To prevent the proliferation of weapons of mass destruction, to prepare for attacks using weapons of mass destruction, and for other purposes.

§ 1. SHORT TITLE; AND TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the “Weapons of Mass Destruction Prevention and Preparedness Act of 2009” or the “WMD Prevention and Preparedness Act of 2009”.

(b) TABLE OF CONTENTS.—The table of contents is as follows:
Title I—Enhanced Biosecurity

Sec. 101. Designation of tier I agents.
Sec. 102. Enhanced biosecurity measures.
Sec. 103. Laboratory and facility registration.
Sec. 104. Background checks.
Sec. 105. Biological laboratory protection.

Title II—Response to a Weapon of Mass Destruction Attack

Subtitle A—Ensuring Access to Medical Countermeasures During Emergencies

Sec. 201. National Medical Countermeasure Dispensing Strategy.
Sec. 202. Tailoring of the national medical countermeasure dispensing strategy.
Sec. 203. Expansion in the use of the U.S. Postal Service to deliver medical countermeasures.
Sec. 204. Dispensing medical countermeasures through employers.
Sec. 205. Personal medkits for emergency response providers.
Sec. 206. General public medkit pilot program.

Subtitle B—Bioforensics Capabilities and Strategy

Sec. 211. Bioforensics capabilities and strategy.

Subtitle C—Communications Planning

Sec. 221. Communications planning.
Sec. 222. Plume modeling.

Title III—International Measures to Prevent Biological Terrorism

Subtitle A—Prevention and Protection Against International Biological Threats

Sec. 301. International Threat Assessment: Tier I Pathogen Facilities.
Sec. 302. Strengthening international biosecurity.
Sec. 303. Promoting secure biotechnology advancement.

Subtitle B—Global Pathogen Surveillance

Sec. 321. Short title.
Sec. 322. Findings; purpose.
Sec. 323. Definitions.
Sec. 324. Eligibility for assistance.
Sec. 325. Restriction.
Sec. 326. Fellowship program.
Sec. 327. In-country training in laboratory techniques and disease and syndrome surveillance.
Sec. 328. Assistance for the purchase and maintenance of public health laboratory equipment and supplies.
Sec. 329. Assistance for improved communication of public health information.
Sec. 330. Assignment of public health personnel to United States missions and international organizations.
Sec. 331. Expansion of certain United States Government laboratories abroad.
Sec. 332. Assistance for international health networks and expansion of Field Epidemiology Training Programs.
Sec. 333. Reports.
Sec. 334. Authorization of appropriations.

TITLE IV—GOVERNMENT ORGANIZATION

Sec. 401. Intelligence on weapons of mass destruction.
Sec. 402. Intelligence community language capabilities and cultural knowledge.
Sec. 403. Counterterrorism technology assessments.
Sec. 404. [United States Coordinator for the Prevention of Weapons of Mass Destruction Proliferation and Terrorism].

TITLE V—EMERGENCY MANAGEMENT AND CITIZEN ENGAGEMENT

Sec. 501. Communication of threat information and alerts.
Sec. 502. Guidelines concerning weapons of mass destruction.
Sec. 503. Individual and community preparedness.

TITLE I—ENHANCED BIOSECURITY

SEC. 101. DESIGNATION OF TIER I AGENTS.

(a) Amendments to the Public Health Service Act.—Section 351A of the Public Health Service Act (42 U.S.C. 262a) is amended—

(1) in subsection (a)—

(A) by redesignating paragraph (2) as paragraph (3);

(B) by inserting after paragraph (1) the following:

“(2) TIER I AGENTS.—

“(A) DESIGNATION.—Not later than 180 days after the date of enactment of the Weapons of Mass Destruction Prevention and Preparedness Act of 2009, the Secretary, in con-
consultation with the Secretary of Homeland Security, shall designate as ‘Tier I agents’ those agents and toxins listed under paragraph (1)(A)—

“(i) for which the Secretary of Homeland Security has issued a Material Threat Determination under section 319F–2(c)(2) regarding the agent or toxin, unless the Secretary of Health and Human Services determines that such inclusion is unwarranted; or

“(ii) that meet the criteria under subparagraph (B).

“(B) CRITERIA.—In determining whether to classify an agent or toxin as a Tier I agent under subparagraph (A), the Secretary, in consultation with the Secretary of Homeland Security, shall consider—

“(i) whether the agent or toxin has significant potential to be used effectively in a biological attack;

“(ii) whether the risk posed by the agent or toxin requires additional biosecurity measures, beyond those required under
subsection (b), to prevent misuse domestically or abroad;

“(iii) information available from any biological or bioterrorism risk assessments conducted by the Department of Homeland Security or other relevant assessments by other departments or the intelligence community; and

“(iv) such other criteria and information that the Secretary determines appropriate and relevant.

“(C) EVALUATION OF TIER I AGENTS.—The Secretary, in consultation with the Secretary of Homeland Security, shall—

“(i) on an ongoing basis, consider the inclusion of additional agents or toxins on the list of Tier I agents, as appropriate; and

“(ii) at least biennially, review the list of Tier I agents to determine whether any agents or toxins should be removed from the list.”; and

(C) in paragraph (3), as redesignated, by striking “list under paragraph (1)” and inserting “lists under paragraphs (1) and (2)”;}
(2) in subsection (l), by adding at the end the following:

“(9) The term ‘Tier I overlap agent’ means a biological agent or toxin that—

“(A) is listed pursuant to subsection (a)(2); and

“(B) is listed pursuant to section 212(a)(2) of the Agricultural Bioterrorism Protection Act of 2002.”.

(b) Amendments to the Agricultural Bioterrorism Protection Act of 2002.—Section 212(a) of the Agricultural Bioterrorism Protection Act of 2002 (7 U.S.C. 8401(a)) is amended—

(1) by redesignating paragraph (2) as paragraph (3);

(2) by inserting after paragraph (1) the following:

“(2) Tier I agents.—

“(A) Designation.—Not later than 180 days after the date of enactment of the Weapons of Mass Destruction Prevention and Preparedness Act of 2009, the Secretary, in consultation with the Secretary of Homeland Security, shall designate as ‘Tier I agents’ those agents and toxins listed under paragraph (1)—
“(i) for which the Secretary of Homeland Security has issued a Material Threat Determination under section 319F–2(c)(2) of the Public Health Service Act (42 U.S.C. 247d–6b(c)(2)) regarding the agent or toxin, unless the Secretary of Agriculture determines that such inclusion is unwarranted; or

“(ii) that meet the criteria under subparagraph (B).

“(B) CRITERIA.—In determining whether to classify an agent as a Tier I agent under subparagraph (A), the Secretary, in consultation with the Secretary of Homeland Security, shall consider—

“(i) whether the agent or toxin has significant potential to be used effectively in a biological attack;

“(ii) whether the risk posed by the agent or toxin requires additional biosecurity measures, beyond those required under subsection (b), to prevent misuse domestically or abroad;

“(iii) information available from any biological or bioterrorism risk assessments
conducted by the Department of Homeland Security or other relevant assessments by other agencies or departments; and

“(iv) such other criteria and information that the Secretary determines appropriate and relevant.

“(C) Evaluation of Tier I Agents.—

The Secretary, in consultation with the Secretary of Homeland Security, shall—

“(i) on an ongoing basis, consider the inclusion of additional agents or toxins on the list of Tier I agents, as appropriate; and

“(ii) at least biennially, review the list of Tier I agents to determine whether any agents or toxins should be removed from the list.”; and

(3) by striking “list under paragraph (1)” and inserting “lists under paragraphs (1) and (2)”.

SEC. 102. ENHANCED BIOSECURITY MEASURES.

(a) In General.—Title III of the Homeland Security Act (6 U.S.C. 181 et seq.) is amended by adding at the end the following:

“SEC. 318. ENHANCED BIOSECURITY MEASURES.

“(a) Definitions.—In this section:
“(1) AGENT OR TOXIN.—The term ‘agent or
toxin’ means an agent or toxin regulated under sec-
tion 351A(a)(1) of the Public Health Service Act or
section 212(a)(1) of the Agricultural Bioterrorism
Protection Act of 2002.

“(2) TIER I AGENT.—The term ‘Tier I agent’
means an agent or toxin so designated under section
351A(a)(2) of the Public Health Service Act or sec-
tion 212(a)(2) of the Agricultural Bioterrorism Pro-

“(b) REGULATIONS.—The Secretary, in consultation
with the Secretary of Health and Human Services and the
Secretary of Agriculture, shall through a negotiated rule-
making under subchapter III of chapter 5 of title 5,
United States Code, establish enhanced biosecurity meas-
ures for entities registered under section 351A(d) of the
Public Health Service Act (42 U.S.C. 262a(d)) to use in
handling Tier I agents, which shall include—

“(1) standards for personnel reliability pro-
grams;

“(2) standards for training and requirements
for responsible officials, lab personnel, and support
personnel employed by entities registered under sec-
tion 351A(d) of the Public Health Service Act (42
U.S.C. 262a(d));
“(3) standards for performing laboratory risk assessments;

“(4) risk-based laboratory security performance standards;

“(5) any other standards determined necessary by the Secretary; and

“(6) procedures, with appropriate restrictions on access, for sharing information, including vulnerability assessments, site security plans, and other security related information, as the Secretary determines appropriate, with State, local, and tribal government officials, including law enforcement officials and emergency response providers.

“(c) NEGOTIATED RULEMAKING COMMITTEE.—The negotiated rulemaking committee established by the Secretary under subsection (b) shall include representatives from—

“(1) the Department, including the Office of Intelligence and Analysis, Office of Infrastructure Protection, Science and Technology Directorate, and Office of Health Affairs;

“(2) the Department of Health and Human Services, including the Centers for Disease Control and Prevention;
“(3) the Department of Agriculture, including
the Animal and Plant Health Inspection Service;
“(4) the Department of Defense;
“(5) the Federal Bureau of Investigation;
“(6) for profit research institutions;
“(7) academic research institutions;
“(8) nonprofit research institutions; and
“(9) other interested parties, as the Secretary
determines appropriate.
“(d) TIME REQUIREMENT.—The procedures for the
negotiated rulemaking conducted under subsection (b)
shall be conducted in a timely manner to ensure that—
“(1) any recommendations with respect to pro-
posed regulations are provided to the Secretary not
later than 6 months after the date of enactment of
this section; and
“(2) a final rule is promulgated not later than
12 months after the date of enactment of this sec-
tion.
“(e) FACTORS TO BE CONSIDERED.—In developing
proposed and final standards under subsection (b), the
Secretary and the negotiated rulemaking committee shall
consider factors including—
“(1) the recommendations of the Commission
on the Prevention of Weapons of Mass Destruction
Proliferation and Terrorism (established under section 1851 of the Implementing Recommendations of the 9/11 Commission Act of 2007 (Public Law 110–53; 121 Stat. 501)), the National Science Advisory Board for Biosecurity (established under section 205 of the Pandemic and All-Hazards Preparedness Act (Public Law 109–417; 120 Stat. 2851)), the Trans-Federal Task Force on Optimizing Biosafety and Biocontainment Oversight, and any working group established under Executive Order 13486 (74 Fed. Reg. 2289) relating to strengthening laboratory biosecurity; and

“(2) how any disincentives to biological research arising from enhanced biosecurity measures can be minimized.

“(f) IMPLEMENTATION OF ENHANCED BIOSECURITY MEASURES.—

“(1) IN GENERAL.—Each registered entity that works with Tier I agents shall establish procedures that meet or exceed the standards promulgated under subsection (b).

“(2) TRAINING STANDARDS.—The Secretary of Health and Human Services, in consultation with the Secretary, shall accredit training programs that
meet the standards promulgated under subsection (b).

“(3) PERSONNEL RELIABILITY PROGRAMS.—The Secretary, in consultation with, where appropriate, the Secretary of Health and Human Services and the Secretary of Agriculture, shall evaluate and ensure the implementation of, and compliance with, personnel reliability programs at laboratories that handle Tier I agents developed under the regulations promulgated under subsection (b).

“(4) RISK ASSESSMENTS.—The Secretary, in consultation with, where appropriate, the Secretary of Health and Human Services and the Secretary of Agriculture, shall ensure that facilities handling Tier I agents submit laboratory risk assessments that comply with the standards promulgated under subsection (b).

