

had been reported from the Committee on Health, Education, Labor, and Pensions with an amendment to strike all after the enacting clause and insert the part printed in *italic*, as follows:

SECTION 1. SHORT TITLE.

This Act may be cited as the “Accelerating Access to Critical Therapies for ALS Reauthorization Act of 2026”.

SEC. 2. REAUTHORIZATION OF ACCELERATING ACCESS TO CRITICAL THERAPIES FOR ALS ACT.

(a) IN GENERAL.—Section 7 of the Accelerating Access to Critical Therapies for ALS Act (Public Law 117–79) is amended by striking “2022 through 2026” and inserting “2027 through 2031”.

(b) GRANTS FOR ALS RESEARCH.—Section 2(f) of the Accelerating Access to Critical Therapies for ALS Act (21 U.S.C. 360ee note) is amended by striking “2026” and inserting “2031”.

SEC. 3. IMPROVEMENTS TO PROGRAM FOR GRANTS FOR RESEARCH ON THERAPIES FOR ALS.

Section 2 of the Accelerating Access to Critical Therapies for ALS Act (21 U.S.C. 360ee note) is amended—

(1) in subsection (a), by inserting “(referred to in this section as ‘expanded access grants’)” before the period at the end of the first sentence;

(2) in subsection (b)—

(A) by striking “(b) APPLICATION—” and all that follows through “A participating” in paragraph (1) and inserting the following:

“(b) APPLICATION.—A participating”;

(B) by redesignating paragraphs (2) and (3) as paragraphs (1) and (2) respectively;

(C) in the matter preceding paragraph (1), as so redesignated, by striking the period at the end and inserting “including—”;

(D) by amending paragraph (1), as so redesignated, to read as follows:

“(1) a description of how data generated through the proposed expanded access grant will be used to support research or development related to the prevention, diagnosis, mitigation, treatment, or cure of amyotrophic lateral sclerosis;”;

(E) in paragraph (2), as so redesignated—

(i) by striking “NONINTERFERENCE WITH CLINICAL TRIALS—” and all that follows through “shall include”;

(ii) by striking “program” and inserting “grant”;

(iii) by striking the period at the end and inserting “; and”;

(F) by adding at the end the following:

“(3) an assurance that such entity will promptly report to the Secretary available safety data from any ongoing clinical trial of the investigational drug as set forth in the terms and conditions of the grant.”;

(3) in subsection (c)—

(A) by redesignating subparagraphs (A) and (B) of paragraph (2) as clauses (i) and (ii), respectively, and adjusting the margins accordingly;

(B) by redesignating paragraphs (1) through (3) as subparagraphs (A) through (C), respectively, and adjusting the margins accordingly;

(C) in subparagraph (C), as so redesignated, by striking the period at the end and inserting “; and”;

(D) in the matter preceding subparagraph (A), as so redesignated, by striking “this section, confirm that—” and inserting the following: “this section—

“(1) confirm that—”; and

(E) by adding at the end the following:

“(2) in the case of a renewal of such a grant, request from the sponsor of the investigational new drug application involved, and assess, the enrollment, safety, and any available efficacy data of the drug related to the prevention, diagnosis, mitigation, treatment, or cure of amyotrophic lateral sclerosis.”;

(4) in subsection (d)(1), by striking “request described in subsection (a)” and inserting “grant”;

(5) in subsection (e)—

(A) in paragraph (2), by inserting “, and that begins enrollment within a timeframe as determined by the Secretary through the terms and conditions of the grant” before the period at the end; and

(B) by adding at the end the following:

“(4) The term ‘phase 3 clinical trial’ includes a phase 2/3 combined trial and a planned phase 3 clinical trial that is not yet enrolling participants.”.

SEC. 4. REPORT ON ALS AND OTHER RARE NEURODEGENERATIVE DISEASE ACTION PLANS.

