

§ 247d-7b. Emergency system for advance registration of volunteer health professional

(a) In general

Not later than 12 months after December 19, 2006, the Secretary shall link existing State verification systems to maintain a single national interoperable network of systems, each system being maintained by a State or group of States, for the purpose of verifying the credentials and licenses of health care professionals who volunteer to provide health services during a public health emergency. Such health care professionals may include members of the National Disaster Medical System, members of the Medical Reserve Corps, and individual health care professionals.

(b) Requirements

The interoperable network of systems established under subsection (a) (referred to in this section as the “verification network”) shall include—

(1) with respect to each volunteer health professional included in the verification network—

(A) information necessary for the rapid identification of, and communication with, such professionals; and

(B) the credentials, certifications, licenses, and relevant training of such individuals; and

(2) the name of each member of the Medical Reserve Corps, the National Disaster Medical System, and any other relevant federally-sponsored or administered programs determined necessary by the Secretary.

(c) Other assistance

The Secretary may make grants and provide technical assistance to States and other public or nonprofit private entities for activities relating to the verification network developed under subsection (a).

(d) Accessibility

The Secretary shall ensure that the verification network is electronically accessible by State, local, and tribal health departments and can be linked with the identification cards under section 300hh-15 of this title.

(e) Confidentiality

The Secretary shall establish and require the application of and compliance with measures to ensure the effective security of, integrity of, and access to the data included in the verification network.

(f) Coordination

The Secretary shall coordinate with the Secretary of Veterans Affairs and the Secretary of Homeland Security to assess the feasibility of integrating the verification network under this section with the VetPro system of the Department of Veterans Affairs and the National Emergency Responder Credentialing System of the Department of Homeland Security. The Secretary shall, if feasible, integrate the verification network under this section with such VetPro system and the National Emergency Responder Credentialing System.

(g) Updating of information

The States that are participants in the verification network shall, on at least a quarterly basis, work with the Director to provide for the updating of the information contained in the verification network.

(h) Clarification

Inclusion of a health professional in the verification network shall not constitute appointment of such individual as a Federal employee for any purpose, either under section 300hh-11(c) of this title or otherwise. Such appointment may only be made under section 300hh-11 or 300hh-15 of this title.

(i) Health care provider licenses

The Secretary shall encourage States to establish and implement mechanisms to waive the application of licensing requirements applicable to health professionals, who are seeking to provide medical services (within their scope of practice), during a national, State, local, or tribal public health emergency upon verification that such health professionals are licensed and in good standing in another State and have not been disciplined by any State health licensing or disciplinary board. In order to inform the development of such mechanisms by States, the Secretary shall make available information and material provided by States that have developed mechanisms to waive the application of licensing requirements to applicable health professionals seeking to provide medical services during a public health emergency. Such information shall be made publicly available in a manner that does not compromise national security.

(j) Rule of construction

This section may not be construed as authorizing the Secretary to issue requirements regarding the provision by the States of credentials, licenses, accreditations, or hospital privileges.

(k) Authorization of appropriations

For the purpose of carrying out this section, there are authorized to be appropriated \$5,000,000 for each of fiscal years 2019 through 2023.

(July 1, 1944, ch. 373, title III, §319I, as added Pub. L. 107-188, title I, §107, June 12, 2002, 116 Stat. 608; amended Pub. L. 109-417, title III, §303(b), Dec. 19, 2006, 120 Stat. 2857; Pub. L. 113-5, title II, §203(b)(1), Mar. 13, 2013, 127 Stat. 175; Pub. L. 116-22, title II, §207(a), June 24, 2019, 133 Stat. 926.)

AMENDMENTS

2019—Pub. L. 116-22, §207(a)(1), substituted “volunteer health professional” for “health professions volunteers” in section catchline.

Subsec. (a). Pub. L. 116-22, §207(a)(2), inserted at end “Such health care professionals may include members of the National Disaster Medical System, members of the Medical Reserve Corps, and individual health care professionals.”

Subsec. (i). Pub. L. 116-22, §207(a)(3), inserted at end “In order to inform the development of such mechanisms by States, the Secretary shall make available information and material provided by States that have developed mechanisms to waive the application of licensing requirements to applicable health professionals seeking to provide medical services during a public

health emergency. Such information shall be made publicly available in a manner that does not compromise national security.”

Subsec. (k). Pub. L. 116-22, § 207(a)(4), substituted “2019 through 2023” for “2014 through 2018”.