“(5) SECURITY PLANS.—The Secretary, in consultation with, where appropriate, the Secretary of Health and Human Services and the Secretary of Agriculture, shall ensure that facilities handling Tier I agents submit site security plans that comply with the standards promulgated under subsection (b).

“(6) LABORATORY INSPECTION.—
“(A) INSPECTIONS BY THE DEPARTMENT OF HEALTH AND HUMAN SERVICES.—The Secretary of Health and Human Services and the Secretary shall, with a focus on public health threats, jointly inspect laboratories that handle Tier I agents for compliance with regulations promulgated under the Select Agent Program under section 351A(a)(2) of the Public Health Service Act or section 212(a)(2) of the Agricultural Bioterrorism Protection Act of 2002.

“(B) INSPECTIONS BY THE DEPARTMENT OF AGRICULTURE.—The Secretary of Agriculture and the Secretary shall, with a focus on agricultural threats, jointly inspect laboratories that handle Tier I agents for compliance with the regulations promulgated under the Select Agent Program section 351A(a)(2) of the Public Health Service Act or section 212(a)(2) of the Agricultural Bioterrorism Protection Act of 2002.

“(C) PARTICIPATION BY THE DEPARTMENT OF DEFENSE.—The Secretary of Defense may participate in the inspections described in subparagraphs (A) and (B) in cases where the laboratories being inspected receive funding
from the Department of Defense for work with Tier I agents.

“(D) Joint Inspections for Select Agent Program Compliance.—In the case where a non-Federal laboratory is subject to Select Agent Program Compliance inspection by multiple agencies, such agencies shall, to the maximum extent practicable, conduct such inspections jointly and follow a common set of inspection criteria.

“(E) Inspection Reports.—Inspection reports conducted under this paragraph shall be made available to each Federal agency that supports select agent research at the institution that is the subject of the inspection report.”

(b) Report.—Not later than 60 days after the date of enactment of this Act, the Secretary of Homeland Security, the Secretary of Agriculture, and the Secretary of Health and Human Services shall jointly report to the Committee on Homeland Security and Governmental Affairs, the Committee on Health, Education, Labor, and Pensions, the Committee on Agriculture, Nutrition, and Forestry, and the Committee on Armed Services of the Senate and the Committee on Homeland Security, the Committee on Energy and Commerce, the Committee on
Agriculture, and the Committee on Armed Services of the House of Representatives regarding how the Secretary of Homeland Security, the Secretary of Agriculture, and the Secretary of Health and Human Services intend to comply with the requirements under section 318 of the Homeland Security Act, as added by subsection (a), and shall detail what additional resources, if any, will be required to so comply.

(e) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated such sums as may be necessary to carry out this section and the amendments made by this section.

(d) TECHNICAL AND CONFORMING AMENDMENT.—The table of contents in section 1(b) of the Homeland Security Act of 2002 (6 U.S.C. 101 et seq.) is amended by inserting after the item relating to section 317 the following:

“Sec. 318. Enhanced biosecurity measures.”.

SEC. 103. [LABORATORY AND FACILITY REGISTRATION].

[TBD]

SEC. 104. BACKGROUND CHECKS.

Section 351A(e)(3)(A) of the Public Health Service Act (42 U.S.C. 262a(e)(3)(A)) is amended by adding at the end the following: “In identifying whether an individual is within a category specified in subparagraph (B)(ii)(II), the Attorney General shall consult with the
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Secretary of Homeland Security to determine if the Department of Homeland Security possesses any information relevant to the identification of such an individual by the Attorney General.”.

SEC. 105. BIOLOGICAL LABORATORY PROTECTION.

(a) ACADEMIC AND NONPROFIT HIGH CONTAINMENT BIOLOGICAL LABORATORY PROTECTION GRANTS.—

(1) GRANTS AUTHORIZED.—The Secretary of Homeland Security, acting through the Administrator of the Federal Emergency Management Agency, may award grants to academic and nonprofit organizations to implement security improvements at laboratories that handle Tier I agents or toxins, as so designated under section 351A(a)(2) of the Public Health Service Act or section 212(a)(2) of the Agricultural Bioterrorism Protection Act of 2002.

(2) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to the Department of Homeland Security to carry out this subsection, [TBD] for each of fiscal years 2010 through 2013.

(b) VOLUNTARY VULNERABILITY ASSESSMENTS.—In carrying out section 201(d)(2) of the Homeland Security Act of 2002 (6 U.S.C. 121(d)(2)), the Secretary of Homeland Security shall encourage the voluntary participation
of laboratories working with biological agents and toxins, as so designated under section 351A(a)(1) of the Public Health Service Act (42 U.S.C. 262a(a)(1)) or section 212(a)(1) of the Agricultural Bioterrorism Protection Act of 2002 (7 U.S.C. 8401(a)(1)), commensurate with the risks such agents and toxins pose.

TITLE II—RESPONSE TO A WEAPON OF MASS DESTRUCTION ATTACK

Subtitle A—Ensuring Access to Medical Countermeasures During Emergencies

SEC. 201. NATIONAL MEDICAL COUNTERMEASURE DISPENSING STRATEGY.

Title III of the Public Health Service Act (42 U.S.C. 241 et seq.) is amended by inserting after section 319M the following:

“SEC. 319N. NATIONAL MEDICAL COUNTERMEASURE DISPENSING STRATEGY.

“(a) DEFINITIONS.—In this section—

“(1) the term ‘appropriate committees of Congress’ means—

“(A) the Committee on Homeland Security and Governmental Affairs and the Committee
on Health, Education, Labor, and Pensions of the Senate; and

“(B) the Committee on Homeland Security, the Committee on Energy and Commerce, and the Committee on Oversight and Government Reform of the House of Representatives;

“(2) the term ‘dispense’ means to provide prophylaxis and other related medical material to an affected population in response to a threat or incident; and

“(3) the term ‘medical countermeasures’ means a drug or biological product used to mitigate, prevent, or treat harm from any biological agent (including organisms that cause an infectious disease) or toxin or chemical, radiological, or nuclear threat that may cause a public health emergency.

“(b) STRATEGY.—The Secretary, in coordination with the Secretary of Homeland Security and the Postmaster General, shall develop, coordinate, and maintain a National Medical Countermeasure Dispensing Strategy (referred to in this section as the ‘National MCM Dispensing Strategy’).

“(e) CONTENTS.—The National MCM Dispensing Strategy shall—
“(1) encompass all aspects of the Federal role in dispensing medical countermeasures (referred to in this section as ‘MCMs’) and describe methods by which the Federal Government may assist State, local, and tribal governments to dispense MCMs;

“(2) address a variety of geographical areas, population densities, and demographics;

“(3) create a multilayered approach for the dispensing of MCMs that includes redundancies;

“(4) address—

“(A) a staffing plan for dispensing MCMs, including—

“(i) for MCM dispensing locations;

and

“(ii) for dispensing through the United States Postal Service;

“(B) requirements for timeliness of MCM dispensing;

“(C) appropriateness, effectiveness, and efficiency of differing methods of MCM dispensing;

“(D) measures and evaluations of MCM dispensing effectiveness and efficiency;

“(E) liability issues associated with MCM dispensing, considering—
“(i) the volunteer force;
“(ii) medical personnel;
“(iii) potential adverse reactions to medications;
“(iv) participating employees of the United States Postal Service; and
“(v) security personnel;
“(F) security issues, including—
“(i) partnerships with law enforcement; and
“(ii) necessary levels of security to protect MCM dispensing locations and related personnel, participating employees of the United States Postal Service, and transportation of MCMs;
“(G) communications issues, including—
“(i) communications between the Federal, State, local, and tribal government officials that may be involved in dispensing MCMs;
“(ii) communications between the government and private sector; and
“(iii) the creation of prescripted public message statements informing people how they can acquire MCMs;
“(H) transportation of MCMs to dispensing locations;

“(I) implementation and operations of dispensing plans;

“(J) necessary levels of Federal technical assistance in developing MCM dispensing capabilities; and

“(K) any other topics that the Secretary determines appropriate;

“(5) in coordination with the Secretary of Homeland Security, include a plan to develop a pre-incident public information campaign that will inform the public of—

“(A) personal preparedness for a biological attack or naturally occurring disease outbreak;

“(B) options for obtaining MCMs;

“(C) options for receiving medical care during a public health emergency; and

“(D) any other issues that the Secretary determines appropriate; and

“(6) be exercised regularly in various jurisdictions.

“(d) COORDINATION.—Where appropriate, the Secretary, in coordination with the Secretary of Homeland Security and the Postmaster General, shall coordinate
with State, local, and tribal government officials, private sector, and nongovernmental organizations in development of the National MCM Dispensing Strategy.

“(e) REPORTS TO CONGRESS.—

“(1) IN GENERAL.—The Secretary, in coordination with the Secretary of Homeland Security and the Postmaster General, shall—

“(A) not later than 180 days after the date of enactment of this section, submit the National MCM Dispensing Strategy to the appropriate committees of Congress; and

“(B) not later than 180 days after the submission of the Strategy under subparagraph (A), submit an implementation plan for such Strategy to the appropriate committees of Congress.

“(2) STATUS REPORT.—Not later than 1 year after the submission of the implementation plan under paragraph (1)(B), the Secretary, in coordination with the Secretary of Homeland Security and the Postmaster General, shall submit to the appropriate committees of Congress a report describing the status of the activities taken pursuant to the implementation plan.”.
SEC. 202. TAILORING OF THE NATIONAL MEDICAL COUNTERMEASURE DISPENSING STRATEGY.

(a) IN GENERAL.—

(1) PLANS.—The Secretary of Health and Human Services, in coordination with the Secretary of Homeland Security and, where appropriate, the Postmaster General, shall tailor the National MCM Dispensing Strategy established under section 319N of the Public Health Service Act (as added by section 201) for—

(A) Cities Readiness Initiative jurisdictions and other densely populated metropolitan areas deemed at highest risk of being the target of a terrorist attack;

(B) representative localities of varying geographic sizes, population densities, and demographics; and

(C) any other unique or specific local needs the Secretary of Health and Human Services deems appropriate.

(2) CONSULTATION WITH STATE, LOCAL, AND TRIBAL GOVERNMENTS.—In fulfilling the requirements of paragraph (1), the Secretary of Health and Human Services, in coordination with the Secretary of Homeland Security and, where appropriate, the
Postmaster General, shall consult with State, local, and tribal officials.

(3) REVIEW.—The Secretary of Homeland Security, during and in conjunction with the creation of tailored National MCM Dispensing Strategy plans under paragraph (1), shall—

(A) provide a review of transportation and logistics capabilities for moving medical countermeasures from State, local, and tribal receiving, staging, and storing sites to dispensing locations;

(B) review security plans and capabilities for protecting transportation of medical countermeasures and dispensing locations;

(C) work in coordination with the Postmaster General to review security for protecting United States Postal Service employees performing dispensing;

(D) assist State, local, and tribal governments in building partnerships with law enforcement to perform security for medical countermeasure transportation and dispensing;

(E) assist State, local, and tribal governments in working with emergency response pro-
providers to create appropriate roles for their participation in the tailored Strategy plans; and

(F) determine other assistance that may be offered to State, local, and tribal governments with respect to logistics, transportation, security, or other issues that the Secretary of Homeland Security determines appropriate.

(b) DEFINITION.—In this section, the term “emergency response provider” has the meaning given that term in section 2 of the Homeland Security Act of 2002 (6 U.S.C. 101).

SEC. 203. EXPANSION IN THE USE OF THE U.S. POSTAL SERVICE TO DELIVER MEDICAL COUNTERMEASURES.

(a) IN GENERAL.—The Secretary of Health and Human Services, in coordination with the Postmaster General and the Secretary of Homeland Security, shall expand existing pilot programs to utilize the United States Postal Service to deliver medical countermeasures in a public health emergency.

(b) TIMELINE.—The Postmaster General shall increase the ability of the United States Postal Service to deliver medical countermeasures to homes in—
(1) 5 additional Cities Readiness Initiative jurisdictions not later than 1 year after the date of enactment of this Act; and

(2) 15 additional Cities Readiness Initiative jurisdictions not later than 2 years after the date of enactment of this Act.

(e) USPS MEDKITS.—The Secretary of Health and Human Services, in coordination with the Postmaster General and the Secretary of Homeland Security, shall, on a biennial basis, reevaluate the contents of medkits provided to enrolled United States Postal Service employees under the U.S. Postal Service Dispensing Plan.