Section 4 of the Accelerating Access to Critical Therapies for ALS Act (21 U.S.C. 360aa note) is amended—

(1) in the section heading, by striking “ALS AND OTHER” and inserting “FDA”;

(2) in subsection (a), in the matter preceding paragraph (1)—

(A) by inserting “and not later than 1 year after the date of enactment of the Accelerating Access to Critical Therapies for ALS Reauthorization Act of 2026 and every 5 years thereafter,” after “this Act,”; and

(B) by inserting “develop, or update, as applicable, and” before “publish on”;

(3) in subsection (b)—

(A) in the matter preceding paragraph (1), by striking “initial”;

(B) in paragraph (2)—

(i) in subparagraph (A), by inserting “of relevant investigational new drug applications” after “sponsors”;

(ii) in subparagraph (C) by inserting “for the prevention, diagnosis, mitigation, treatment, or cure of rare neurodegenerative diseases” before the semicolon; and

(iii) in subparagraph (D), by striking “; and” and inserting a semicolon;

(C) in paragraph (3), by striking the period at the end and inserting “; and”;

(D) by adding at the end the following:

“(4) for each action plan published after the date of enactment of the Accelerating Access to Critical Therapies for ALS Reauthorization Act of 2026, include a description of—

“(A) previous actions taken by the Food and Drug Administration to implement the previous action plan published under subsection (a);

“(B) any other planned actions to implement such action plan; and

“(C) any barriers to implementing such action plan and related recommendations, which may include an estimate of resources necessary to address such barriers.”.

SEC. 5. REPORTS.

Section 6 of the Accelerating Access to Critical Therapies for ALS Act (Public Law 117–79) is amended—

(1) in the heading, by striking “GAO REPORT” and inserting “REPORTS”;

(2) by striking “Not later than” and inserting the following:

“(a) GAO REPORT.—Not later than”;

(3) in the matter preceding paragraph (1) of subsection (a), as so designated, by striking “this Act” and inserting “the Accelerating Access to Critical Therapies for ALS Reauthorization Act of 2026”;

(4) by adding at the end the following:

“(b) HHS REPORT.—Not later than 4 years after the date of enactment of the Accelerating Access to Critical Therapies for ALS Reauthorization Act of 2026, the Secretary of Health and Human Services shall, in a manner that does not duplicate the information described in the action plan published pursuant to section 4, submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives a report assessing the effectiveness of the activities carried out under sections 2, 3, and 5 and making recommendations to improve such activities.”.

SEC. 6. TECHNICAL AMENDMENTS.

Section 3 of the Accelerating Access to Critical Therapies for ALS Act (42 U.S.C. 280g–7b) is amended—

(1) in subsection (a), in the matter preceding paragraph (1), by striking “amyotrophic” and inserting “amyotrophic”; and

(2) in subsection (b)(3)(A)(iii), by striking “rational”.

Mr. THUNE. Madam President, I ask unanimous consent that the committee-reported substitute amendment be agreed to and the bill, as amended, be considered read a third time.

The PRESIDING OFFICER. Without objection, it is so ordered.

The committee-reported amendment, in the nature of a substitute, was agreed to.

The bill was ordered to be engrossed for a third reading and was read the third time.

Mr. THUNE. Madam President, I know of no further debate on the bill.

The PRESIDING OFFICER. Hearing none, the bill having been read the third time, the question is, Shall the bill pass?

The bill (S. 4472), as amended, was passed.

Mr. THUNE. Madam President, I ask unanimous consent that the motion to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Without objection, it is so ordered.

NATIONAL PLAN FOR EPILEPSY ACT

Mr. THUNE. Madam President, I ask unanimous consent that the Senate proceed to the immediate consideration of Calendar No. 526, S. 494.

The PRESIDING OFFICER. The clerk will report the bill by title.

The legislative clerk read as follows:

A bill (S. 494) to establish a national plan to coordinate research on epilepsy, and for other purposes.

There being no objection, the Senate proceeded to consider the bill, which had been reported from the Committee on Health, Education, Labor, and Pensions with an amendment to strike all after the enacting clause and insert the part printed in *italic*, as follows:

SECTION 1. SHORT TITLE.

This Act may be cited as the “National Plan for Epilepsy Act”.