2013—Subsec. (k). Pub. L. 113-5 substituted “\$5,000,000 for each of fiscal years 2014 through 2018” for “\$2,000,000 for fiscal year 2002, and such sums as may be necessary for each of the fiscal years 2003 through 2011”.

2006—Subsecs. (a), (b). Pub. L. 109-417, § 303(b)(2), added subsecs. (a) and (b) and struck out former subsecs. (a) and (b) which related to establishment of a verification system and provisions regarding its promptness and efficiency.

Subsec. (c). Pub. L. 109-417, § 303(b)(3), substituted “network” for “system”.

Subsecs. (d) to (k). Pub. L. 109-417, § 303(b)(1), (4), (5), added subsecs. (d) to (i), redesignated former subsecs. (e) and (f) as (j) and (k), respectively, substituted “2011” for “2006” in subsec. (k), and struck out heading and text of former subsec. (d). Text read as follows: “The Secretary may encourage each State to provide legal authority during a public health emergency for health professionals authorized in another State to provide certain health services to provide such health services in the State.”

§ 247d-7c. Supplies and services in lieu of award funds

(a) In general

Upon the request of a recipient of an award under any of sections 247d through 247d-7b of this title or section 247d-7d of this title, the Secretary may, subject to subsection (b), provide supplies, equipment, and services for the purpose of aiding the recipient in carrying out the purposes for which the award is made and, for such purposes, may detail to the recipient any officer or employee of the Department of Health and Human Services.

(b) Corresponding reduction in payments

With respect to a request described in subsection (a), the Secretary shall reduce the amount of payments under the award involved by an amount equal to the costs of detailing personnel and the fair market value of any supplies, equipment, or services provided by the Secretary. The Secretary shall, for the payment of expenses incurred in complying with such request, expend the amounts withheld.

(July 1, 1944, ch. 373, title III, § 319J, as added Pub. L. 107-188, title I, § 110, June 12, 2002, 116 Stat. 611.)

§ 247d-7d. Security for countermeasure development and production

(a) In general

The Secretary, in consultation with the Attorney General and the Secretary of Defense, may provide technical or other assistance to provide security to persons or facilities that conduct development, production, distribution, or storage of priority countermeasures (as defined in section 247d-6(e)(4) of this title).

(b) Guidelines

The Secretary may develop guidelines to enable entities eligible to receive assistance under subsection (a) to secure their facilities against potential terrorist attack.

(July 1, 1944, ch. 373, title III, § 319K, as added Pub. L. 107-188, title I, § 124, June 12, 2002, 116

Stat. 614; amended Pub. L. 116-22, title VII, § 705(a)(2), June 24, 2019, 133 Stat. 964.)

AMENDMENTS

2019—Subsec. (a). Pub. L. 116-22 substituted “section 247d-6(e)(4)” for “section 247d-6(h)(4)”.

§ 247d-7e. Biomedical Advanced Research and Development Authority

(a) Definitions

In this section:

(1) BARDA

The term “BARDA” means the Biomedical Advanced Research and Development Authority.

(2) Fund

The term “Fund” means the Biodefense Medical Countermeasure Development Fund established under subsection (d).

(3) Other transactions

The term “other transactions” means transactions, other than procurement contracts, grants, and cooperative agreements.

(4) Qualified countermeasure

The term “qualified countermeasure” has the meaning given such term in section 247d-6a of this title.

(5) Qualified pandemic or epidemic product

The term “qualified pandemic or epidemic product” has the meaning given the term in section 247d-6d of this title.

(6) Advanced research and development

(A) In general

The term “advanced research and development” means, with respect to a product that is or may become a qualified countermeasure or a qualified pandemic or epidemic product, activities that predominantly—

(i) are conducted after basic research and preclinical development of the product; and

(ii) are related to manufacturing the product on a commercial scale and in a form that satisfies the regulatory requirements under the Federal Food, Drug, and Cosmetic Act [21 U.S.C. 301 et seq.] or under section 262 of this title.

(B) Activities included

The term under subparagraph (A) includes—

(i) testing of the product to determine whether the product may be approved, cleared, or licensed under the Federal Food, Drug, and Cosmetic Act [21 U.S.C. 301 et seq.] or under section 262 of this title for a use that is or may be the basis for such product becoming a qualified countermeasure or qualified pandemic or epidemic product, or to help obtain such approval, clearance, or license;

(ii) design and development of tests or models, including animal models, for such testing;

(iii) activities to facilitate manufacture of the product on a commercial scale with consistently high quality, as well as to im-