(d) CONTENT CONSIDERATION.—In establishing the appropriate contents for medkits under subsection (e), the Secretary of Health and Human Services shall—

(1) consider information available from any biological or bioterrorism risk assessments conducted by the Department of Homeland Security or other relevant assessments by other departments or the intelligence community;

(2) consider the criteria described in section 351A(a)(1)(B) of the Public Health Service Act (42 U.S.C. 262a(a)(1)(B));

(3) consult with private and public organizations, as appropriate; and
(4) consider such other criteria and information that the Secretary of Health and Human Services and the Secretary of Homeland Security determine appropriate.

(e) REPORT.—Not later than 18 months after the date of enactment of this Act, the Secretary of Health and Human Services, the Postmaster General, and the Secretary of Homeland Security shall submit to the appropriate committees of Congress a report on the implementation of this section.

(f) DEFINITIONS.—In this section—

(1) the term “appropriate committees of Congress” means—

(A) the Committee on Homeland Security and Governmental Affairs and the Committee on Health, Education, Labor, and Pensions of the Senate; and

(B) the Committee on Homeland Security, the Committee on Energy and Commerce, and the Committee on Oversight and Government Reform of the House of Representatives;

(2) the term “medkit” means a cache of antibiotics and other medical countermeasures to be used during a public health emergency; and
(3) the term “public health emergency” means a public health emergency declared by the Secretary of Health and Human Services under section 319 of the Public Health Service Act (42 U.S.C. 247d).

(g) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated such sums as may be necessary to carry out this section.

SEC. 204. DISPENSING MEDICAL COUNTERMEASURES THROUGH EMPLOYERS.

(a) DEFINITIONS.—In this section—

(1) the term “appropriate committees of Congress” means—

(A) the Committee on Homeland Security and Governmental Affairs and the Committee on Health, Education, Labor, and Pensions of the Senate; and

(B) the Committee on Homeland Security and the Committee on Energy and Commerce of the House of Representatives;

(2) the terms “biological agent” and “toxin” have the meanings given those terms in section 178 of title 18, United States Code;

(3) the term “covered Federal facility” means a Federal facility determined by the Secretary of Health and Human Services, in coordination with
the Secretary of Homeland Security, to be of sufficient size, workforce level, and geographic location to warrant developing a plan for receiving and dispensing medical countermeasures to employees working in the Federal facility;

(4) the term “dispense” means to provide prophylaxis and other related medical material to an affected population in response to a threat or incident; and

(5) the term “medical countermeasures” means a drug or biological product used to mitigate, prevent, or treat harm from any biological agent (including organisms that cause an infectious disease) or toxin or chemical, radiological, or nuclear threat that may cause a public health emergency.

(b) FEDERAL PLAN.—

(1) IN GENERAL.—The head of each executive agency, in consultation with the Secretary of Health and Human Services and the Secretary of Homeland Security, shall develop a plan to receive and dispense medical countermeasures to individuals employed by the executive agency—

(A) if the individuals work in a covered Federal facility that is likely the target, or located in an area that is likely a target, of an
act of terrorism involving a biological agent or
toxin; or

(B) in the event of a naturally occurring
outbreak of an infectious disease that may re-
result in a national epidemic.

(2) CONTENTS.—The plans developed under
paragraph (1) shall identify individuals in the cov-
ered Federal facility who will be performing receiv-
ing and dispensing of medical countermeasures to
employees.

(3) REVIEW.—The Secretary of Health and
Human Services, in coordination with the Secretary
of Homeland Security, shall review and approve the
plans developed under paragraph (1).

(4) EXERCISES.—On a biennial basis, the head
of each executive agency shall conduct exercises of
the plan developed by the head of the executive
agency under paragraph (1).

(c) OTHER EMPLOYERS.—The Secretary of Health
and Human Services, in coordination with Secretary of
Homeland Security, shall establish a set of best practices
to guide and promote medical countermeasure dispensing
capabilities among private sector entities.

(d) REPORT.—Not later than 180 days after the date
of enactment of this Act, the Secretary of Health and
Human Services, in coordination with the Secretary of Homeland Security, shall submit to the appropriate committees of Congress a report on the implementation of this section.

SEC. 205. PERSONAL MEDKITS FOR EMERGENCY RESPONSE PROVIDERS.

(a) In General.—Title III of the Homeland Security Act of 2002 (6 U.S.C. 181 et seq.), as amended by section 102, is further amended by adding at the end the following:

“SEC. 319. PERSONAL MEDKITS FOR EMERGENCY RESPONDERS.

“(a) Definitions.—In this section—

“(1) the term ‘appropriate committees of Congress’ means—

“(A) the Committee on Homeland Security and Governmental Affairs and the Committee on Health, Education, Labor, and Pensions of the Senate; and

“(B) the Committee on Homeland Security and the Committee on Energy and Commerce of the House of Representatives;

“(2) the term ‘emergency responders’ means an emergency response provider or an active member of a local citizen preparedness organization, including
Community Emergency Response Teams, the Medical Reserve Corps, the Fire Corps, and the citizen preparedness programs of the American Red Cross;

“(3) the term ‘immediate family member’ means an individual who is a cohabitating family member or domestic partner;

“(4) the term ‘medkit’ means a cache of antibiotics and other medical countermeasures to be used during a public health emergency;

“(5) the term ‘medkit program’ means the program established under subsection (b); and

“(6) the term ‘public health emergency’ means a public health emergency declared by the Secretary of Health and Human Services under section 319 of the Public Health Service Act (42 U.S.C. 247d).

“(b) ESTABLISHMENT.—The Secretary, in coordination with the Secretary of Health and Human Services, shall establish a program to distribute medkits to emergency responders and immediate family members of emergency responders.

“(c) MEDKIT PROGRAM COMPONENTS.—

“(1) IN GENERAL.—An emergency responder or immediate family member of an emergency responder participating in the medkit program shall—

“(A) register with the Secretary;
“(B) before the distribution of a medkit, receive training regarding—

“(i) the proper use and dosing of medical countermeasures;

“(ii) reporting of the use of a medkit;

“(iii) the proper storage of a medkit; and

“(iv) any other topic determined appropriate by the Secretary;

“(C) before the distribution of a medkit, undergo appropriate medical screening; and

“(D) report the use of a medkit within a reasonable time period, as established by the Secretary.

“(2) INVENTORY.—The Secretary shall conduct an annual inventory of medkits distributed under the medkit program.

“(d) AUTHORIZATION AND CONTENTS.—

“(1) IN GENERAL.—The Secretary shall coordinate with the Secretary of Health and Human Services and the Commissioner of Food and Drugs to—

“(A) seek a pre-incident emergency use authorization under section 564 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C.
360bbb-3) to allow distribution and use of medkits under the medkit program; and

“(B) establish the appropriate contents for medkits distributed under the medkit program.

“(2) CONTENT CONSIDERATION.—In establishing the appropriate contents for medkits under paragraph (1)(B), the Secretary shall—

“(A) consider information available from any biological or bioterrorism risk assessments conducted by the Department of Homeland Security or other relevant assessments by other departments or the intelligence community;

“(B) consider the criteria described in section 351A(a)(1)(B) of the Public Health Service Act (42 U.S.C. 262a(a)(1)(B));

“(C) consult with relevant private and public organizations; and

“(D) consider such other criteria and information that the Secretary and the Secretary of Health and Human Services determine appropriate.

“(e) REPORT.—Not later than 180 days after the date of enactment of this section, the Secretary shall submit to the appropriate committees of Congress a report on the implementation of this section.
“(f) Authorization of Appropriations.—There are authorized to be appropriated such sums as may be necessary to carry out this section.”.

(b) Technical and Conforming Amendment.—The table of contents in section 1(b) of the Homeland Security Act of 2002 (6 U.S.C. 101 et seq.) is amended by inserting after the item relating to section 318, as added by section 102 of this Act, the following:

“Sec. 319. Personal medkits for emergency responders.”.

SEC. 206. GENERAL PUBLIC MEDKIT PILOT PROGRAM.

(a) Definitions.—In this section—

(1) the term “medical countermeasures” means a drug or biological product used to mitigate, prevent, or treat harm from any biological agent (including organisms that cause an infectious disease) or toxin or chemical, radiological, or nuclear agent that may cause a public health emergency; and

(2) the term “medkit” means a cache of antibi-otics and other medical countermeasures to be used during a public health emergency declared by the Secretary of Health and Human Services under section 319 of the Public Health Service Act (42 U.S.C. 247d).

(b) Pilot Program.—The Secretary of Health and Human Services, in coordination with the Secretary of
Homeland Security, shall conduct a pilot program to study the feasibility of providing personal medkits to the public.

(c) REQUIREMENTS.—In carrying out the pilot program, the Secretary of Health and Human Services, in coordination with the Secretary of Homeland Security, shall ensure that—

1. enrollment of participants in the pilot program encompasses a diverse range of municipality sizes, various geographic locations, and different socioeconomic statuses;

2. the number of enrolled participants in the program shall be expanded significantly beyond the number of those enrolled in the 2006 St. Louis Medkit evaluation study, conducted by the Centers for Disease Control and Prevention, to at least 10,000 participants;

3. the program shall evaluate the ability of households to maintain medkits in the home as directed and reserve for emergency use; and

4. prior to obtaining a medkit, participants are required to receive training regarding—

   (A) proper use and dosing of medical countermeasures;

   (B) reporting of use of medkits;

   (C) proper storage of medkits; and
(D) any other information that the Secretary of Health and Human Services and the Secretary of Homeland Security determine appropriate.

(d) AUTHORIZATION AND CONTENT.—The Secretary of Health and Human Services and the Secretary of Homeland Security shall coordinate with the Commissioner of Food and Drugs—

(1) to obtain an emergency use authorization under section 564 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360bbb–3) to allow distribution of medkits for the purpose of the pilot program; and

(2) to establish the appropriate contents of medkits to the public for the pilot program.

(e) REPORT.—

(1) APPROPRIATE COMMITTEES OF CONGRESS.—In this subsection, the term “appropriate committees of Congress” means—

(A) the Committee on Homeland Security and Governmental Affairs and the Committee on Health, Education, Labor, and Pensions of the Senate; and
(B) the Committee on Homeland Security and the Committee on Energy and Commerce of the House of Representatives.

(2) REPORT.—Not later than 90 days after completion of the program under this section, the Secretary of Health and Human Services, in coordination with the Secretary of Homeland Security, shall submit to the appropriate committees of Congress a report on the conclusions of such program. The report shall include recommendations and conclusions on the feasibility of creating a national medkit program, through which medkits would be distributed widely to the public.

(f) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated such sums as may be necessary to carry out this section.

Subtitle B—Bioforensics Capabilities and Strategy

SEC. 211. BIOFORENSICS CAPABILITIES AND STRATEGY.

(a) IN GENERAL.—Title III of the Homeland Security Act of 2002 (6 U.S.C. 181 et seq.), as amended by section 205, is further amended by adding at the end the following:

“SEC. 320. BIOFORENSICS CAPABILITIES AND STRATEGY.

“(a) DEFINITIONS.—In this section—
“(1) the term ‘appropriate committees of Congress’ means—

“(A) the Committee on Homeland Security and Governmental Affairs, the Committee on the Judiciary, the Committee on Health, Education, Labor, and Pensions, the Committee on Agriculture, Nutrition, and Forestry, and the Committee on Armed Services of the Senate; and

“(B) the Committee on Homeland Security, the Committee on the Judiciary, the Committee on Energy and Commerce, the Committee on Agriculture, and the Committee on Armed Services of the House of Representatives;

“(2) the term ‘bioforensic’ means the scientific discipline dedicated to analyzing evidence from a bioterrorism act, biological agent or toxin based criminal act, or inadvertent biological agent or toxin release for attribution purposes;

“(3) the term ‘National Bioforensics Analysis Center’ means the National Bioforensics Analysis Center established under subsection (b);
“(4) the term ‘national bioforensics repository collection’ means the national bioforensics repository collection established under subsection (c)(1); and

“(5) the term ‘national bioforensics strategy’ means the national bioforensics strategy developed under subsection (d)(1).