SEC. 2. REVIEW TO IMPROVE EPILEPSY PROGRAMS, RESEARCH, PREVENTION, AND CARE.

(a) IN GENERAL.—The Secretary of Health and Human Services (referred to in this section as the “Secretary”) shall review and, as necessary and appropriate, provide recommendations to Congress regarding, and update existing Federal programs, activities, and strategic plans related to, epilepsy research, prevention, early identification, diagnosis, and treatment for purposes of identifying and addressing knowledge gaps and improving health outcomes related to epilepsy.

(b) CONTENT.—The review under subsection (a) shall include—

(1) a review of findings from evidence-based research on epilepsy, the status of ongoing, federally-funded research on epilepsy, knowledge gaps related to epilepsy, and disparities in populations with epilepsy;

(2) a review of Federal programs related to epilepsy research, prevention, early identification, diagnosis, and treatment, which shall include consideration of—

(A) gaps in, and opportunities for, coordination among such programs;

(B) opportunities to inform global efforts to prevent, diagnose, treat, and cure epilepsy, as appropriate;

(C) near- and long-term goals of such programs to improve research, prevention, early identification, diagnosis, and treatment of epilepsy; and

(D) the level of Federal investment in preventing, diagnosing, treating, and curing epilepsy;

(3) consideration of opportunities to—
(A) improve collaboration between Federal agencies and relevant stakeholders to address gaps in programs, research, and services;

(B) eliminate knowledge gaps in research on epilepsy, including a review of the impact of epilepsy on the health and well-being of individuals with epilepsy and their caregivers;

(C) improve early diagnosis and coordination of the care and treatment of individuals with epilepsy;

(D) better prevent sudden unexpected death in epilepsy and other epilepsy-related mortalities;

(E) improve surveillance of epilepsy; and

(F) support the development of new treatments, strategies, and other approaches to prevent, diagnose, treat, and cure epilepsy or to enhance functioning and improve quality of life for individuals with epilepsy and their caregivers; and

(4) a review of current public health strategies, and consideration of additional evidence-based strategies, related to epilepsy.

(c) **EXTERNAL INPUT.**—To inform the review under subsection (a), the Secretary shall regularly convene and solicit input from other Federal agencies, as appropriate, and relevant stakeholders, including patient advocates and non-Federal subject matter experts.

(d) **REPORT.**—Not later than 2 years after the date of the enactment of this Act, the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives a report on the findings of the review conducted under subsection (a), including—

(1) a description of steps the Secretary took to solicit stakeholder input pursuant to subsection (c) and a summary of feedback received from, and needs identified by, such stakeholders;

(2) recommendations to improve coordination and support of Federal programs in order to better support people with epilepsy, epilepsy research, and data collection, and proposals for implementation of such recommendations, as appropriate; and

(3) any changes to Federal programs, activities, or strategic plans recommended by the Secretary based on the review, and any statutory or other barriers that impede implementation of such changes.

Mr. THUNE. Madam President, I ask unanimous consent that the committee-reported substitute amendment be agreed to; that the bill, as amended, be considered read a third time and passed; and that the motion to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Without objection, it is so ordered.

The committee-reported amendment, in the nature of a substitute, was agreed to.

The bill (S. 494), as amended, was ordered to be engrossed for a third reading, was read the third time, and passed.

UNANIMOUS CONSENT AGREEMENT—S.J. Res. 187

Mr. THUNE. Madam President, I ask unanimous consent that notwith-

standing rule XXII, Senator WHITEHOUSE or his designee be authorized to return the Senate to legislative session for the purposes of making a motion to proceed to Calendar No. 532, S.J. Res. 187, during Wednesday's session of the Senate.

The PRESIDING OFFICER. Without objection, it is so ordered.

MORNING BUSINESS

COMMEMORATING NATIONAL POW/MIA RECOGNITION DAY

Mr. CRAPO. Madam President, I join the POW/MIA Awareness Rally Corp. of Pocatello, ID, in acknowledging National POW/MIA Recognition Day this September 18, 2026.

