

119TH CONGRESS
2D SESSION

S. 4499

To amend the Public Health Service Act to require the Secretary of Health and Human Services to expand and enhance the National Healthcare Safety Network to establish real-time infectious disease and public health surveillance capabilities across nursing homes in the United States, and for other purposes.

IN THE SENATE OF THE UNITED STATES

MAY 12, 2026

Mr. TILLIS (for himself and Mr. HICKENLOOPER) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To amend the Public Health Service Act to require the Secretary of Health and Human Services to expand and enhance the National Healthcare Safety Network to establish real-time infectious disease and public health surveillance capabilities across nursing homes in the United States, 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,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Advanced Long-term
3 care Early Response Technology Act of 2026” or the
4 “ALERT Act of 2026”.

5 **SEC. 2. NATIONAL NETWORK OF REAL-TIME INFECTIOUS**
6 **DISEASE AND PUBLIC HEALTH SURVEIL-**
7 **LANCE IN NURSING HOMES.**

8 Part B of title III of the Public Health Service Act
9 is amended by inserting after section 319M (42 U.S.C.
10 247d–f) the following:

11 **“SEC. 319N. ENHANCEMENT OF NATIONAL HEALTHCARE**
12 **SAFETY NETWORK FOR REAL-TIME SURVEIL-**
13 **LANCE IN NURSING HOMES.**

14 “(a) IN GENERAL.—Not later than 180 days after
15 the date of enactment of the Advanced Long-term care
16 Early Response Technology Act of 2026, the Secretary,
17 acting through the Director of the Centers for Disease
18 Control and Prevention (referred to in this section as the
19 ‘Secretary’), shall carry out a 5-year program to expand
20 and enhance the National Healthcare Safety Network (re-
21 ferred to in this section as the ‘NHSN’) to establish real-
22 time infectious disease and public health surveillance capa-
23 bilities across nursing homes in the United States.

24 “(b) CONTRACTING AUTHORITY.—

25 “(1) IN GENERAL.—The Secretary may enter
26 into one or more contracts with an eligible entity to

1 develop, implement, and operate the technological
2 and analytic infrastructure necessary to provide real-
3 time surveillance and rapid notification capabilities
4 under the NHSN.

5 “(2) ELIGIBILITY.—To be eligible to enter into
6 a contract with the Secretary under paragraph (1),
7 an entity—

8 “(A) shall be located in, or shall be a sub-
9 sidiary of an entity that is located in, the
10 United States;

11 “(B) shall have, and shall maintain for the
12 period of the contract, HITRUST r2 certifi-
13 cation (or a successor certification);

14 “(C) shall not be an electronic medical
15 records company; and

16 “(D) shall demonstrate experience in es-
17 tablishing and operating a public health surveil-
18 lance network that monitors infectious diseases
19 or other public health threats at the State or
20 local level.

21 “(c) REQUIRED CAPABILITIES.—Any contract en-
22 tered into under subsection (b) shall—

23 “(1) ensure that the infrastructure developed
24 pursuant to the contract is capable of—

1 “(A) providing real-time monitoring of
2 emerging infectious diseases and other public
3 health threats among nursing homes nation-
4 wide;

5 “(B) integrating with, and enhancing, the
6 reporting systems of the NHSN;

7 “(C) establishing a central hub of epi-
8 demiologists and other public health profes-
9 sionals to support rapid identification of out-
10 breaks;

11 “(D) providing for immediate notification
12 to appropriate Federal, State, and local health
13 authorities; and

14 “(E) supporting the implementation of a
15 staffed care management program that skilled
16 nursing facilities may opt into;

17 “(2) ensure appropriate privacy protections for
18 individual patient data; and

19 “(3) prohibit the use of data collected or gen-
20 erated under the contract for regulatory compliance
21 or enforcement purposes unless expressly authorized
22 by law.

23 “(d) HIPAA AND DATA PROTECTIONS.—The entity
24 awarded a contract under subsection (b)—

1 “(1) shall be treated as a covered entity (as de-
2 fined in section 160.103 of title 45, Code of Federal
3 Regulations (or successor regulations)) for purposes
4 of the privacy regulations promulgated under section
5 264(c) of the Health Insurance Portability and Ac-
6 countability Act of 1996; and

7 “(2) shall comply with all applicable Federal
8 privacy and security requirements.

9 “(e) STUDY AND REPORT.—At the end of the period
10 of the program described in subsection (a), the Secretary
11 shall conduct, and submit to Congress a report that de-
12 scribes the results of, a study on—

13 “(1) the effectiveness of the enhanced NHSN
14 system in monitoring infectious diseases and public
15 health threats in nursing homes;

16 “(2) the impact of the enhanced NHSN system
17 on hospitalization rates and patient outcomes; and

18 “(3) recommendations regarding continuation
19 or expansion of the program under this section.

20 “(f) AUTHORIZATION OF APPROPRIATIONS.—To
21 carry out this section, there is authorized to be appro-
22 priated such sums as may be necessary for each of fiscal
23 years 2027 through 2031.”.

1 **SEC. 3. SUPPORTING OF REAL-TIME INFECTIONS DISEASE**
 2 **AND PUBLIC HEALTH SURVEILLANCE NET-**
 3 **WORK FOR NURSING HOMES.**

4 Section 1115A(b)(2)(B) of the Social Security Act
 5 (42 U.S.C. 1315a(b)(2)(B)) is amended by adding at the
 6 end the following new clause:

7 “(xxviii) Supporting the adoption by
 8 the National Healthcare Safety Network of
 9 technology to improve infectious disease
 10 surveillance in nursing homes that—

11 “(I) has capabilities for imme-
 12 diate detection and reporting of infec-
 13 tious disease outbreaks;

14 “(II) facilitates coordinated re-
 15 sponses with local, State, and Federal
 16 public health authorities; and

17 “(III) enables nursing homes to
 18 participate in a staffed care manage-
 19 ment program to improve resident
 20 health outcomes.”.

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