“(b) NATIONAL BIOFORENSICS ANALYSIS CENTER.—There is in the Department a National Bioforensics Analysis Center which shall—

“(1) serve as the lead Federal facility to conduct and facilitate bioforensic analysis in support of the executive agency with primary responsibility for responding to the biological incident;

“(2) maintain the national bioforensics repository collection as a reference collection of biological agents and toxins for comparative bioforensic identifications; and

“(3) support threat agent characterization studies and bioforensic assay development.

“(c) NATIONAL BIOFORENSIC REPOSITORY COLLECTION.—

“(1) IN GENERAL.—The National Bioforensics Analysis Center shall maintain a national bioforensics repository collection.
“(2) ACTIVITIES.—The national bioforensics repository collection shall—

“(A) receive, store, and distribute biological threat agents and toxins and related biological agents and toxins;

“(B) serve as a reference collection for comparative bioforensic identifications; and

“(C) support threat agent characterization studies and bioforensic assay development.

“(3) PARTICIPATION.—

“(A) IN GENERAL.—The Secretary, the Attorney General, the Secretary of Health and Human Services, the Secretary of Agriculture, the Secretary of Defense, and the head of any other appropriate executive agency with a biological agent or toxin collection that is useful for the bioforensic analysis of biological incidents, performance of biological threat agent characterization studies, or development of bioforensic assays shall provide all relevant biological agents and toxins, as determined by the Secretary, which shall not include any variola virus, to the national bioforensics repository collection.
“(B) OTHER BIOLOGICAL AGENTS AND TOXINS.—The Secretary shall encourage the contribution of public and private biological agent and toxin collections to the national bioforensics repository collection that were collected or created with support from a Federal grant or contract and that support the functions described in paragraph (2).

“(4) ACCESS.—The Secretary shall—

“(A) provide an executive agency that submits a biological agent or toxin to the national bioforensics repository collection with access to the national bioforensics repository collection; and

“(B) establish a mechanism to provide public and private entities with access to the national bioforensics repository collection, as appropriate, for academic analysis of a biological agent or toxin in the national bioforensics repository collection.

“(5) REPORT.—

“(A) IN GENERAL.—Not later than 180 days after the date of enactment of this section, the Secretary, in consultation with the Attorney General, the Secretary of Health and Human
Services, the Secretary of Agriculture, the Secretary of Defense, and the head of any other appropriate executive agency that will participate in or contribute to the national bioforensics repository collection, shall submit to the appropriate committees of Congress a report regarding the national bioforensics repository collection.

“(B) CONTENTS.—The report submitted under subparagraph (A) shall—

“(i) discuss the status of the establishment of the national bioforensics repository collection;

“(ii) identify domestic and international biological agent and toxin collections that would prove useful in carrying out the functions of the national bioforensics repository collection;

“(iii) examine any access or participation issues affecting the establishment of the national bioforensics repository collection or the ability to support bioforensic analysis, threat characterization studies, or bioforensic assay development, including—
“(I) intellectual property concerns;

“(II) access to collected or created biological agent or toxin collections funded by a Federal grant or contract;

“(III) costs for the national bioforensics repository collection associated with accessing domestic and international biological agent and toxin collections;

“(IV) costs incurred by domestic and international biological agent and toxin collections to allow broad access or contribute biological agents or toxins to the national bioforensics repository collection; and

“(V) access to the national bioforensics repository collection by public and private researchers to support threat characterization studies and bioforensic assay development; and

“(iv) other issues determined appropriate by the Secretary.
“(d) NATIONAL BIOFORENSIC STRATEGY.—

“(1) IN GENERAL.—The Secretary, in coordination with the Attorney General, the Secretary of Health and Human Services, the Secretary of Agriculture, the Secretary of Defense, and the head of any other appropriate executive agency, as determined by the Secretary, shall develop, coordinate, and maintain a national bioforensics strategy.

“(2) CONTENTS.—The national bioforensics strategy shall—

“(A) provide for a coordinated approach across all executive agencies with responsibilities for analyzing evidence from a bioterrorism act, biological agent or toxin based criminal act, or inadvertent biological agent or toxin release for attribution purposes;

“(B) describe the roles and responsibilities of all relevant executive agencies;

“(C) establish mechanisms, in coordination with State, local, and tribal governments, for coordinating with law enforcement agencies in analyzing bioforensic evidence;

“(D) include guidance for collecting, processing, and analyzing samples; and
“(E) provide for a coordinated approach across all executive agencies to support threat agent characterization research, funding, and assay development.

“(3) REPORT.—Not later than 180 days after the date of enactment of this section, the Secretary, in consultation with the Attorney General, the Secretary of Health and Human Services, the Secretary of Agriculture, the Secretary of Defense, and the head of any other appropriate executive agency, as determined by the Secretary, shall submit to the appropriate committees of Congress the national bioforensics strategy.

“(e) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated such sums as may be necessary to carry out this section.”.

(b) TECHNICAL AND CONFORMING AMENDMENT.—
The table of contents in section 1(b) of the Homeland Security Act of 2002 (6 U.S.C. 101 et seq.) is amended by inserting after the item relating to section 319, as added by section 205 of this Act, the following:

“Sec. 320. Bioforensics capabilities and strategy.”.
Subtitle C—Communications Planning

SEC. 221. COMMUNICATIONS PLANNING.

(a) In general.—Title V of the Homeland Security Act of 2002 (6 U.S.C. 311 et seq.) is amended by adding at the end the following:

"SEC. 525. COMMUNICATIONS PLANNING.

"(a) Incorporation of Communications Plans.—

"(1) In general.—Consistent with the obligations of the Department under sections 653(a)(4) and 653(b) of the Post-Katrina Emergency Management Reform Act of 2006 (6 U.S.C. 701 note) and the National Response Framework, the Secretary, through the Administrator of the Federal Emergency Management Agency, shall incorporate into each scenario-based operations plan a communications plan for providing information to the public related to preventing, preparing for, protecting against, and responding to imminent natural disasters, acts of terrorism, and other man-made disasters, including incidents involving the use of weapons of mass destruction and other potentially catastrophic events."
“(2) Consultation.—In developing communications plans under paragraph (1), the Secretary shall consult with State, local, and tribal governments and coordinate, as the Secretary considers appropriate, with other Federal departments and agencies that have responsibilities under the National Response Framework and other relevant Federal departments and agencies.

“(b) Prescribed Messages and Message Templates.—

“(1) In general.—As part of the communication plans, the Administrator shall develop prescribed messages or message templates, as appropriate, to be provided to State, local, and tribal officials so that those officials can quickly and rapidly disseminate critical information to the public in anticipation or in the immediate aftermath of a disaster or incident.

“(2) Development and design.—The prescribed messages or message templates shall—

“(A) be developed, as the Secretary determined appropriate, in consultation with State, local, and tribal governments and in coordination with other Federal departments and agencies that have responsibilities under the Na-
tional Response Framework and other relevant Federal departments and agencies;

“(B) be designed to provide State, local, and tribal governments with accurate, essential, and appropriate information and instructions to the population directly affected by a disaster or incident, including information related to evacuation, sheltering in place, and issues of immediate health and safety; and

“(C) be designed to provide accurate, essential, and appropriate technical information and instructions to emergency response providers and medical personnel responding to a disaster or incident.

“(c) COMMUNICATIONS FORMATS.—In developing the prescribed messages or message templates required under subsection (b), the Administrator shall develop each such prescribed message or message template in multiple formats to ensure delivery—

“(1) in cases where the usual communications infrastructure is unusable as a result of the nature of a disaster or incident; and

“(2) to individuals with disabilities or other special needs and individuals with limited English proficiency in accordance with section 616 of the Post-

“(d) Dissemination and Technical Assistance.—The Administrator shall ensure that all prescribed messages and message templates developed under this section are made available to State, local, and tribal governments so that those governments may incorporate them, as appropriate, into their emergency plans. The Administrator shall also make available relevant technical assistance to those governments to support communications planning.

“(e) Exercises.—To ensure that the prescribed messages or message templates developed under this section can be effectively utilized in a disaster or incident, the Administrator shall ensure that such prescribed messages or message templates are incorporated into exercises conducted under the National Exercise Program described in section 648 of the Post-Katrina Emergency Management Reform Act of 2006 (6 U.S.C. 701 note).

“(f) Report.—Not later than 1 year after the date of the enactment of this section, the Administrator shall submit to the Committee on Homeland Security and Governmental Affairs of the Senate and the Committee on Homeland Security of the House of Representatives a copy of the communications plans required to be developed
under this section, including prescripted messages or message templates developed in conjunction with the plans and a description of the means that will be used to deliver such messages in a natural disaster, act of terrorism, or other man-made disaster.”.

(b) TABLE OF CONTENTS.—The table of contents in section 1(b) of the Homeland Security Act of 2002 (6 U.S.C. 101) is amended by inserting after the item relating to section 524 the following:

“Sec. 525. Communications planning.”.

SEC. 222. PLUME MODELING.

(a) DEFINITIONS.—In this section—

(1) the term “appropriate committees of Congress” means—

(A) the Committee on Homeland Security and Governmental Affairs, the Committee on Energy and Natural Resources, the Committee on Armed Services, and the Committee on Health, Education, Labor, and Pensions of the Senate; and

(B) the Committee on Homeland Security, the Committee on Energy and Commerce, and the Committee on Armed Services of the House of Representatives;
(2) the term “executive agency” has the meaning given that term in section 2 of the Homeland Security Act of 2002 (6 U.S.C. 101);

(3) the term “integrated plume model” means a plume model that integrates protective action guidance and other information as the Secretary of Homeland Security determines appropriate; and

(4) the term “plume model” means the assessment of the location and prediction of the spread of nuclear, radioactive, or chemical fallout and biological pathogens resulting from an explosion or release of nuclear, radioactive, chemical, or biological substances.

(b) DEVELOPMENT.—

(1) IN GENERAL.—The Secretary of Homeland Security shall develop and disseminate integrated plume models to enable rapid response activities following a nuclear, radiological, chemical, or biological explosion or release.

(2) SCOPE.—The Secretary of Homeland Security shall—

(A) ensure the rapid development and distribution of integrated plume models to appropriate officials of the Federal Government and State, local, and tribal governments to enable
immediate response to a nuclear, radiological, chemical, or biological incident; and

(B) establish mechanisms for dissemination by appropriate emergency response officials of the integrated plume models described in paragraph (1) to nongovernmental organizations and the public to enable appropriate response activities by individuals.

(3) Consultation with other departments and agencies.—In developing the integrated plume models described in this section, the Secretary of Homeland Security shall consult, as appropriate, with—

(A) the Secretary of Energy, the Secretary of Defense, the Secretary of Health and Human Services, and the heads of other executive agencies determined appropriate by the Secretary of Homeland Security; and

(B) State, local, and tribal governments and nongovernmental organizations.

(c) Exercises.—The Secretary of Homeland Security shall ensure that the development and dissemination of integrated plume models are assessed during exercises administered by the Department of Homeland Security.
(d) REPORTING.—Not later than 180 days after the date of enactment of this Act, and every year thereafter, the Secretary of Homeland Security shall submit to the appropriate committees of Congress a report regarding—

(1) the development and dissemination of integrated plume models under this section; and

(2) lessons learned from assessing the development and dissemination of integrated plume models during exercises administered by the Department of Homeland Security, and plans for improving the development and dissemination of integrated plume models, as appropriate.

TITLE III—INTERNATIONAL MEASURES TO PREVENT BIOLOGICAL TERRORISM

Subtitle A—Prevention and Protection Against International Biological Threats

SEC. 301. INTERNATIONAL THREAT ASSESSMENT: TIER I PATHOGEN FACILITIES.

(a) REVIEW.—Not later than 6 months after the date of the enactment of this Act, the Director of National Intelligence, in coordination with the Secretary of State, the Secretary of Homeland Security, the Secretary of Health and Human Services, and the heads of other appropriate
Federal agencies, shall complete a global review of international biological security threats to the United States.

(b) CONTENT.—The review under this section shall—

(1) identify the location of biocontainment facilities handling an agent or toxin designated as a Tier I agent under section 351A(a)(2) of the Public Health Service Act or section 212(a)(2) of the Agricultural Bioterrorism Protection Act of 2002 (in this subtitle referred to as a “Tier I agent”) and other dangerous pathogens outside the United States;

(2) describe the security measures of the facilities identified under paragraph (2);

(3) assess global biological risks, including by describing regions or countries with the greatest biological security risk, taking into account factors such as—

(A) the presence and capabilities of a foreign terrorist organization;

(B) the location of highest risk pathogen collections; and

(C) the location of biological laboratories operating with inadequate security measures;

and

(4) assess any gaps in knowledge about international biosecurity threats.
(c) UPDATES.—The Director shall update the review under this section as new or revised intelligence becomes available, but not less frequently than biennially.