I am grateful for the Defense POW/MIA Accounting Agency's, DPAA, steady and often challenging work to meet its responsibility of recovering America's servicemembers. Each year, the DPAA leads the creation of a poster commemorating National POW/MIA Recognition Day, as ceremonies are held across the country to honor those who were held captive and returned, as well as those who remain missing. The year's poster reads, "Warrior Ethos: 'I will always place the mission first . . . I will never leave a fallen comrade.'"

Second Lieutenant Charles Atteberry, a World War II servicemember from Parma who had been missing and unidentified for 80 years, is one of the Idaho servicemembers most recently returned home. Through the U.S. military's use of DNA testing, Lt. Atteberry was identified from a mass grave in Taiwan and returned to Idaho in 2025. Lt. Atteberry's brother Lloyd also served in the military as a pilot during World War II and is still considered missing in action since he was reportedly shot down in 1943.

On June 10, 2026, the DPAA also accounted for U.S. Army Air Forces Staff Sgt. Harold T. Thompson, 24, who was killed during World War II. The DPAA reported, "In the winter of 1944, Thompson was assigned to the 718th Bombardment Squadron, 449th Bombardment Group, in Italy. On Jan. 30, he was serving as a gunner aboard a B-24 Liberator bomber on a mission to Udine, Italy. The plane was shot down while returning from its mission and was last sighted north of the Isle of Morgo off the Italian coast near the town of Grado. Three crew members made it out of the plane before the crash, but only one survived. The other seven members, including Thompson, were believed to have still been in the aircraft when it crashed."

As we celebrate Idahoans' return home, we maintain hope for the return of Idaho's other servicemembers, including the eight who remain unaccounted for from the Vietnam war. This includes Major William Ellsworth Lemmons, who was on a visual reconnaissance mission in South Vietnam on June 18, 1967, when the aircraft he pi-

loted failed to return from the mission for unknown reasons and was declared missing. Major Lemmons is memorialized on the Courts of the Missing at the National Memorial Cemetery of the Pacific and Vietnam Veterans Memorial Wall in Washington, DC.

I thank America's servicemembers, veterans, and their families for their extraordinary commitment to our country, as I remain deeply grateful to those who keep attention on bringing every American servicemember and the DPAA and its partners working steadily to provide the fullest possible accounting of missing U.S. personnel to their families and our country.

To support these efforts, I continue to use every opportunity to press for enactment of the Bring Our Heroes Home Act. This legislation would help eliminate obstacles preventing families and caseworkers from accessing the records needed for recovering America's POWs and MIA.

We honor America's missing servicemembers and those they served beside by never giving up in our pursuit of finding them and bringing them home.

TRIBUTE TO MATT LLOYD

Mr. DAINES. Madam President, today I have the distinct honor of recognizing Matt Lloyd for his decades of devotion to Montana and the Nation as he retires from 25 years of public service.

After graduating from the University of Illinois Urbana-Champaign, Matt began his journey in Washington, DC, as press secretary for U.S. Congressman Rick Hill and U.S. Congressman Kevin Brady. During the George W. Bush administration, Matt answered the call to serve and worked at the Department of Agriculture under Secretary Ann Veneman before returning to the U.S. House as communications director for Congressman Mike Pence, guiding the Congressman throughout his tenure in Congress and his campaign for Governor of Indiana.

During the first Trump administration, Matt once again served in the executive branch, first as Principal Deputy Assistant Secretary for Public Affairs at the U.S. Department of Health and Human Services, then as Senior Advisor for Public Affairs at the U.S. Department of State, and finally as Principal Deputy Director for Public Affairs at the U.S. Department of Justice.

His last role before coming to my office was deputy chief of staff and communications director for U.S. Senator Rob Portman.

Matt started on Team Daines in January 2023. As my deputy chief of staff and communications director, he has provided principled and thoughtful counsel during a pivotal timespan in our Nation's history. He has a sharp eye, a keen sense of the political current, and has been an integral member of my staff.

Throughout it all, Matt has never lost sight of what matters most: being