or other products re-
6 quired to be produced by such entity under the
7 agreement referred to in clause (iii).

8 “(C) SEARCH CAPABILITIES.—The database de-
9 veloped under subparagraph (A) shall be capable of
10 being searched on multiple criteria, including—

11 “(i) disease or program area;

12 “(ii) recipient of assistance;

13 “(iii) country assisted;

14 “(iv) solicitation number; or

15 “(v) the type of activity carried out with
16 United States assistance.”.

17 **SEC. 8. ASSISTANT SECRETARY FOR GLOBAL HEALTH.**

18 (a) IN GENERAL.—Part P of title III of the Public
19 Health Service Act (42 U.S.C. 280g et seq.) is amended
20 by adding at the end the following section:

21 **“SEC. 3990. COORDINATION OF GLOBAL HEALTH ACTIVI-**
22 **TIES.**

23 “(a) ESTABLISHMENT OF POSITION OF ASSISTANT
24 SECRETARY FOR GLOBAL HEALTH.—There is established
25 within the Department of Health and Human Services the

1 position of Assistant Secretary for Global Health, who
2 shall direct the Office of Global Health Affairs within the
3 Department. The President shall appoint an individual to
4 serve in such position. Such Assistant Secretary shall re-
5 port to the Secretary.

6 “(b) DUTIES.—Subject to the authority of the Sec-
7 retary, the Assistant Secretary for Global Health shall co-
8 ordinate policies and activities of the Department that are
9 international in nature, including international aspects of
10 family and social policy, and in particular shall—

11 “(1) perform such interagency coordination re-
12 sponsibilities as the Secretary has with respect to
13 international health, family, and social policy issues;

14 “(2) coordinate and lead on behalf of the Sec-
15 retary—

16 “(A) activities of the Department per-
17 taining to international and multilateral organi-
18 zations; and

19 “(B) relationships between the Department
20 and foreign governments with respect to health,
21 family, and social policy;

22 “(3) represent the Department before other
23 Federal agencies, before other governments, in inter-
24 national organizations, and with respect to private-
25 sector entities on international health issues, refugee

1 health issues, and international aspects of other de-
 2 partmental issues, including family and social policy;

3 “(4) provide policy guidance and coordination
 4 on refugee health policy issues, in collaboration with
 5 agencies of the Department and other Federal agen-
 6 cies;

7 “(5) coordinate technical and policy-related
 8 Federal input into refugee health issues; and

9 “(6) perform such other duties as the Secretary
 10 determines are appropriate.”.

11 (b) PAY.—Section 5315 of title 5, United States
 12 Code, is amended by adding at the end the following:

13 “Assistant Secretary for Global Health, Depart-
 14 ment of Health and Human Services.”.

15 **SEC. 9. LIMITATION ON COUNTRIES THAT IMPOSE IMPORT**
 16 **TARIFFS.**

17 After the date that is 2 years after the date of the
 18 enactment of this Act, no agency or department of the
 19 United States may donate or otherwise supply medicines
 20 or medical devices, including insecticide treated nets, in-
 21 secticides, and other essential consumables required for
 22 disease control to a foreign country if such country im-
 23 poses import tariffs or other import duties on such medi-
 24 cines or medical devices.

1 **SEC. 10. CONSTRUCTION.**

2 (a) IN GENERAL.—In order for the Department of
3 Health and Human Services to carry out international
4 health activities, including activities related to HIV/AIDS,
5 other infectious disease, chronic disease, and environ-
6 mental disease, the Secretary of Health and Human Serv-
7 ices may exercise authority equivalent to that available to
8 the Secretary of State in section 2(c) of the State Depart-
9 ment Basic Authorities Act of 1956 (22 U.S.C. 2669(c)).

10 (b) RELATIONSHIP WITH DEPARTMENT OF STATE.—

11 (1) CONSULTATION.—The Secretary of Health
12 and Human Services shall consult with the Secretary
13 of State and relevant Chief of Mission to ensure that
14 the authority provided in this section is exercised in
15 a manner consistent with section 207 of the Foreign
16 Service Act of 1980 (22 U.S.C. 3927) and other ap-
17 plicable statutes administered by the Department of
18 State.

19 (2) REIMBURSEMENT.—The Secretary of
20 Health and Human Services is authorized to provide
21 such funds by advance or reimbursement to the Sec-
22 retary of State as may be necessary to pay the costs
23 of acquisition, lease, alteration, renovation, and
24 management of facilities outside of the United
25 States for the use of the Department of Health and
26 Human Services.

1 (3) COOPERATION.—The Secretary of State
2 shall cooperate fully with the Secretary of Health
3 and Human Services to ensure that the Department
4 of Health and Human Services has secure, safe,
5 functional facilities that comply with applicable regu-
6 lation governing location, setback, and other facili-
7 ties requirements and serve the purposes established
8 by this Act.

9 (c) RENOVATION OF FACILITIES.—The Secretary of
10 Health and Human Services is authorized, in consultation
11 with the Secretary of State, through grant or cooperative
12 agreement, to make available to public or nonprofit private
13 institutions or agencies in participating foreign countries,
14 funds to acquire, lease, alter, or renovate facilities in those
15 countries as necessary to conduct programs of assistance
16 for international health activities, including activities re-
17 lating to HIV/AIDS, other infectious diseases, chronic dis-
18 eases, and environmental diseases.

○