(d) REPORT.—Not later than 6 months after the date of the enactment of this Act, and biennially thereafter, the Director shall submit an unclassified report that summarizes the findings of the review or update and, as appropriate, an annex containing the classified review or update to—

(1) the Select Committee on Intelligence of the Senate;

(2) the Committee on Armed Services of the Senate;

(3) the Committee on Health, Education, Labor, and Pensions of the Senate;

(4) the Committee on Homeland Security and Governmental Affairs of the Senate;

(5) the Permanent Select Committee on Intelligence of the House of Representatives.

(6) the Committee on Armed Services of the House of Representatives;

(7) the Committee on Energy and Commerce of the House of Representatives; and

(8) the Committee on Homeland Security of the House of Representatives.
SEC. 302. STRENGTHENING INTERNATIONAL BIOSECURITY.

(a) Technical and Financial Assistance Authorized.—The Secretary of State, in coordination with the Secretary of Health and Human Services, the Secretary of Agriculture, the Secretary of Homeland Security, and other appropriate agencies, shall provide technical and financial assistance, including the activities described in subsection (b), to countries or regions identified by the Threat Assessment mandated in section 301.

(b) Authorized Activities.—

(1) Reducing and securing dangerous pathogen collections.—The Secretary of State shall—

(A) provide assistance to remove or consolidate Tier I agents and other dangerous pathogen collections spread among multiple locations within a country or region into facilities with appropriate safety and security;

(B) provide assistance to replace dangerous or obsolete pathogen isolation techniques with modern diagnostic tools to improve safety and security and to reduce the number and size of dangerous pathogen collections in high risk regions and countries;

(C) encourage countries to eliminate stores of Tier I agents and other dangerous pathogen
collections in exchange for facilitating access to state-of-the-art civilian research at international facilities;

(D) provide assistance to identify and secure Tier I agents and other dangerous pathogen collections in high risk regions and countries; and

(E) carry out such other activities as the Secretary of State considers necessary to achieve the purposes of this subtitle.

(2) PREVENTION AND PROTECTION.—The Secretary of State shall—

(A) raise awareness of international biological threats with foreign governments, academic institutions, and industrial laboratories handling Tier I agents and other dangerous pathogen collections through conferences, seminars and workshops;

(B) provide physical security upgrades at high risk laboratories;

(C) train foreign partners in high risk regions on best laboratory biosecurity practices within facilities handling Tier I agents and other dangerous pathogen collections;
(D) assist foreign countries in establishing personnel reliability measures, as part of a comprehensive laboratory management system;

(E) partner with foreign governments, laboratories, and scientists in activities that strengthen and reinforce best biological safety and security practices within facilities handling Tier I agents and other dangerous pathogen collections;

(F) enhance information sharing through regular meetings of relevant United States and foreign government agencies with subject matter expertise on pathogen security and laboratory best practices in high risk regions;

(G) increase support for United States science and technology agreements and initiatives in high risk regions and countries, including collaborative projects in the areas of bioterrorism prevention, infectious disease control, disease surveillance, bioforensics, laboratory biosafety, and hazardous waste management; and

(H) develop laboratory biosafety and biosecurity standards and guidelines, including personnel reliability measures, for facilities han-
dling Tier I agents and other dangerous pathogen collections.

(3) Science and Technology Exchange.—
The Secretary of State shall—

(A) promote research and development collaboration on highly infectious human, animal and plant disease agents in facilities with appropriate safety and security measures;

(B) provide opportunities for foreign scientists, particularly those located in highest risk countries identified in section 301, to receive training in the United States on biological safety and security best practices, standard operating procedures, and maintenance for high containment facilities; and

(C) facilitate the secure exchange of research samples between laboratories in the United States and foreign national laboratories for the development of vaccines and diagnostics for Tier I agents and other dangerous pathogens.

SEC. 303. PROMOTING SECURE BIOTECHNOLOGY ADVANCEMENT.

(a) Plan To Promote International Adherence to International Agreements.—The Secretary
of State, in coordination with appropriate agencies, shall produce and implement a plan for promoting international adherence to, and implementation of, frameworks, treaties, and other international agreements regarding weapons of mass destruction, including the Biological Weapons Convention, World Health Organization International Health regulations, and United Nations Security Council Resolution 1540.

(b) BIOTECHNOLOGY DISCUSSIONS.—

(1) IN GENERAL.—The Secretary of State shall pursue discussions with government, academic, and industry representatives in countries that possess established or emerging biotechnology sectors or are identified as high-risk countries in the Threat Assessment required under section 301.

(2) TOPICS.—Topics to be discussed under paragraph (1) shall include—

(A) multilateral initiatives intended to promote safe and secure biotechnology;

(B) norms and safeguards necessary to prevent the misuse of biotechnology;

(C) multilateral initiatives intended to counter the threat of biological terrorism; and
(D) other topics on international biosecurity that the Secretary of State considers to be relevant.

Subtitle B—Global Pathogen Surveillance

SEC. 321. SHORT TITLE.

This subtitle may be cited as the “Global Pathogen Surveillance Act of 2009”.

SEC. 322. FINDINGS; PURPOSE.

(a) FINDINGS.—Congress makes the following findings:

(1) The frequency of the occurrence of biological events that could threaten the national security of the United States has increased and is likely increasing. The threat to the United States from such events includes threats from diseases that infect humans, animals, or plants regardless of whether such diseases are introduced naturally, accidentally, or intentionally.

(2) Bioterrorism poses a grave national security threat to the United States. The insidious nature of a bioterrorist attack, the likelihood that the recognition of such an attack would be delayed, and the underpreparedness of the domestic public health infrastructure to respond to such an attack could re-
result in catastrophic consequences following a biological weapons attack against the United States.

(3) The ability to recognize that a country or organization is carrying out a covert biological weapons programs is dependent on a number of indications and warnings. A critical component of this recognition is the timely detection of sentinel events such as community-level outbreaks that could be the earliest indication of an emerging bioterrorist program in a foreign country. Early detection of such events may enable earlier counterproliferation intervention.

(4) A contagious pathogen engineered as a biological weapon and developed, tested, produced, or released in a foreign country could quickly spread to the United States. Considering the realities of international travel, trade, and migration patterns, a dangerous pathogen appearing naturally, accidentally, or intentionally anywhere in the world can spread to the United States in a matter of days, before any effective quarantine or isolation measures could be implemented.

(5) To combat bioterrorism effectively and ensure that the United States is fully prepared to prevent, recognize, and contain a biological weapons at-
tack or emerging infectious disease, measures to strengthen the domestic public health infrastructure and improve domestic event detection, surveillance, and response, while absolutely essential, are not sufficient.

(6) The United States should enhance cooperation with the World Health Organization, regional international health organizations, and individual countries, including data sharing with appropriate agencies and departments of the United States, to help detect and quickly contain infectious disease outbreaks or a bioterrorism agent before such a disease or agent is spread.

(7) The World Health Organization has done an impressive job in monitoring infectious disease outbreaks around the world, notably in the April 2000 establishment and subsequent operation of the Global Outbreak Alert and Response Network.

(8) The capabilities of the World Health Organization depend on the timeliness and quality of the data and information the Organization receives from the countries that are members of the Organization, pursuant to the 2005 revision of the International Health Regulations. Developing countries, in par-
ticular, often lack the necessary resources to build
and maintain effective public health infrastructures.

(9) Developing countries could benefit from—

(A) better trained public health professionals and epidemiologists to recognize disease
patterns;

(B) appropriate laboratory equipment for
diagnosis of pathogens;

(C) disease reporting systems that—

(i) are based on disease and syndrome
surveillance; and

(ii) could enable an effective response
to a biological event to begin at the earliest
possible opportunity;

(D) a narrowing of the existing technology
gap in disease and syndrome surveillance capa-
bilities, based on reported symptoms, and real-
time information dissemination to public health
officials; and

(E) appropriate communications equip-
ment and information technology to efficiently
transmit information and data within national,
international regional, and international health
networks, including inexpensive, Internet-based
geographic information systems and relevant
telephone-based systems for early recognition
and diagnosis of diseases.

(10) An effective international capability to de-
tect, monitor, and quickly diagnose infectious disease
outbreaks will offer dividends not only in the event
of biological weapons development, testing, produc-
tion, and attack, but also in the more likely cases of
naturally occurring infectious disease outbreaks that
could threaten the United States. Furthermore, a
robust surveillance system will serve to deter or con-
tain terrorist use of biological weapons, mitigating
the intended effects of such malevolent uses.

(b) PURPOSES.—The purposes of this subtitle are as
follows:

(1) To enhance the capability of the inter-
national community, through international health or-
ganizations and individual countries, to detect, iden-
tify, and contain infectious disease outbreaks, whether
the cause of those outbreaks is intentional human
action or natural in origin.

(2) To enhance the training of public health
professionals and epidemiologists from eligible devel-
oping countries in advanced Internet-based disease
and syndrome surveillance systems, in addition to
traditional epidemiology methods, so that such pro-
fessionals and epidemiologists may better detect, di-
agnose, and contain infectious disease outbreaks, es-
pecially such outbreaks caused by the pathogens that
may be likely to be used in a biological weapons at-
tack.

(3) To provide assistance to eligible developing
countries to purchase appropriate communications
equipment and information technology to detect,
analyze, and report biological threats, including—

(A) relevant computer equipment, Internet
connectivity mechanisms, and telephone-based
applications to effectively gather, analyze, and
transmit public health information for infec-
tious disease surveillance and diagnosis; and

(B) appropriate computer equipment and
Internet connectivity mechanisms—

(i) to facilitate the exchange of Geo-
graphic Information Systems-based disease
and syndrome surveillance information;
and

(ii) to effectively gather, analyze, and
transmit public health information for in-
fec tious disease surveillance and diagnosis.

(4) To make available greater numbers of pub-
lic health professionals who are employed by the
Government of the United States to international regional and international health organizations, international regional and international health networks, and United States diplomatic missions, as appropriate.

(5) To expand the training and outreach activities of United States laboratories located in foreign countries, including the Centers for Disease Control and Prevention or Department of Defense laboratories, to enhance the public health capabilities of developing countries.

(6) To provide appropriate technical assistance to existing international regional and international health networks and, as appropriate, seed money for new international regional and international networks.

SEC. 323. DEFINITIONS.

In this subtitle:

(1) ELIGIBLE DEVELOPING COUNTRY.—The term “eligible developing country” means any developing country that—

(A) has agreed to the objective of fully complying with requirements of the World Health Organization on reporting public health information on outbreaks of infectious diseases;
(B) has not been determined by the Secretary of State, for purposes of section 40 of the Arms Export Control Act (22 U.S.C. 2780), section 620A of the Foreign Assistance Act of 1961 (22 U.S.C. 2371), or section 6(j) of the Export Administration Act of 1979 (as in effect pursuant to the International Emergency Economic Powers Act; 50 U.S.C. 1701 et seq.), to have repeatedly provided support for acts of international terrorism, unless the Secretary of State exercises a waiver certifying that it is in the national interest of the United States to provide assistance under the provisions of this subtitle; and

(C) is a party to the Convention on the Prohibition of the Development, Production and Stockpiling of Bacteriological (Biological) and Toxin Weapons and on Their Destruction, done at Washington, London, and Moscow April 10, 1972 (26 UST 583).

(2) ELIGIBLE NATIONAL.—The term “eligible national” means any citizen or national of an eligible developing country who—

(A) does not have a criminal background;
(B) is not on any immigration or other United States watch list; and

(C) is not affiliated with any foreign terrorist organization.

(3) INTERNATIONAL HEALTH ORGANIZATION.—The term “international health organization” includes the World Health Organization, regional offices of the World Health Organization, and such similar international organizations as the Pan American Health Organization.

(4) LABORATORY.—The term “laboratory” means a facility for the biological, microbiological, serological, chemical, immunohematological, hematological, biophysical, cytological, pathological, or other medical examination of materials derived from the human body for the purpose of providing information for the diagnosis, prevention, or treatment of any disease or impairment of, or the assessment of the health of, human beings.

(5) DISEASE AND SYNDROME SURVEILLANCE.—The term “disease and syndrome surveillance” means the recording of clinician-reported symptoms (patient complaints) and signs (derived from physical examination and laboratory data) combined with
simple geographic locators to track the emergence of
a disease in a population.

**SEC. 324. ELIGIBILITY FOR ASSISTANCE.**

(a) In General.—Except as provided in subsection
(b), assistance may be provided to an eligible developing
country under any provision of this subtitle only if the gov-
ernment of the eligible developing country—

(1) permits personnel from the World Health
Organization and the Centers for Disease Control
and Prevention to investigate outbreaks of infectious
diseases within the borders of such country; and

(2) provides pathogen surveillance data to the
appropriate agencies and departments of the United
States and to international health organizations.

(b) Waiver.—The Secretary of State may waive the
prohibition set out in subsection (a) if the Secretary of
State determines that it is in the national interest of the
United States to provide such a waiver.

(c) Prior Notice of Waivers.—A waiver pursuant
to subsection (b) may not be executed until 15 days after
the Secretary of State provides to the Committee on For-
egn Relations of the Senate and the Committee on For-
egn Affairs of the House of Representatives written notice
of the intent to issue such waiver and the reasons for
doing so.
SEC. 325. RESTRICTION.

(a) In General.—Notwithstanding any other provision of this subtitle, no foreign national participating in a program authorized under this subtitle shall have access, during the course of such participation, to a select agent or toxin described in section 73.4 of title 42, Code of Federal Regulations (or any corresponding similar regulation) or an overlap select agent or toxin described in section 73.5 of such title (or any corresponding similar regulation) that may be used as, or in, a biological weapon, except in a supervised and controlled setting.

(b) Relationship to Regulations.—The restriction set out in subsection (a) may not be construed to limit the ability of the Secretary of Health and Human Services to prescribe, through regulation, standards for the handling of a select agent or toxin or an overlap select agent or toxin described in such subsection.

SEC. 326. FELLOWSHIP PROGRAM.

(a) Establishment.—There is established a fellowship program under which the Secretary of State, in consultation with the Secretary of Health and Human Services and the Secretary of Homeland Security and subject to the availability of appropriations, shall award fellowships to eligible nationals to pursue public health education or training, as follows:
(1) **Master of Public Health Degree.**—

Graduate courses of study leading to a master of public health degree with a concentration in epidemiology from an institution of higher education in the United States with a Center for Public Health Preparedness, as determined by the Director of the Centers for Disease Control and Prevention.

(2) **Advanced Public Health Epidemiology Training.**—Advanced public health training in epidemiology for public health professionals from eligible developing countries to be carried out at the Centers for Disease Control and Prevention, an appropriate facility of a State, or an appropriate facility of another agency or department of the United States (other than a facility of the Department of Defense or a national laboratory of the Department of Energy) for a period of not less than 6 months or more than 12 months.

(b) **Specialization in Bioterrorism Response.**—In addition to the education or training specified in subsection (a), each recipient of a fellowship under this section (in this section referred to as a “fellow”) may take courses of study at the Centers for Disease Control and Prevention or at an equivalent facility on diagnosis and containment of likely bioterrorism agents.
(c) Fellowship Agreement.—

(1) In general.—A fellow shall enter into an agreement with the Secretary of State under which the fellow agrees—

(A) to maintain satisfactory academic progress, as determined in accordance with regulations issued by the Secretary of State and confirmed in regularly scheduled updates to the Secretary of State from the institution providing the education or training on the progress of the fellow’s education or training;

(B) upon completion of such education or training, to return to the fellow’s country of nationality or last habitual residence (so long as it is an eligible developing country) and complete at least 4 years of employment in a public health position in the government or a non-governmental, not-for-profit entity in that country or, with the approval of the Secretary of State, complete part or all of this requirement through service with an international health organization without geographic restriction; and

(C) that, if the fellow is unable to meet the requirements described in subparagraph (A) or (B), the fellow shall reimburse the United
States for the value of the assistance provided
to the fellow under the fellowship program, to-
gether with interest at a rate that—

(i) is determined in accordance with
regulations issued by the Secretary of
State; and

(ii) is not higher than the rate gen-
erally applied in connection with other
Federal loans.

(2) WAIVERS.—The Secretary of State may
waive the application of subparagraph (B) or (C) of
paragraph (1) on a case by case basis if the Sec-
retary of State determines that—

(A) it is in the national interest of the
United States to provide such a waiver; or

(B) humanitarian considerations require
such a waiver.

(d) AGREEMENT.—The Secretary of State, in con-
sultation with the Secretary of Health and Human Serv-
ices and the Secretary of Homeland Security, is authorized
to enter into an agreement with the government of an eli-
gible developing country under which such government
agrees—
(1) to establish a procedure for the nomination of eligible nationals for fellowships under this section;

(2) to guarantee that a fellow will be offered a professional public health position within the developing country upon completion of the fellow’s studies; and

(3) to submit to the Secretary of State a certification stating that a fellow has concluded the minimum period of employment in a public health position required by the fellowship agreement, including an explanation of how the requirement was met.

(e) PARTICIPATION OF UNITED STATES CITIZENS.—On a case-by-case basis, the Secretary of State may provide for the participation of a citizen of the United States in the fellowship program under the provisions of this section if—

(1) the Secretary of State determines that it is in the national interest of the United States to provide for such participation; and

(2) the citizen of the United States agrees to complete, at the conclusion of such participation, at least 5 years of employment in a public health position in an eligible developing country or at an international health organization.
(f) USE OF EXISTING PROGRAMS.—The Secretary of State, with the concurrence of the Secretary of Health and Human Services, may elect to use existing programs of the Department of Health and Human Services to provide the education and training described in subsection (a) if the requirements of subsections (b), (c), and (d) will be substantially met under such existing programs.

SEC. 327. IN-COUNTRY TRAINING IN LABORATORY TECHNIQUES AND DISEASE AND SYNDROME SURVEILLANCE.

(a) LABORATORY TECHNIQUES.—

(1) IN GENERAL.—The Secretary of State, after consultation with the Secretary of Health and Human Services, the Secretary of Defense, and the Secretary of Homeland Security and in conjunction with elements of those departments that engage in activities of this type overseas, and subject to the availability of appropriations, shall provide assistance for short training courses for eligible nationals who are laboratory technicians or other public health personnel in laboratory techniques relating to the identification, diagnosis, and tracking of pathogens responsible for possible infectious disease outbreaks.

(2) LOCATION.—The training described in paragraph (1) shall be held outside the United
States and may be conducted in facilities of the Centers for Disease Control and Prevention located in foreign countries or in Overseas Medical Research Units of the Department of Defense, as appropriate.

(3) Coordination with Existing Programs.—The Secretary of State shall coordinate the training described in paragraph (1), where appropriate, with existing programs and activities of international health organizations.

(b) Disease and Syndrome Surveillance.—

(1) In General.—The Secretary of State, after consultation with the Secretary of Health and Human Services, the Secretary of Defense, and the Secretary of Homeland Security and in conjunction with elements of those departments that engage in activities of this type overseas, and subject to the availability of appropriations, shall establish and provide assistance for short training courses for eligible nationals who are health care providers or other public health personnel in techniques of disease and syndrome surveillance reporting and rapid analysis of syndrome information using geographic information system tools.

(2) Location.—The training described in paragraph (1) shall be conducted via the Internet or
in appropriate facilities located in a foreign country, as determined by the Secretary of State.

(3) COORDINATION WITH EXISTING PROGRAMS.—The Secretary of State shall coordinate the training described in paragraph (1), where appropriate, with existing programs and activities of international regional and international health organizations.

SEC. 328. ASSISTANCE FOR THE PURCHASE AND MAINTENANCE OF PUBLIC HEALTH LABORATORY EQUIPMENT AND SUPPLIES.

(a) AUTHORIZATION.—The President is authorized to provide, on such terms and conditions as the President may determine, assistance to eligible developing countries to purchase and maintain the public health laboratory equipment and supplies described in subsection (b).

(b) EQUIPMENT AND SUPPLIES COVERED.—The equipment and supplies described in this subsection are—

(1) appropriate, to the extent possible, for use in the intended geographic area;

(2) necessary to collect, analyze, and identify expeditiously a broad array of pathogen strains, which may cause disease outbreaks or may be used in a biological weapon;
(3) compatible with general standards set forth by the World Health Organization and, as appropriate, the Centers for Disease Control and Prevention, to ensure interoperability with international regional and international public health networks; and

(4) not defense articles, defense services, or training, as such terms are defined in the Arms Export Control Act (22 U.S.C. 2751 et seq.).

(e) RULE OF CONSTRUCTION.—Nothing in this section shall be construed to exempt the exporting of goods and technology from compliance with applicable provisions of the Export Administration Act of 1979 (as in effect pursuant to the International Emergency Economic Powers Act; 50 U.S.C. 1701 et seq.).

(d) LIMITATION.—Amounts appropriated to carry out this section shall not be made available for the purchase from a foreign country of equipment or supplies that, if made in the United States, would be subject to the Arms Export Control Act (22 U.S.C. 2751 et seq.) or likely be barred or subject to special conditions under the Export Administration Act of 1979 (as in effect pursuant to the International Emergency Economic Powers Act; 50 U.S.C. 1701 et seq.).

(e) PROCUREMENT PREFERENCE.—In the use of grant funds authorized under subsection (a), preference
should be given to the purchase of equipment and supplies of United States manufacture. The use of amounts appropriated to carry out this section shall be subject to section 604 of the Foreign Assistance Act of 1961 (22 U.S.C. 2354).

(f) COUNTRY COMMITMENTS.—The assistance provided under this section for equipment and supplies may be provided only if the eligible developing country that receives such equipment and supplies agrees to provide the infrastructure, technical personnel, and other resources required to house, maintain, support, secure, and maximize use of such equipment and supplies.

SEC. 329. ASSISTANCE FOR IMPROVED COMMUNICATION OF PUBLIC HEALTH INFORMATION.

(a) ASSISTANCE FOR PURCHASE OF COMMUNICATION EQUIPMENT AND INFORMATION TECHNOLOGY.—The President is authorized to provide, on such terms and conditions as the President may determine, assistance to eligible developing countries to purchase and maintain the communications equipment and information technology described in subsection (b), and the supporting equipment, necessary to effectively collect, analyze, and transmit public health information.

(b) COVERED EQUIPMENT.—The communications equipment and information technology described in this
subsection are communications equipment and information technology that—

(1) are suitable for use under the particular conditions of the geographic area of intended use;

(2) meet the standards set forth by the World Health Organization and, as appropriate, the Secretary of Health and Human Services, to ensure interoperability with like equipment of other countries and international organizations; and

(3) are not defense articles, defense services, or training, as those terms are defined in the Arms Export Control Act (22 U.S.C. 2751 et seq.).

(e) Rule of Construction.—Nothing in this section shall be construed to exempt the exporting of goods and technology from compliance with applicable provisions of the Export Administration Act of 1979 (as in effect pursuant to the International Emergency Economic Powers Act; 50 U.S.C. 1701 et seq.).

(d) Limitation.—Amounts appropriated to carry out this section shall not be made available for the purchase from a foreign country of communications equipment or information technology that, if made in the United States, would be subject to the Arms Export Control Act (22 U.S.C. 2751 et seq.) or likely be barred or subject to special conditions under the Export Administra-

(e) PROCUREMENT PREFERENCE.—In the use of grant funds under subsection (a), preference should be given to the purchase of communications equipment and information technology of United States manufacture. The use of amounts appropriated to carry out this section shall be subject to section 604 of the Foreign Assistance Act of 1961 (22 U.S.C. 2354).

(f) ASSISTANCE FOR STANDARDIZATION OF REPORTING.—The President is authorized to provide, on such terms and conditions as the President may determine, technical assistance and grant assistance to international health organizations to facilitate standardization in the reporting of public health information between and among developing countries and international health organizations.

(g) COUNTRY COMMITMENTS.—The assistance provided under this section for communications equipment and information technology may be provided only if the eligible developing country that receives such equipment and technology agrees to provide the infrastructure, technical personnel, and other resources required to house,
maintain, support, secure, and maximize use of such equipment and technology.

SEC. 330. ASSIGNMENT OF PUBLIC HEALTH PERSONNEL TO UNITED STATES MISSIONS AND INTERNATIONAL ORGANIZATIONS.

(a) In General.—Upon the request of the chief of a diplomatic mission of the United States or of the head of an international regional or international health organization, and with the concurrence of the Secretary of State and of the employee concerned, the head of an agency or department of the United States may assign to the mission or the organization any officer or employee of the agency or department that occupies a public health position within the agency or department for the purpose of enhancing disease and pathogen surveillance efforts in developing countries.

(b) Reimbursement.—The costs incurred by an agency or department of the United States by reason of the detail of personnel under subsection (a) may be reimbursed to that agency or department out of the applicable appropriations account of the Department of State if the Secretary of State determines that the agency or department may otherwise be unable to assign such personnel on a non-reimbursable basis.
SEC. 331. EXPANSION OF CERTAIN UNITED STATES GOVERNMENT LABORATORIES ABROAD.

(a) In General.—Subject to the availability of appropriations and with the concurrence of the government of each host country, the Director of the Centers for Disease Control and Prevention and the Secretary of Defense shall each—

(1) increase the number of personnel assigned to laboratories of the Centers for Disease Control and Prevention or the Department of Defense, as appropriate, located in eligible developing countries that conduct research and other activities with respect to infectious diseases; and

(2) expand the operations of such laboratories, especially with respect to the implementation of on-site training of foreign nationals and activities affecting the region in which the country is located.

(b) Cooperation and Coordination Between Laboratories.—Subsection (a) shall be carried out in such a manner as to foster cooperation and avoid duplication between and among laboratories.
SEC. 332. ASSISTANCE FOR INTERNATIONAL HEALTH NETWORKS AND EXPANSION OF FIELD EPIDEMIOLOGY TRAINING PROGRAMS.

(a) AUTHORITY.—The President is authorized, on such terms and conditions as the President may determine, to provide assistance for the purposes of—

(1) enhancing the surveillance and reporting capabilities of the World Health Organization and existing international regional and international health networks; and

(2) developing new international regional and international health networks.

(b) EXPANSION OF FIELD EPIDEMIOLOGY TRAINING PROGRAMS.—The Secretary of Health and Human Services is authorized to establish new country or regional international Field Epidemiology Training Programs in eligible developing countries, with the concurrence of the government of each host country.

SEC. 333. REPORTS.

Not later than 90 days after the date of enactment of this Act, the Secretary of State, in conjunction with the Secretary of Health and Human Services, the Secretary of Defense, and the Secretary of Homeland Security, shall submit to the Committee on Foreign Relations and the Committee on Homeland Security and Governmental Affairs of the Senate and the Committee on For-
foreign Affairs and the Committee on Homeland Security of
the House of Representatives a report on the implementa-
tion of programs under this subtitle, including an estimate
of the level of funding required to carry out such pro-
grams.

SEC. 334. AUTHORIZATION OF APPROPRIATIONS.

(a) Authorization of Appropriations.—Subject
to subsection (c), there are authorized to be appropriated
for the purpose of carrying out activities under this sub-
title the following amounts:

(1) $40,000,000 for fiscal year 2010.
(2) $75,000,000 for fiscal year 2011.

(b) Availability of Funds.—The amounts appro-
priated pursuant to subsection (a) are authorized to re-
main available until expended.

(c) Limitation on Obligation of Funds.—Not
more than 10 percent of the amount appropriated pursu-
ant to subsection (a)(1) may be obligated before the date
on which a report is submitted, or required to be sub-
mitted, whichever first occurs, under section 333.

TITLE IV—GOVERNMENT
ORGANIZATION

SEC. 401. INTELLIGENCE ON WEAPONS OF MASS DESTRUCTION.

(a) Definitions.—In this section:
(1) **APPROPRIATE COMMITTEES OF CONGRESS.**—The term “appropriate committees of Congress” means—

(A) the Select Committee on Intelligence, the Committee on Appropriations, the Committee on Armed Services, and the Committee on Homeland Security and Governmental Affairs of the Senate; and

(B) the Permanent Select Committee on Intelligence, the Committee on Appropriations, the Committee on Armed Services, and the Committee on Homeland Security of the House of Representatives.

(2) **DIRECTOR.**—The term “Director” means the Director of National Intelligence.

(3) **INTELLIGENCE COMMUNITY.**—The term “intelligence community” has the meaning given that term in section 3 of the National Security Act of 1947 (50 U.S.C. 401a).

(4) **WEAPONS OF MASS DESTRUCTION.**—The term “weapons of mass destruction” means—

(A) any weapon that is designed, intended, or has the capability to cause death, illness, or serious bodily injury to a significant number of persons through the release, dissemination, or
impact of toxic or poisonous chemicals or their precursors;

(B) any weapon involving a biological agent, toxin, or vector (as such terms are defined in section 178 of title 18, United States Code) that is designed, intended, or has the capability to cause death, illness, or serious bodily injury to a significant number of persons; or

(C) any weapon that is designed, intended, or has the capability to release radiation or radioactivity causing death, illness, or serious bodily injury to a significant number of persons.

(b) Strategy for Improving Intelligence Capabilities.—

(1) Requirement for strategy.—Not later than 120 days after the date of the enactment of this Act, the Director shall develop, implement, and submit to the appropriate committees of Congress a strategy for improving the capabilities of the United States for the collection, analysis, and dissemination of intelligence related to weapons of mass destruction, including intelligence related to the relationship between weapons of mass destruction and terrorism.
(2) ELEMENTS.—The strategy required by paragraph (1) shall include a description of each of the following:

(A) Methods for recruitment, training, and retention of individuals with expertise in the collection, analysis, and dissemination of intelligence related to weapons of mass destruction, including appropriate scientific and technical expertise.

(B) Methods for collaboration, as appropriate, with individuals with expertise described in subparagraph (A) who are employed by nongovernmental entities or who are foreign nationals.

(C) Analytic questions and gaps in information related to intelligence on weapons of mass destruction, including such intelligence concerning state actors and nonstate actors, such as smugglers, criminal enterprises, and financiers, that will be used to guide intelligence collection.

(D) Activities for the development of innovative human and technical intelligence collection capabilities and techniques.
(E) Actions necessary to increase the effectiveness and efficiency of the sharing of intelligence on weapons of mass destruction throughout the intelligence community, including a description of statutory, regulatory, policy, technical, security, or other barriers that prevent such sharing, and, as appropriate, the development of uniform standards across the intelligence community for such sharing.

(F) Actions necessary to identify and overcome activities by a foreign government or person to deny or deceive the intelligence community concerning intelligence regarding weapons of mass destruction.

(G) Specific objectives to be accomplished during each year of the first 5-year period after the strategy is submitted to the appropriate committees of Congress and tasks to accomplish such objectives, including—

(i) a list prioritizing such objectives and tasks; and

(ii) a schedule for meeting such objectives and carrying out such tasks.
(H) Assignments of roles and responsibilities to elements of the intelligence community to implement the strategy.

(I) The personnel, financial, and other resources necessary to implement the strategy and a plan for obtaining such resources.

(J) Metrics for measuring the effectiveness and efficiency of the strategy.

(K) A schedule for assessment, review, and, as appropriate, revision of the strategy.

(3) REQUIREMENT TO CONSULT.—In developing the strategy required by paragraph (1), the Director shall consult with appropriate officials of the United States including the Under Secretary of Defense for Acquisition, Technology, and Logistics and the Under Secretary for Science and Technology of the Department of Homeland Security.

(4) FORM.—The strategy required by paragraph (1) may be submitted in a classified form.

(e) REQUIREMENT FOR REPORTS.—

(1) IN GENERAL.—Not less frequently than once during each 180-day period after the date of the submission of the strategy required by subsection (b)(1) to the appropriate committees of Congress, the Director shall submit to the appropriate
committees of Congress a report on the implementation of such strategy.

(2) CONTENT.—Each report required by paragraph (1) shall include the following:

(A) An assessment of whether the objectives and tasks referred to in subsection (b)(2)(G) have been accomplished in accordance with the proposed schedule.

(B) Data corresponding to the metrics required by subsection (b)(2)(J) for measuring the effectiveness and efficiency of the strategy.

(C) An assessment of the actions of the elements of the intelligence community to implement the strategy.

(D) An assessment of whether the personnel, financial, and other resources available are sufficient to implement the strategy.

(E) A description of any revisions to, or plans to revise, any component of the strategy.

SEC. 402. INTELLIGENCE COMMUNITY LANGUAGE CAPABILITIES AND CULTURAL KNOWLEDGE.

(a) DEFINITIONS.—In this section, the terms “appropriate committees of Congress”, “Director”, and “intelligence community” have the meaning given such terms in section 401.
(b) **Strategy for Improving Language Capabilities and Cultural Knowledge.**—

(1) **Requirement for strategy.**—Not later than 180 days after the date of the enactment of this Act, the Director shall develop, implement, and submit to the appropriate committees of Congress a strategy for improving the recruiting, training, and retention of employees of the elements of the intelligence community who possess critical language capabilities and cultural backgrounds relevant to countering terrorism, including individuals who are first or second-generation United States citizens and United States citizens with immediate relatives who are foreign nationals.

(2) **Elements.**—The strategy required by paragraph (1) shall include a description of each of the following:

(A) The current and projected needs of the intelligence community during 1-, 3-, 5-, and 10-year periods, beginning on the date the strategy is submitted to the appropriate committees of Congress, for employees with critical language capabilities and cultural backgrounds relevant to countering terrorism.
(B) Actions necessary to recruit, train, and retain employees with such capabilities or backgrounds.

(C) Barriers to effective recruitment, training, and retention of employees with such capabilities or backgrounds, including security clearance processing, and actions necessary to overcome such barriers.

(D) Specific objectives to be accomplished during each year of the first 5-year period beginning on the date that the strategy is submitted to the appropriate committees of Congress and tasks to accomplish such objectives, including—

(i) a list prioritizing such objectives and tasks; and

(ii) a schedule for meeting such objectives and carrying out such tasks.

(E) Assignments of roles and responsibilities to elements of the intelligence community to carry out the strategy.

(F) The personnel, financial, and other resources necessary to implement the strategy, and a plan for obtaining such resources.
(G) Metrics for measuring the effectiveness and efficiency of the strategy.

(H) A schedule for assessment, review, and, as appropriate, revision of the strategy.

(c) REQUIREMENT FOR REPORTS.—

(1) IN GENERAL.—Not less frequently than once during each 180-day period after the date of the submission of the strategy required by subsection (b)(1) to the appropriate committees of Congress, the Director shall submit to the appropriate committees of Congress a report on the implementation of such strategy.

(2) CONTENT.—Each report required by paragraph (1) shall include the following:

(A) An assessment of whether the objectives referred to in subsection (b)(2)(D) have been accomplished in accordance with the proposed schedule.

(B) Data corresponding to the metrics required by subsection (b)(2)(G) for measuring the effectiveness and efficiency of the strategy.

(C) An assessment of the actions by the elements of the intelligence community to implement the strategy.
(D) An assessment of whether the personnel, financial, and other resources available are sufficient to implement the strategy.

(E) A description of any revisions to, or plans to revise, any component of the strategy.

SEC. 403. COUNTERTERRORISM TECHNOLOGY ASSESSMENTS.

(a) AGENCY DEFINED.—In this section, the term “agency” means any department, agency, or instrumentality of the executive branch of the Government.

(b) REQUIREMENT FOR INTERDISCIPLINARY CAPABILITY OF THE CONGRESSIONAL RESEARCH SERVICE.—

(1) IN GENERAL.—The Director of the Congressional Research Service shall establish an interdisciplinary capability to further the Congressional Research Service’s responsibilities to advise Congress pursuant to section 203(d) of the Legislative Reorganization Act of 1946 (2 U.S.C. 166(d)) concerning technology or technological applications developed or used for countering terrorism.

(2) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to implement this subsection the following amounts:

(A) For fiscal year 2011, $1,500,000.

(B) For fiscal year 2012, $3,000,000.
(C) For fiscal year 2013, $4,500,000.

(D) For fiscal year 2014, $6,000,000.

(E) For fiscal year 2015 and for each fiscal year thereafter, $7,500,000.

(c) ASSESSMENTS OF AVAILABLE TECHNOLOGY.—

(1) REQUIREMENT FOR ASSESSMENTS.—Pursuant to section 717 of title 31, United States Code, the Comptroller General of the United States shall conduct assessments of technology or technological applications that are—

(A) being developed or used or are available to be used for countering terrorism by a program or activity that is carried out by an agency; or

(B) proposed to be developed or used or are potentially available to be used pursuant to—

(i) a legislative proposal under consideration by a committee of the Senate or the House of Representatives; or

(ii) a recommendation submitted to Congress by the President or an agency.

(2) SCOPE OF ASSESSMENT.—Each assessment of a technology or technological application carried out under paragraph (1) shall evaluate the actual or
anticipated impact, effectiveness, or efficiency of the
technology or technological application for count-
tering terrorism, including evaluating—

(A) any test results related to the tech-
nology or technological application;

(B) any alternatives to the technology or

technological application;

(C) the actual or anticipated operational
requirements of the technology or technological
application, including the logistical needs, per-
sonnel training, and procedures for utilizing the

technology or technological application;

(D) the actual or anticipated costs, as
compared to the actual or anticipated benefits
of the technology or technological application;

(E) any actual or anticipated counter-
measures to the technology or technological ap-
plication by terrorists; and

(F) technology assessments or related re-
ports prepared by or for an agency for the tech-
nology or technological application.

(3) TECHNOLOGY ASSESSMENT CAPABILITY.—

(A) REQUIREMENT TO ESTABLISH.—The
Comptroller General of the United States shall
establish an interdisciplinary capability to per-
form the assessments required by paragraph (1) that includes officers and employees who have expertise in science, engineering, technology, homeland security, counterterrorism, or other fields that the Comptroller General considers appropriate to conduct such assessments.

(B) APPOINTMENT AND PROCUREMENT.—The Comptroller General shall appoint, pay, and assign officers and employees pursuant to subsection (a) of section 731 of title 31, United States Code, and may procure the services or assistance of experts and consultants pursuant to subsection (e) of such section, in order to acquire the expertise in science, technology, or other fields necessary to conduct the assessments required by paragraph (1).

(4) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to implement this subsection the following amounts:

(A) For fiscal year 2011, $2,000,000.
(B) For fiscal year 2012, $5,000,000.
(C) For fiscal year 2013, $8,000,000.
(D) For fiscal year 2014, $12,000,000.
(E) For fiscal year 2015 and for each fiscal year thereafter, $15,000,000.
(d) ASSESSMENTS OF FUTURE TECHNOLOGY.—

(1) REQUIREMENT FOR ASSESSMENTS.—The Comptroller General of the United States shall, as appropriate, enter into arrangements with the National Academy of Sciences to assess technology and technological applications that are being developed or could be developed for purposes of countering terrorism.

(2) SCOPE OF ASSESSMENTS.—Each assessment carried out under paragraph (1) shall include—

(A) determining trends related to the development of technology or technological applications and their implications for countering terrorism;

(B) identifying particular technology or technological applications that potentially may become available or are necessary for countering terrorism; and

(C) recommending investments to be made by an agency in the development of particular technology or technological applications.

(3) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to implement this subsection the following amounts:
(A) For fiscal year 2011, $1,000,000.

(B) For fiscal year 2012, $2,000,000.

(C) For fiscal year 2013, $3,000,000.

(D) For fiscal year 2014, $4,000,000.

(E) For fiscal year 2015 and for each fiscal year thereafter, $5,000,000.

SEC. 404. [UNITED STATES COORDINATOR FOR THE PREVENTION OF WEAPONS OF MASS DESTRUCTION PROLIFERATION AND TERRORISM].

[TBD]

TITLE V—EMERGENCY MANAGEMENT AND CITIZEN ENGAGEMENT

SEC. 501. COMMUNICATION OF THREAT INFORMATION AND ALERTS.

(a) FINDING.—Congress finds that the Commission on the Prevention of Weapons of Mass Destruction Proliferation and Terrorism recommended that “the Federal Government should practice greater openness of public information so that citizens better understand the threat and the risk this threat poses to them.”.

(b) TERRORISM THREAT AWARENESS.—Section 203 of the Homeland Security Act of 2002 (6 U.S.C. 124) is amended by adding at the end the following:

“(c) TERRORISM THREAT AWARENESS.—
“(1) TERRORISM THREAT AWARENESS.—The Secretary, in coordination with the Director of the Federal Bureau of Investigation, shall ensure that information concerning terrorist threats is available to the general public within the United States.

“(2) THREAT BULLETINS.—

“(A) IN GENERAL.—Consistent with the requirements of subsection (b), the Secretary shall on a timely basis prepare unclassified terrorism-related threat and risk assessments.

“(B) REQUIREMENTS.—Each assessment required under subparagraph (A) shall—

“(i) include guidance to the general public for preventing and responding to acts of terrorism; and

“(ii) be made available on the website of the Department and other publicly accessible websites, communication systems, and information networks.

“(3) GUIDANCE TO STATE, LOCAL, AND TRIBAL GOVERNMENTS.—The Secretary shall provide to State, local, and tribal governments written guidance on how to disseminate information about terrorism-related threats and risks to the general public within their jurisdictions.
“(4) Use of Existing Resources.—The Secretary shall use websites, communication systems, and information networks in operation on the date of an assessment under this subsection to satisfy the requirements of paragraph (2)(B)(ii).”.

(c) Responsibilities of the Secretary.—Section 201(d)(8) of the Homeland Security Act of 2002 (6 U.S.C. 121(d)(8)) is amended by striking “and to agencies of State” and all that follows and inserting “to State, local, tribal, and private entities with such responsibilities, and, as appropriate, to the general public, in order to assist in deterring, preventing, or responding to acts of terrorism against the United States.”.

(d) Reporting Requirement.—Not later than 180 days after the date of enactment of this Act, the Secretary of Homeland Security shall submit to the Committee on Homeland Security and Governmental Affairs of the Senate and the Committee on Homeland Security of the House of Representatives a report on the implementation of section 203 of the Homeland Security Act of 2002, as amended by subsection (b).
SEC. 502. GUIDELINES CONCERNING WEAPONS OF MASS DESTRUCTION.

(a) Establishment of Guidelines.—Not later than 1 year after the date of enactment of this Act, the Secretary of Homeland Security shall—

(1) develop guidelines, in coordination with State, local, and tribal governments and representatives of emergency response provider organizations, for police, fire, emergency medical services, emergency management, and public health personnel, for responding to an explosion or release of nuclear, biological, radiological, or chemical material; and

(2) make the guidelines developed under paragraph (1) available to State, local, and tribal governments, nongovernmental organizations, and the private sector.

(b) Contents.—The guidelines developed under subsection (a)(1) shall contain, at a minimum—

(1) protective action guidelines for ensuring the health and safety of emergency response providers;

(2) information regarding the effects of the biological, chemical, or radiological agent on those exposed to the agent; and

(3) information regarding how emergency response providers and mass care facilities may most effectively deal with individuals affected by an inci-
dent involving a nuclear, biological, radiological, or
chemical material.

(c) Review and Revision of Guidelines.—The
Secretary of Homeland Security shall—

(1) not less frequently than every 2 years, re-
view the guidelines developed under subsection
(a)(1);

(2) make revisions to the guidelines as appro-
priate; and

(3) make the revised guidelines available to
State, local, and tribal governments, nongovern-
mental organizations, the private sector, and the
general public.

(d) Procedures for Developing and Revising
Guidelines.—In carrying out the requirements of this
section, the Secretary of Homeland Security shall estab-
lish procedures—

(1) to inventory any existing relevant hazardous
material response guidelines;

(2) to enable the public to submit recommenda-
tions of areas for which guidelines could be devel-
oped under subsection (a)(1);

(3) to determine which entities should be con-
sulted in developing or revising the guidelines;
(4) to prioritize, on a regular basis, guidelines that should be developed or revised; and
(5) to develop and disseminate the guidelines in accordance with the prioritization under paragraph (4).

(e) CONSULTATIONS.—The Secretary of Homeland Security shall develop and revise the guidelines developed under subsection (a)(1), and the procedures required under subsection (d), in consultation with—
(1) the Secretary of Energy;
(2) the Secretary of Health and Human Services;
(3) other Federal departments and agencies, as appropriate;
(4) the National Advisory Council established under section 508 of the Homeland Security Act of 2002 (6 U.S.C. 318);
(5) State, local, and tribal governments; and
(6) nongovernmental organizations and private industry.

(f) REPORTING REQUIREMENTS.—Not later than 180 days after the date of enactment of this Act, 1 year after such date of enactment, and annually thereafter, the Secretary of Homeland Security shall provide the Committee on Homeland Security and Governmental Affairs
of the Senate and the Committee on Homeland Security
of the House of Representatives with—

(1) a description of the procedures established
under subsection (d);

(2) any guidelines in effect on the date of the
report;

(3) a list of entities that to which the guidelines
described in paragraph (2) were disseminated;

(4) a plan for reviewing the guidelines described
in paragraph (2), in accordance with subsection (e);

(5) the prioritized list of the guidelines required
under subsection (d)(4), and the methodology used
by the Secretary of Homeland Security for such
prioritization; and

(6) a plan for developing, revising, and dissemi-
nating the guidelines.

(g) DEFINITION.—In this section, the term “emer-
gency response provider” has the meaning given that term
in section 2 of the Homeland Security Act of 2002 (6

SEC. 503. INDIVIDUAL AND COMMUNITY PREPAREDNESS.

(a) INDIVIDUAL AND COMMUNITY PREPAREDNESS.—

311 et seq.), as amended by section 221, is amended by
adding at the end the following:
“SEC. 526. INDIVIDUAL AND COMMUNITY PREPAREDNESS.

“(a) In General.—The Administrator shall assist State, local, and tribal governments in improving and promoting individual and community preparedness for natural disasters, acts of terrorism, and other man-made disasters, including incidents involving the use of weapons of mass destruction and other potentially catastrophic events, by—

“(1) developing guidelines and checklists of recommended actions for individual and community prevention and preparedness efforts and disseminating such guidelines and checklists to communities and individuals;

“(2) disseminating the guidelines developed under section 502 of the Weapons of Mass Destruction Prevention and Preparedness Act of 2009 to communities and individuals, as appropriate;

“(3) compiling and disseminating information on best practices in individual and community preparedness;

“(4) providing information and training materials in support of individual and community preparedness efforts;

“(5) conducting individual and community preparedness outreach efforts; and
“(6) such other actions as the Administrator determines appropriate.

“(b) COORDINATION.—Where appropriate, the Administrator shall coordinate with private sector and non-governmental organizations to promote individual and community preparedness.

“(c) SUPPORT FOR VOLUNTARY PROGRAMS.—In carrying out the responsibilities described in subsection (a), the Administrator shall, where appropriate, work with and provide support to individual and community preparedness programs, such as the Community Emergency Response Team Program, Fire Corps, Medical Reserve Corps Program, Volunteers in Police Service, USAonWatch-Neighborhood Watch, and other voluntary programs.

“(d) DIRECTOR.—The Administrator shall appoint a Director of Community Preparedness to coordinate and oversee the individual and community preparedness efforts of the Agency.

“(e) GRANTS.—

“(1) IN GENERAL.—The Administrator may make grants to States to support individual and community preparedness efforts, including through the Citizen Corps Program.

“(2) APPROPRIATIONS.—There are authorized to be appropriated for grants under this section—
“(A) $15,000,000 for fiscal year 2010;
(B) $20,000,000 for fiscal year 2011;
(C) $25,000,000 for fiscal year 2012;
(D) $30,000,000 for fiscal year 2013;
(E) $35,000,000 for fiscal year 2014; and
(F) $40,000,000 for fiscal year 2015.”.

(b) ENHANCING PREPAREDNESS.—Section 504(a) of the Homeland Security Act of 2002 (6 U.S.C. 314(a)) is amended—

(1) by redesignating paragraphs (20) and (21) as paragraphs (21) and (22), respectively; and
(2) by inserting after paragraph (19) the following:

“(20) enhancing and promoting the preparedness of individuals and communities for natural disasters, acts of terrorism, and other man-made disasters;”.

(c) TABLE OF CONTENTS.—The table of contents in section 1(b) of the Homeland Security Act of 2002 (6 U.S.C. 101 et seq.), as amended by section 221, is amended by inserting after the item relating to section 525 the following:

“Sec. 526. Individual and community preparedness.”.